

Mental Health: Tribunal Procedure (2nd edn). By LARRY GOSTIN and PHIL FENNELL. London: Longman. 1992. 290 pp. £25.00.

As one who has sat on the wrong side of the tribunal table for some 20 years, I approached this manual for those representing patients with some trepidation. I need not have worried. Judged as a guide to procedure I found it clear, comprehensive and, I believe, fair to all parties. It covers everything from the admission of informal patients to the recall of restricted ones. It warns against persistently hostile questions being put to the responsible medical officer, and the need to obtain the cooperation of all those who might provide aftercare. Informality is still the fashion.

Unfortunately, the chapter on medical issues is the weakest part of the book – old-fashioned, poorly organised with unnecessary, idiosyncratic and inaccurate lists of drugs, and the Code of Practice sandwiched between paranoid states and learning disability. There is no attempt here to describe how mental disorders might lead to disturbed, irresponsible, suicidal or dangerous behaviour, or what psychiatrists might be trying to prevent when they recommend compulsory admission. Clearly, if one of the aims of this book is to educate the legal profession about psychiatry, it will miss its mark.

Doctors, however, can learn much from it. The authors cite no less than 34 statutes and 73 cases, a measure of how the law relating to tribunals has developed particularly since the 1983 Mental Health Act. Here, conveniently indexed, are our friends *Winterwerp v. Netherlands*, *X v. United Kingdom*, and *R v. Hallstrom*, to name only three.

There are, of course, issues which are not discussed. The role of relatives, the independence of 'independent' medical reports, and the problem of what to do when the client's instructions are not based on reality come to mind, but these will not prevent me keeping my copy.

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Counselling for Anxiety Problems. By RICHARD HALLAM. London: Sage Publications. 1992. 178 pp. £9.95.

This is a well planned book which will be a helpful introduction to the subject of anxiety and its behavioural and cognitive treatment for those in the counselling profession and for other professionals who deal with anxious patients.

The first chapter provides a theoretical framework for anxiety which could be usefully read by all in psychiatry; it is clear and thoughtful. Following chapters look at the genesis of anxiety and the assessment and treatment of patients. There are detailed case histories which illustrate the suggested format for working with these patients, demonstrating those factors which are

highlighted and focused upon, and those which are therapeutically ignored.

There are also excellent chapters on the role and art of confrontation and on the problems of ending therapy in a way which confirms, rather than destabilises, the gains already made by the patient.

Each chapter ends with suggested further reading – the references described so that the reader can choose those most pertinent to themselves. As well as this impressive list of references, there is also a list of explanatory booklets, a hand-out for anxious patients, and a list of questionnaires useful in assessing the extent of a person's anxiety problems.

All this adds up to a helpful book which highlights, with a refreshing simplicity, a proven way of treating anxious patients.

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Neurological Basis of Childhood Psychopathology. Developmental Clinical Psychology and Psychiatry Series. Volume 25. By GEORGE W. HYND and STEPHEN R. HOOPER. London: Sage Publications. 1992. 133 pp. £11.50.

Hynd & Hooper's book provides an introduction to neurological foundations and neuropsychological models of childhood psychopathology, broadly defining 'psychopathology' to include selected psychiatric and developmental disorders and specifically discussing depression, attention-deficit hyperactivity disorder, Tourette's syndrome, mental retardation, autism and reading disability. Given recent technological advances in brain – behaviour research and the accumulation of data in need of critical appraisal and integration, this volume promised to be a welcome addition to Sage publications' generally laudable series.

However, although the introductory chapters commendably raise issues about 'normality', interactions between cognitive and emotional development, syndrome validation, and the importance of accurate delineation of brain dysfunction in countering increased vulnerability for psychiatric disorder, consideration of these issues is disappointing in subsequent discussions of specific disorders. Comorbidity of disorders receives scant attention despite implications for syndrome validation, and division of disorders into 'psychiatric' and 'developmental' appears somewhat arbitrary – the statement: "whatever the neurological basis of ADHD, it is most likely developmental and/or genetic in origin" (p. 65) referring, for example, to a disorder designated as 'psychiatric'.

Despite a general division into 'neurobiological' and 'neurobehavioural' studies, there is marked inconsistency in both the selection (for example, genetic influences are discussed for some disorders but are barely