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situation, which was declared as the aim of the book. One senses that this book was written too soon, in the middle of a process of digesting and understanding complex ideas. The concepts presented in this book are of interest to clinicians. However, the book will probably be of most use as a reference when one has already read the texts in the original, or alternatively read one of the numerous single volumes devoted to the thought of each of the above figures.

TERRY BIRCHMORE, Principal Clinical Psychologist, Dryburn Hospital, Durham

101 Interventions in Family Therapy. Edited by THORANA S. NELSON and TERRY S. TREPPER. 1993. New York: The Haworth Press. 428 pp. US \$54.95 (h.b.), \$32.95 (p.b.).

This book provides the reader with 101 exciting and innovative interventions that have proven useful to students, teachers and leading practitioners and theorists in the field of family therapy.

Drawing on a wide range of client groups and theoretical approaches, clinicians present an intervention; providing a brief outline of the theoretical basis of the work, a description of the method, and suggesting indications and contraindications of the timing and applicability of interventions. This is illustrated by means of specific case examples. The range of issues addressed is extensive, and includes such topics as eating disorders, marital therapy, divorce work, drug addiction, and adolescence. Interventions include the use of stories and metaphor, rituals, rating charts, cognitive restructuring, cultural reconnection and object-relations-based use of silence.

In addition, the book also addresses a number of topics less frequently included in family therapy literature, such as neurolinguistic programming, psychoeducation, the use of physical touch, terminating with clients, and introducing discussions of sex in therapy. The last section includes consideration of how to select an intervention, including reflection on how tasks and interventions aimed to change individuals from the 'outside' could be received by clients.

The editors state that they avoided organising the book into specific subsections, or providing a detailed index in order to ensure the book would not become a 'cookbook' organised by theory, topic or client group. This seems unfortunate as the book is fairly long, and the titles do not always reflect the issues discussed in each chapter. However, it must be stated that the book is clearly written and provides a sufficient range of issues and interventions to be of use to practitioners of family therapy in a variety of settings.

JENNY ALTSCHULER, Consultant Clinical Psychologist, The Tavistock Clinic, London The Encyclopaedia of Evolving Techniques in Dynamic Psychotherapy: The Movement of Multiple Models. By IRVING SOLOMON. 1992. New Jersey: Jason Aronson. 424 pp. US \$50.00.

My dictionary defines an encyclopaedia as "a book containing information on all branches of knowledge", as opposed to its definition of dictionary—"a work of information on any subject". By choosing a cumbersome and indigestible title and subtitle, and also suggesting encyclopaedic coverage by the imposing marbled sea-green cover, Irving Solomon caused me to search for what was not covered in this volume, resulting in bewilderment over how the book was organised.

Coverage of fundamentals of psychoanalytic and psychotherapeutic history and technique were largely extensively covered – for example the entries on dreams, transference and countertransference – but there were curious omissions, for example although in the introduction when describing the purpose of this book Solomon says "projective identification has conceptually taken the field by storm", there is no separate entry for projective identification, nor for envy for that matter. I could not work out how some particular items were included and others excluded.

Some entries seemed to add little to the obvious conjecture about what they might contain, for example "Visual clues to therapist towards furthering understanding of the transference", suggested that the patient's clothes may suggest their affect (e.g. black clothes suggesting depression).

The author boldly states his intention to incorporate almost all the journal papers over the last two decades dealing with theory and technique, relevant quotes, and to critically examine and integrate the material. In fact, there was far more paraphrase than quotation which at times made for rather wooden language; some quotations contained mistakes such as 'salient' for 'silent' in the entry on the silent patient. More critically, I could not find a list of which journals the author had covered, and thought he must have covered a phenomenal amount of reading for a one-author book: it is a bold claim to make that all important material from the last two decades had been included. This in turn leads to the further puzzle of whether strange omissions are due to the concentration on recent works-how else, for example, could the entry on hating the patient contain no mention of Winnicott's "Hate in the Countertransference"?

Having got over these problems, I think this book does have much to offer. Its strength lies in a well laid out, clear format with most of the entries being of a browsing rather than a densely reading length. The book is strongest on the more clinical and symptom-orientated entries such as "silence of the patient" or "illness of the analyst". There are also rich clinical vignettes which mitigate against the dryness of some of the entries. The entry on termination of therapy was excellent.

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Overall, I still feel the author would have been better to dispense with the appearance of a marbled tome and to offer more of an overview of more recent papers. I was glad to have had the opportunity to review the book, but an not sure that personally I would have parted with the money it cost. However, a copy for a library or department would not go amiss.

TERESA BLACK, Specialist Senior Registrar in Psychotherapy, Red House, Psychotherapy Services, Salford

Surviving Secrets. By Moira Walker. 1993. Buckingham: Open University Press. 211 pp. £35.00 (h.b.), £11.99 (p.b.).

This book draws heavily upon interviews that the author has had with abuse survivors. A substantial proportion of the text is from the material presented in therapeutic sessions, used to illustrate various aspects of a wide variety of abusive experience, be they physical, sexual or emotional.

The text starts by giving a relatively brief introduction to the concepts of different types of abuse, highlighting some now well established facts, for example the intergenerational aspects of many forms of abuse. The second chapter concentrates on direct experiences of five particular people, as they have presented them to the author. As the author herself points out, their own words do demonstrate powerfully the nature of the abuse that they have been subjected to, and anybody who has not had previous experience in communicating with either children or adults who have been abused will find this chapter illuminating, and, at times, harrowing.

The book then moves on to try and consider the abusive experience, as the adults reflect back on their childhood, and then more latterly how it has affected their functioning in adult life. Many of the aspects that are known to be affected, for example one's ability to form stable, long-term relationships with partners, are exemplified by several quotes: a woman in her 30s, again abused by both her parents, was criss-crossed with scars all over her body from where she had constantly cut herself – "I am a lesbian, and I feel this is a result of the abuse." "All my relationships with women have failed, when I get close my possessiveness is indescribably great." "A relationship with a man is unthinkable." "Being in the same room as a man is only just tolerable."

The author then considers, in much more detail, the concept of the development of multiple personality disorder, and this includes some intriguing case studies. The closing chapters of the book concentrate on the stages in the process of counselling and therapy, and particular issues that are raised, for the survivor of the abuse, but also the therapist. For trainee professionals embarking upon this sort of counselling, these chapters provide a useful starting point.

Over and above these clinical and therapeutic considerations, it is noted that many of these individuals may well remain unidentified and unable to have access to therapeutic help, if this should be required. The author points out that, from her sample, few people found the help of psychiatrists at all useful. This remains unsubstantiated and, considering the resource implications that Moira Walker is raising, it would be interesting to pursue this consideration further. This is a useful text for those wishing to try and help this needy group of adults, who have survived some horrendous experiences throughout their childhood and adolescence.

MARIAN PERKINS, Senior Registrar in Child and Adolescent Psychiatry, The Maudsley Hospital, London

Pseudo-Epileptic Seizures. Edited by L. Gram, S. I. JOHANNESSEN, P. O. OSTERMAN and M. SILLANPÄÄ. 1993. Petersfield: Wrightson Biomedical Publishing. 165 pp. £27.00.

The editors of this interesting and timely book begin in the preface with startling semantic muddles. They note that pseudoseizures may have several pathophysiological mechanisms that underlie them, and go on to state: "Pseudo-epileptic seizures, or whatever expression may be used for them, are not manifestations of disordered activity of the brain, but of a complicated psychopathological background." In medicine it is usual to be more precise in terminology (an editor of a book on multiple sclerosis would not say "multiple sclerosis or whatever you want to call it"), and the second part of the sentence reveals a Cartesian error of astonishing proportions. The dilemma is put succinctly by Sahlhold, thus: "Pseudoepileptic seizures are neither pseudo nor epileptic -- they seem to be epileptic, but they are not; they are called pseudo, but they are real."

There are no clear solutions to be found to these problems here, the book being concerned largely with clinical aspects of the problem, with a good emphasis being placed on management. The authors' use of the word pseudo-epileptic for the seizures under consideration in this book seems logical, but nowhere receives justification.

The magnitude of the clinical problem is reinforced throughout the book, with figures ranging from 10–28% of patients coming to epilepsy clinics or in the community with non-epileptic attacks. The difficulties in making the diagnosis are repeatedly noted, and the differential diagnosis is well covered. There are chapters devoted to important specific subjects such as children, aggression and rage, Munchausen's syndrome and sexual abuse. Further, psychological models are reviewed from the psychodynamic to the stress-related paradigms.

This is a useful practical book, and will be of value to all of those involved in the diagnosis and management of patients with these seizure types. A further book is