

by the father as a way of controlling his partner. The batterer does not usually take responsibility for his behaviour and blames the victim for the violent outbursts. Acts of violence and the consequences are minimised. Treatment, then, requires the group members to share accounts of their violent behaviour with each other, to think about it, examine their attitudes and rationalisations, and in a series of structured exercises and discussions learn how to identify their feelings, identify triggers for violent behaviour and learn new, adaptive ways of handling intimate relationships. Treatment involves 24 to 32 sessions. Worthwhile results are reported. The final section deals with counsellor's issues.

This book is excellent and will no doubt become a definitive text on the subject of group treatment of men who batter their partners. The writing style is clear, concise and easy to read. I strongly recommend the book to all mental health professionals who are required to deal with such men.

STEPHEN P. REILLY, *Consultant Psychiatrist with Special Responsibility for Psychotherapy, Bootham Park Hospital, York*

Dilemmas and Difficulties in the Management of Psychiatric Patients. Edited by KEITH HAWTON and PHILIP COWEN. Oxford: Oxford University Press. 1990. 257 pp. £35.00.

This book is the first in a series stemming from an interesting idea. Each of the contributors was invited to a conference to give a paper on one topic, which subsequently became a chapter. The editors should be congratulated that this turned out to be possible as anyone who has ever tried getting manuscripts from conference presenters will know. The manuscript was sent in advance to one of the other participants who became the discussant at the conference. After the conference the original author modified the paper, if necessary, in the light of the comments from the discussant and the audience. This must have been a lot of work for the editors, but they have produced a first rate practical volume which will be useful to many practising psychiatrists. The main thing in its favour is that it concentrates on real contemporary dilemmas and debates in management, some, but by no means all of which will be familiar.

The book has four chapters on the physical treatment of affective disorders, treatment of resistant depression and mania, the use of the monoamine oxidase inhibitors, and when to think of psychosurgery. There are two chapters on alternatives to medication for anxiety and depression.

There are then three chapters on the prevention of suicide, the prevention of self-harm and the most appropriate response from psychiatrists to the suicidal patient. Schizophrenia has a fair slice of the book with the management of persistent symptoms, prevention of

tardive dyskinesia and the use of ECT having good discussions.

Violence towards women is a big issue and a chapter on overcoming the effects of childhood sexual abuse, and another on rape make interesting, if inconclusive, reading.

A miscellaneous group of chapters deal with such diverse subjects as dangerousness, the use of drugs for personality disorders, treatment of alcohol dependence, the psychiatrist's role in HIV-related disorders, chronic fatigue syndrome and the disclosure of confidential information.

While this might seem a bit of a hotchpotch of subjects, I found myself turning from one chapter to the next with interest. This is largely because the chapters are authoritative and each ends with clear clinical guidelines, which at least makes you feel you have learned something of practical use. Sometimes this feeling is illusory, but that relates more to the topics, some of which do not lend themselves to this kind of treatment, than to the editors or the contributors. This is a book which most psychiatrists will find interesting and useful.

CHRISTOPHER THOMPSON, *Professor, Department of Psychiatry, Royal South Hants Hospital, University of Southampton*

The Quality of Life. The Missing Measurement in Health Care. By LESLEY FALLOWFIELD. London: Souvenir Press. 1990. 234 pp. £12.95 (hb), £8.95 (pb).

The title of this excellent book describes the author's philosophy. She recounts poignantly the conversation which led to her writing the book. A young friend who died of leukaemia asked "why I had not tried to dissuade her from a therapy with poor chances of survival, but a high chance of destroying the quality of whatever life she had left". In the introduction she further emphasises her position. "There are actually states of life that are worse than death."

The author presents a thorough review of the literature. As the book is written for a lay as well as a professional readership, the medical reader will have to endure some simplistic and occasionally inaccurate descriptions of common conditions.

The author outlines four core domains in which quality of life should be measured – psychological, social, occupational and physical. She continues by discussing some of the many methodological issues involved in trying to measure the quality of life and discusses critically a number of different measurements already in use. (The book would be worth obtaining for this chapter alone for those clinicians who intend to become involved in this field.)

In the following five chapters Fallowfield discusses issues relating to the quality of life in cancer, AIDS, cardiovascular disease, arthritis and the elderly. She is

quite rightly scathing in her condemnation of the virulent, unpleasant epidemic of sanctimonious moralising which has accompanied the AIDS epidemic. In these chapters and in the chapter on the 'Quality of dying', the author discusses the psychosocial problems which patients and their carers encounter. This is an area in which there is a major role for the liaison psychiatrist in improving communication, being honest with the patient and the relatives rather than colluding, and developing and providing an appropriate means of support and care for relatives and patients. This would seem to me to be a far more valuable way of using the time of a liaison service instead of assessing parasuicides, the majority of which could be assessed by junior physicians.

The chapter entitled "The quality of dying" begins with the following quotation from Colin Murray Parkes: "Medicine should not confine itself to the prevention of death, any more than family planning should confine itself to the prevention of birth". Many doctors are unable to cope with this inevitable aspect of illness.

The next chapter looks at the quality of life from the health economist's viewpoint. The book concludes with a plea that the immeasurable aspects of life should not be ignored in the new world of statistical analyses and cost comparisons.

This is an excellent book which is of equal value to the professional and lay reader. It should be read by all practising doctors. Perhaps more importantly, the philosophy within should be taught in medical school and given at least as much prominence in the curriculum as the more heroic side of medicine.

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Strangers at Home: Vietnam Veterans Since the War. Edited by CHARLES R. FIGLEY and SEYMOUR LEVENTMAN. New York: Brunner/Mazel. 1990. 416 pp. \$26.95.

Twenty authors from various backgrounds contribute to this collection of writings on the experiences of Vietnam veterans since the war. The unique nature of the Vietnam conflict is described well, and the reader gains great insight into the increasingly ambivalent and negative attitude of the US nation towards the war as it progressed, resulting in the returning veterans being stigmatised and feeling alienated. Reference to veterans of other wars highlights the universality of many of the post-war experiences.

The book is divided into three sections, the first of which considers the war itself and those who fought in it. The chapter by Smith on "Oral history" is particularly gripping, especially the verbatim account of a Marine interrogator describing both the difficulties he faced in Vietnam and the let-down he felt on his return. The second section deals with the returning veterans

readjusting to US society, including accounts of research carried out into their estrangement, psychosocial readjustment, and employment experiences. My favourite passage in this part of the book is Wilson's account of the war's effects on the personality development of the many adolescent soldiers. The final section looks at the actions of the government and other agencies. Stanton's chapter on drug use and Bitzer's account of the mistreatment of many veterans suffering mentally as a result of the conflict make good reading. The appendix to Bitzer's chapter is the memorandum advising use of the term 'post-traumatic disorder' in place of 'post Vietnam syndrome' emphasising that this is not restricted to Vietnam veterans.

In conclusion, this book might be of interest to those dealing with war veterans and indeed others involved in major traumatic events. Overall it is well written and easy to read. The multidisciplinary authorship ensures varied perspectives, including economic, psychological and sociological viewpoints. It gives a broad, detailed and comprehensive picture of the Vietnam veteran since the war. Its only drawbacks are a tendency to repetition at times and the occasional American word or phrase which is difficult to understand.

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Substance Abuse and Dependence. By HAMID GHODSE and DOUGLAS MAXELL. London: Macmillan Press. 1990. 262 pp. £37.50 (hb), £14.95 (pb).

The need for 'caring professions' to have knowledge and occupation-specific skills in dealing with substance misuse problems is not in question, but latching onto the right educational message is not so easy. Within a training programme, a mix of specialist and generic input can go side by side, complementing each other, but in a book this is more difficult to achieve. This book is billed as a practical guide for a wide range of professionals, students and other workers within the field and should therefore be judged against its relevance to those groups and the effort given to addressing their needs.

The book is divided into four parts. Part 1, "Identifying the problem", gets off to a shaky start with a chapter defining the nature of dependence: I am certainly prejudiced in that this is not my idea of dependence, but while the specialist might follow this text with interest I suspect the target readership will be confused. Another chapter on "Substance misuse careers", is particularly well written and instructive, however. Part 2, "Treatment and management", is perhaps the most balanced section, all three chapters are very readable and informative. The chapter on "Psychosocial interventions" is particularly attentive to the consumer. Part 3, "Complications of substance abuse", has an excellent summary of medical complications which is well pitched for