

The veteran Zubin is determined to be optimistic and to reject chronic disability as being inherent in many cases, although this seems to strain the limits of acceptance. His vulnerability model regards the patient as being essentially well, although subject to one or more episodes of illness; the natural healing process may be impeded to varying degrees by "ecogenic forces", but enhanced by good social networks, ecological niches, or premorbid personality – which may mitigate the impact of stresses. Zubin says that outcome studies must use controls which are concordant for all important psychosocial variables, but it is far from clear how this could be done.

Ciampi lists no less than eight integrative models, and maintains that chronicity depends more on psychosocial than on genetic/biological factors, although the case for this is not strongly argued. He also proposes a three-phase model to establish connections between vulnerability and information-processing, based on Piagetian theory. It is elegantly argued, but largely translates well-known concepts into different terminology. There are also nine therapeutic principles for the psychosocial management of schizophrenia, including the suggestion that psychosocial measures may act as alternatives to medication, but the work of Leff and Hogarty does not support that view.

Other papers deal particularly with social skills training and with self-help by schizophrenics. The contributions which were originally in German show a number of translation problems, but overall this book stands out through its unusual quality.

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**A Primer of Human Behavioural Pharmacology.** By ALAN POLING. New York: Plenum. 1986. 246 pp. \$29.50.

The author, in his preface, writes that this book is intended to introduce principles of behavioural pharmacology to readers with little or no knowledge of the discipline but with an interest in how drugs affect human behaviour, but it is hard to know for whom the book is intended. The book is written in a lively style with each new concept being clearly defined, but once a reader's interest has been stimulated few references to more specialised textbooks are given (and where listed are, in at least one case, an out-of-date edition). The coverage of topics is varied. The section on basic pharmacology is very basic, while the chapter on clinical drug assessment touches on many topics, including the DSM-III diagnosis of schizophrenia and methods of measuring behavioural change by direct observation. Although the author graphically illustrates the measurement error inherent in different methods of observing behaviour, this can be of limited value to people embarking on

clinical drug assessments when few references to methodology have been included.

This book is recommended as a stimulating introduction to the subject, but should not be regarded as a basic textbook in behavioural pharmacology, in spite of its title.

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**A Textbook of Clinical Neurophysiology.** Edited by A. M. HALLIDAY, S. R. BUTLER and R. PAUL. Chichester: John Wiley. 1987. 730 pp. £32.50.

This book comprises a series of didactic lectures given at the International Congress of Electroencephalography and Clinical Neurophysiology, held in London in 1985. Distinguished clinicians and scientists were invited to lecture on specially chosen topics, so that the series formed a complete course covering all three branches of clinical neurophysiology: electroencephalography, evoked potentials, and electromyography. The speakers were asked to emphasise their views on clinical practice rather than research in progress, and texts based on those lectures have been published here. The result is a remarkable book in that it contains the views of so many international experts under one title. However, as might be expected of a volume compiled in this way, the chapters are very varied, particularly in the level of complexity addressed. They range from a section on signal averaging with instructing equations to a chapter describing the most elementary principles of nerve conduction studies. However, each contains interesting and useful information, as would be expected from this authorship.

The book has been produced and published promptly and is inexpensive (possibly to the slight detriment of one or two of the illustrations). As stated in the preface, it cannot really be regarded as a primer, and indeed there must be some question as to whether 'textbook' is the most appropriate title. It is, however, excellent value and mandatory reading for any modern clinical neurophysiologist. Presumably the sections on EEG and long latency evoked potentials would be of interest to psychiatrists.

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**Community Clinical Psychology.** Edited by HUGH C. H. KOCH. Beckenham: Croom Helm. 1986. 349 pp. £22.50.

This multi-author book has as its stated aim "To determine the main components of what clinical psychology