336 BOOK REVIEWS

when there was the greatest hardship and cannibalism before rescue; many train crashes, as dissected in official enquiries afterwards; barely credible stories of heroism from the memoirs of polar explorers, especially illustrating grit and tenacity, and the psychological tricks used by the men to keep going, and exemplifying in Shackleton's case supreme qualities of leadership. The author is an authority on long distance single-handed sailors, and his material is frequently drawn from them—the well-known successful heroes, and also Donald Crowhurst who ended tragically in deceit, grandiose delusions and slipping overboard into oblivion.

The main burden of the book is to emphasise the importance of analysing psychological factors in survival and in breakdown under stress, in contrast to official enquiries into disasters, which have usually been preoccupied with the physical environment (the state of the sea), mechanical equipment (braking systems, air traffic control techniques, selfsteering gear) or physical illness (myocardial infarction; 'akinetic mutism' or 'transient global amnesia' as ad hoc neurological diagnoses for the inexplicable immobility of the driver of the train in the Moorgate tube disaster as he hurtled towards the dead end). He is referring to the reluctance, so familiar to psychiatrists, to consider psychological aetiologies for the inexplicable (mass hysteria in a school—surely it must be a mysterious virus infection or fumes from a factory).

It is not the author's fault, but because we lack knowledge, that he has few specific conclusions, few prescriptions for how to recruit pilots or explorers, or help the victims of disasters, and has to point to the complexity and unpredictability of man. One example can be given from the singlehanded long distance yachtsmen he studied. Might they have personality traits in common? They were all competent organisers at getting knowledge and resources ready for the race, yet they came from very diverse occupations "and adopted totally different styles of behaviour. Some were gregarious to an extreme and never missed an opportunity for a party . . . others tended to avoid company, especially that of non-nautical types".

The book suffers from poor organisation, the same stories cropping up in several places and being repeated, and it is over-ambitious in alluding to subjects which are treated so briefly as to be travestied. Thus the author's treatment of hostage-taking in 1½ pages is not good enough, and it would be better not to talk of instability in world-leading politicans if the account is sometimes to be so cursory as to say only "Lyndon Johnson had a severe coronary thrombosis years before assuming office. He had no futher trouble with his heart while at the White House, but during his second term he was regarded by some as suffering from

paranoid delusions."

The book is in colloquial style and explains medical words. It is not profound, and is not intended for psychiatrists, but is absorbing reading.

ANDREW. C. SMITH, Consultant Psychiatrist, Greenwich District Hospital, London

Stress Strategies: The Treatment of the Anxiety Disorders. By C. B. Scrignar. Basel: S. Karger. 1983. Pp 261. SFr. 58.-., \$34.75.

It is difficult for beginners in psychiatry to understand the ways in which experienced therapists assess and treat common clinical problems. Indeed, it is often difficult for more senior psychiatrists who have largely learned from their own individual experience to know whether they are making the best use of modern knowledge. There is, therefore, a considerable need for books by well-informed experts that give straightforward practical accounts of clinical management. This book has this laudable aim. The author presents well-informed accounts of a balanced group of what he calls stress disorders (generalised anxiety, panic disorder, agoraphobia, obsessive compulsion disorder, simple phobia, social phobia and traumatic neurosis). I found these accounts useful and sensible. Unfortunately, I cannot end this review at this point. but have to add that it is not an easy book to read. A prolix style and much psychiatric and social science jargon distract one from unravelling the meaning. This difficulty goes well beyond any reviewer's prejudices in favour of British rather than American English and is a serious drawback. A good idea, sensible advice, but not worth buying.

RICHARD MAYOU, Clinical Reader in Psychiatry, University Department of Psychiatry, Oxford

Psychiatry. Essentials of Clinical Practice. With Examination Questions, Answers, and Comments. Second Edition. Edited by IAN GREGORY and DONALD J. SMELTZER. Boston: Little, Brown. 1983. Pp 410. \$21.00.

Nothing, it seems, succeeds like success. This volume, we are told, was adapted from a personalised study programme for medical students which resulted in Ohio State University College of Medicine students scoring well above the national average in psychiatry in the Part Two National Board Examinations, and higher in psychiatry than in any other subject. I am not surprised. For, in most respects, this is an excellent introduction to psychiatric principles. It would be hard, for example, to find a discussion about the