

Suffering: Psychological and Social Aspects in Loss, Grief and Care. Edited by AUSTIN H. KUTSCHER. New York: The Foundation of Thanatology. 1986. 196 pp. \$32.95.

This is an interesting, rather philosophical book, as its title would suggest, rather than one which is intrinsically clinical and practical. It seems to aim at stimulating physicians to think about the practice of medicine, the nature of the doctor-patient encounter, and the fact that, as one contributor points out, "We are all patients - it is just that some of us become physicians as well". He suggests that for the doctor to have suffered a serious illness is one of the best ways to improve the therapeutic relationship. While personal experience does undoubtedly improve many physicians' insight, most doctors have little experience of serious illness, and yet many of them do develop helpful and insightful empathy into the patient's condition.

Most of the topics dealt with are of relevance to general medicine, and many to terminal illness, dying, and loss of the future. They could be of interest also to psychiatrists, especially the portion dealing with suffering in chronic mental illness. Those who practise in liaison-consultation and those who support or consult in hospices or other terminal care teams will find this book of particular interest. It is well referenced and researched, and would be a useful adjunct for a general medical or postgraduate library. At the price it may be rather too specialist for most general hospital or psychiatric hospital libraries, but it would certainly be of use to those preparing papers on aspects relating to terminal illness or working in a hospice and other related settings, depending on the budget available.

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Psychopharmacology: Current Trends. Edited by DANIEL E. CASEY and A. VIBEKE CHRISTENSEN. Berlin: Springer-Verlag. 1988. 212 pp. DM128.

This book is based on a symposium held in Denmark in 1987 which aimed to assess the present state of knowledge in psychopharmacology. The contributors are international and eminent, with a preponderance of Scandinavians. The largest section is on schizophrenia, with smaller ones on affective disorders, anxiety, and dementia. Contributions vary in nature from well-referenced and informative reviews down to subjective overviews, and topics range from basic pharmacology to clinical management.

The section on schizophrenia has useful short reviews of acute and long-term neuroleptic treatment and side-effects, including tardive dyskinesia. It is striking that our knowledge of even basic issues such as optimum

dosage and time course of response is incomplete. Other more pharmacological reviews focus on receptor effects and pharmacokinetics of neuroleptics, and future research strategies for finding new antipsychotic drugs.

More disappointing is the section on affective disorders. Important current areas of interest such as the new antidepressants, the use of anticonvulsants, and receptor changes during chronic antidepressant treatment are mentioned only in passing. There are adequate, although limited, reviews of the management of treatment-resistant depression, the long-term treatment of unipolar depression, and the new monoamine oxidase inhibitors, but other contributions are less interesting.

The long-term treatment of anxiety is discussed with particular reference to problems with benzodiazepines, but lack of space sadly precludes discussion of other advances in the pharmacotherapy of anxiety, such as the use of antidepressants. New directions in the search for a drug treatment of dementia are discussed in two chapters.

The psychopharmacologist would be interested in leafing through this book, but would not be significantly disadvantaged by missing it. The general psychiatrist wanting a broad overview of advances in psychopharmacology could more profitably look elsewhere. Although there are several exceptional chapters, the book overall adds little to existing literature and is probably not a worthwhile purchase for the general psychiatric library.

MALCOLM PEET, *Senior Lecturer in Psychiatry, University of Sheffield*

Family Therapy in the Community. By DUNCAN MACPHAIL. Oxford: Heinemann. 1988. 192 pp. £9.95.

I welcomed a basic family therapy book written by a Community Psychiatric Nurse (CPN) for CPNs. We have had CPNs in our clinic for some years, and they read this book too before I did the review. The author starts by saying that he is writing a practical manual rather than a theoretical text. However, there was a sense of rushing through the theory at the beginning, which does not develop a sound theoretical base on which to develop practice, and might be more confusing for a beginner than a slower paced look at the basic theory.

There are some well set-out exercises at the end of each chapter to consolidate what has been read, and a reading list on the chapter. Much of the rest of the book is based on clinical examples, which sometimes seemed an idiosyncratically chosen mixture, and it is here that the difference between nurses based in clinics as part of teams and nurses based in clinics as part of teams and nurses attached to general practitioners' surgeries begin to become more apparent.

The short discussion on confidentiality was not particularly helpful and did not take up the complicated areas of sharing information between different agencies. This needed to be described systemically, as would have been appropriate in a book about family systems.

This is a general flaw in the book. Although at the beginning MacPhail talks about the way that thinking systemically alters views of pathology and the meaning of behaviour, by the end he was writing short sections on specific pathologies.

This is not a basic book that could stand on its own. However, CPNs in our clinic felt it was important that books by nurses were being produced, and it certainly spurred them on to think more optimistically about writing themselves. As CPNs have tended to be the latest group to join multidisciplinary teams and there is a continual debate about their role, it would be useful to have this book alongside others in a clinical or team library.

RACHEL LEHEUP, *Consultant Child Psychiatrist, Child and Family Therapy Service, Nottingham*

Learning Psychiatry through MCQ. A Comprehensive List. Edited by TOM SENSKY. Chichester: John Wiley. 1988. 259 pp. £9.95.

This book is unusual among the ever-increasing number of multiple choice question (MCQ) books on psychiatry in that it is written primarily for medical undergraduates. The authors also rather ambitiously intend to provide a comprehensive account of general psychiatry, but it is unclear in the preface whether they aim to replace or to supplement traditional medical student textbooks.

There are 136 questions arranged under 13 subject headings, and 10 case histories. As an admittedly biased psychogeriatrician, I feel old age psychiatry merits a separate section rather than being subsumed under organic psychiatry, with little recognition of functional mental illness in the elderly.

While generally the questions and answers are uncontroversial and contain useful basic information suitable for students, there are some surprising answers which contradict widely held views. The prevalence of enuresis among British ten-year-olds (question 101) is given as 10%, when the accepted figure is 5%. Similarly, the prevalence of dementia in those over 65 is stated as being 10–20% (question 22), when the usual figure given is 5–10%. The safe upper limits for alcohol consumption (question 73) are now out of date, having been revised downwards. Also, I doubt if “all social classes are represented equally among (opiate) addicts in Britain”, and think it more likely that social classes 4 and 5 predominate.

A novel and interesting idea is the inclusion of the average scores of Charing Cross students for each ques-

tion, together with a measure of its ability to discriminate between candidates. This is obtained by correlating the scores for each question with candidates' overall scores. I suspect that the discriminatory power of several questions could have been improved by removing the terms ‘never’ and ‘always’, which are giveaways to most students. The book would also be enhanced by the provision of an introduction giving advice on how best to tackle MCQs, together with information on the meanings of commonly-used terms such as ‘typical’ and ‘characteristic’.

Overall this book will not replace a conventional psychiatric undergraduate textbook, although it would be a useful and stimulating revision aid for medical students. At £9.95 I think it is likely to be a group rather than an individual purchase.

ELAINE ARNOLD, *Consultant Psychiatrist, Central Middlesex Hospital, London*

The Milan Approach to Family Therapy. By GUIDO L. BURBATTI and LAURA FORMENTI. Translated by ELENA COSMO. New Jersey: Jason Aronson. 1988. 221 pp.

The Milan school of systemic family therapy is an internationally established voice within the movement inspired by the work of Gregory Bateson and his colleagues in Palo Alto. It applies insights and methodology derived from cybernetics to the analysis and treatment of problematic social behaviour. The authors of this book work in Milan, and are well qualified to describe the Milan approach to family therapy, one having been trained by members of the original Milan team and the other having co-operative contact with the Gregory Bateson Study Center.

The book begins with a clear exposition of the theoretical framework on which the Milan approach is based. The four following chapters describe different phases in treatment, including termination, when the therapy is evaluated. Each phase is illustrated by verbatim transcripts selected from the material provided by one family. On the whole, this method of presentation works, and the authors have done well in presenting so succinctly their use of concepts worked out in Milan and Palo Alto and embodied in the Batesonian/Milan paradigm as it is understood today. However, this systemic way of thinking about dynamic systems, let alone the language that has developed to express these ideas, is not always easy to grasp. Newcomers to this approach may still need to look up quoted references to the original description of concepts now encapsulated in words such as ‘neutrality’, ‘circularity’, ‘positive connotation’, ‘paradox’, and ‘counterparadox’.

This book claims to be the first systematic attempt to describe and illustrate the theory and practice particular to the Milan school. However, the translation has joined