

The view that self-contempt and guilt lead a gay man to seek psychotherapy is counterbalanced by the contribution of Charles Silverstein in Chapter 6 of this book. He argues cogently that the homosexual man is often ill-prepared to deal with the conflicts and ambiguities in his lifestyle, and the confusion and associated depression are the primary motivating factors impelling the homosexual man to seek psychotherapy.

The book provides some useful psychotherapeutic insights into the management of homosexuals who are HIV positive, pointing out that such patients carry an additional burden of guilt due to the fact that they have contracted the disease. The book concludes with an examination of the sexual orientation of the therapist and how this influences the therapeutic process.

The authors have produced a very readable book, firmly based within the psychoanalytic approach to psychotherapy, which it should be seen as expanding and extending, rather than contradicting its traditional teachings. However, I believe the book overstates the contribution of a homophobic society to the problems of the homosexual man. The great change in attitude towards homosexuals that has taken place in our society over the past 30 years does not need to be emphasised here. I believe that the book is in this sense already a little dated. I would see it as a useful addition to the shelves of a library specialising in psychoanalytic psychotherapy.

S. D. DALRYMPLE, *30 The Drive, Hove, East Sussex*

Accepting Voices. Edited by MARIUS ROMME and SANDRA ESCHER. London: Mind. 1993. 258 pp. £13.99 (pb).

Karl Jaspers once suggested that the failure of empathy and intuition to understand the person with psychosis is diagnostic: he used the term 'abyss' to characterise this discontinuity of understanding between normal (and neurotic) experience on the one hand and psychotic on the other. By and large we do not suppose that psychotic patients are like ourselves, and modern approaches have dwelt on causal explanations with considerable success. Yet as professionals we are all aware of scepticism among our patients for current concepts and treatment methods. We are apt to put this resistance down to lack of insight and regard calls for psychotherapy as anachronistic.

Someone once said that explaining the neural basis for blushing does not mean we understand it. Data linking acute and chronic stress with psychosis has suggested that there may indeed be a 'normal' context to psychosis. Similarly, this book by Professor Romme and Sandra Escher attempts to help us understand the hallucinator and how the bizarre meanings attached to voices can make sense in context. It centres around

some fascinating personal accounts of voice hearers, seven of whom have never received psychiatric help (they all view their voices as guiding and benevolent) and a further six who have "grown out of psychiatric care", finding their own ways of living and coping with their voices. These confirm this reviewer's judgement that the experience of voices – their apparent omniscience and plausibility – is a context that can lead ordinary people to imbue them with power and authority. The various frames of reference of voice hearers are elaborated by their adherents in Chapter 7, including a Dutch gerontologist who suggests that "humans . . . may transcend physical existence and find access to other dimensions . . . than the visible world". Clearly some frameworks present a major challenge to the empirical psychologist.

The authors argue that we should respect the hearer's perspective, and that the content of voices and the nature of the relationship with them may have a personal meaning and a personal context (sexual abuse and unresolved loss are described in many of the contributions). Some sound advice is offered, in particular that the hearer must "understand that the voice is not more powerful than yourself". The authors' main theme, however, stresses the acceptance of voices rather than denial and resistance, this being the predominant style of the 'copers'. The 'copers' also view their voice as originating from an external agency; thus the authors advise use of the less pejorative term 'extrasensory perception' and suggest "... accepting the presence of an influence outside of yourself" (the authors overlook some of their copers who do not subscribe to this perspective). The authors' constituency is the voice hearers themselves, and they are to be congratulated in their efforts in bringing them together. It is patently clear that not all hallucinators are the same, and forms of acceptance practised by some will be harmful to others. I do not understand why this is not stressed more clearly. This book is challenging and deserves to be read by the professionals involved in the care of people with psychosis.

I think Jaspers would have found this book fascinating and might even have led him to revise his concept of the abyss, but I don't know that he would have recommended it yet to his patients.

MAX BIRCHWOOD, *Northern Birmingham Mental Health Trust, Birmingham*

Causes, Coping and Consequences of Stress at Work. Edited by CARY L. COOPER and ROY PAYNE. Chichester: John Wiley. 1990. 418 pp. £14.99 (pb).

There cannot be many of us who have not at times experienced stress at work or who could not produce a lengthy list of the culprits or causes of it. However, this

book is not entirely devoted to the negative aspects of stress; occasionally it draws out some of the more positive results of stress.

The remit of the book is to give an update of the research which is being carried out in this area, the book forming part of a series of studies in occupational stress. All of the chapters give an extensive outline of the literature, but some are much more easy to read than others, especially those which endeavour to apply practically the research findings, even if at times the significance of the findings is not all that clear.

When considering our own work environments, in which at times many seem to be frequently off sick or to be disenchanted with their work role, we would do well to read the chapters on promoting the individual's health and well-being, and on workplace interventions for stress reduction and prevention. As regards our patients we often have to make judgements about an individual's ability to return to work after illness. This book, as well as considering factors in the person which may affect his or her ability to cope with work, also considers the intricacies of the work environment, which are to a large extent outside of the control of the individual concerned (such as the way in which offices are arranged or a computer is designed). An increased awareness of these issues may improve the judgements we are able to make.

This book is very much an overview and is probably best recommended as a reference book outlining the scope of the available literature. There are other books which cover in more depth particular aspects of this research, such as stress in health professionals, with which we might identify more closely.

HEATHER DIPPLE, *Towers Hospital, Gypsy Lane, Humberstone, Leicester*

Alzheimer's Disease, Down's Syndrome and their Relationship. Edited by J. M. BERG, H. KARLINSKY and A. J. HOLLAND. Oxford: Oxford University Press. 1993. 297 pp. £55.00 (hb).

As their specialities have grown, old age psychiatrists and psychiatrists in learning disability have always found it easy to talk to each other. Much of the conversation has tended to be about models of care, deinstitutionalisation and, perhaps with some smugness, about how far ahead of general adult psychiatry they both are in these areas. A further area of crosstalk has involved similarities and differences in patterns of dependency and of cognitive impairment.

Until quite recently, the research potential of this overlap has not been fully realised – until, that is, it

was discovered that people with Down's syndrome (DS) have a high vulnerability to a dementia similar both clinically and neuropathologically to Alzheimer's disease (AD). This handsomely produced book is a testament to the research advances already achieved, and the work yet to be done, that have stemmed from this seminal observation.

There are 28 contributors, from the US, Great Britain and Canada. The book is in 14 chapters, with a lucid foreword by Sir Martin Roth focusing on recent changes in the understanding of AD and on the potential of the DS/AD link to inform research into the ageing process itself. The chapters fall into five parts, representing overviews of current understanding of the two conditions; evidence for an association between them; clinical issues of diagnosis and management; approaches to formal assessment; and current understanding of aetiology. The chapters are well set out, with clear summaries at the head of each and good subheadings. The book is well indexed. There could have been more editorial control of overlap between chapters; in particular, virtually all contain much the same potted historical resume.

The 'overview' section is rather elementary; most sufficiently interested readers will be familiar with at least one of the conditions. I found the chapter by Beach, on the history of what he calls a "scientific symbiosis" between AD and DS, fascinating, capturing as it does the excitement of the early neuropathological observations by Jervis and the progression to the search for clues to AD on chromosome 21 – and the rest, as they say, really is already history and familiar even to the lay public.

The main 'gem' in the book for me was Lawrence Whalley's account of what DS has told us and might continue to tell us about AD; he manages as few can to make molecular genetics understandable to those who cannot distinguish a Western and a Rorschach blot. I also found the editors' chapter informative, not only on clinical features, but also on service needs and ethical dilemmas of rights and decision-making. I learned a lot from the account by Percy on biological markers, although I was a little disappointed by how relatively little work had been done on marker overlap between the two conditions.

Overall, this volume is a worthy attempt to do justice both to recent advances and to future prospects, and to address clinical and psychological as well as biological aspects. It is certainly worth its cover price to any psychiatric or general hospital library.

CORNELIUS KATONA, *University College London Medical School, London*