

offer particularly for those with considerable knowledge in the field. Although the title is accurate, it does not quite convey the present reviewer's impression, that the place for this volume is in the library, rather than on the bookshelf of someone concerned in the day to day management of epilepsy.

D. F. SCOTT, *Section of Neurological Sciences, The London Hospital*

Symptomatic Affective Disorders: A Study of Depression and Mania Associated with Physical Disease and Medication. By F. A. WHITLOCK. London: Academic Press. 1983. Pp 218. \$24.00.

With the growth of interest in psychiatric aspects of physical illness in both research and clinical practice there has been a need for authoritative books to cover this area. This book concentrates on one aspect of the physical-psychological connection, namely the symptomatic affective disorders—those affective illnesses which are associated with physical disease or drugs.

The book opens with two introductory chapters, the first looking at the nature and extent of the problem and the second focusing on biochemical and anatomical considerations. There then follows eleven chapters covering the symptomatic affective disorders in different situations including, child birth, old age, surgery, neurology, endocrinology, immunology, cancer, drugs, infectious diseases, metabolic disorders and perhaps a little strangely, schizophrenia.

Unfortunately, though the concept and intention is laudable, the style leaves a lot to be desired. I found it so crammed full of facts as to be indigestible in any form other than a reference book. So much space was devoted to listing findings from different papers as to obscure the attempt to draw them together to produce a readable account of the topic and the papers themselves were quoted without adequate criticism. Nevertheless it is useful to have all the relevant literature together in one volume and therefore despite its style I feel for its content alone it deserves a place in hospital libraries though at \$24.00 it is not cheap.

JEREMY M. PFEFFER, *Consultant Psychiatrist, The London Hospital (Whitechapel)*

Cell Surface Receptors. Edited by P. E. STRANGE. Chichester: John Wiley. 1983. Pp 298. £30.00.

Biochemical pharmacology has long been concerned in receptor theory and its importance to the medical sciences has been known for many years. Psychiatry, as usual, has been a late starter but is catching up fast. This book derives from a workshop on the most

clinically significant of these receptors, those of the surface of the cell. Over half the chapters are of relevance to psychiatry. In addition to up-to-date reviews on opiate benzodiazepine and dopamine receptors there is a stimulating chapter by Doxey and his colleagues on selective α_2 -adrenoceptor agonists and antagonists. Some agonists, such as clonidine, are well-known but the antagonists are still being investigated. The results of these investigations may have important implications for the biochemical hypotheses of affective illness. There are also excellent chapters on the changes in sensitivity of dopamine receptors following long-term administration of neuroleptic drugs (Jenner and Marsden) and an account of post-mortem findings on the brains of schizophrenic patients (Owen, Croft and Crow). Although clinical psychiatrists have come across these papers before in relationship to the aetiology of schizophrenia and tardive dyskinesia, there are some advantages in reading about them in a text that shows how uncertain is our current knowledge of dopamine receptors. The chapters are neatly linked together by an introductory account of receptor theory and a postscript on future strategies by the editor.

Although the price and specialised orientation of the book makes it unsuitable for the general psychiatrist it should find a useful corner in the postgraduate library.

PETER TYRER, *Consultant Psychiatrist, Mapperley Hospital, Nottingham*

Homosexuality: Social Psychological and Biological Issues. Edited by WILLIAM PAUL, JAMES D. WEINRICH, JOHN C. GONSIORAK and MARY E. HOTVEDT. London: Sage Publications. 1983. Pp 416. £23.25.

The twenty-two contributors to this compendium, all Americans, are described as mostly young persons who 'have matched fearlessness with scholarly competence' (p. 17). In other words, the book is both scholarly and polemical. The statements are well supported by evidence and argument, but the underlying theme is a propaganda message, namely that 'gay is good' and that American society treats gays badly.

The summary and conclusion following each section reveal the trend. The discussion of derogatory stereotypes end with a plea for education, with 'strategies of demystification' and 'empathic appeals' as well as with factual information. The chapter on psychological tests ends with the declaration that 'theories contending that the existence of differences between homosexuals and heterosexuals implies mal-

adjustment are irresponsible, uniformed or both' (p. 80). The treatment section ends with the blunt conclusion that 'change of orientation therapy programs should be eliminated' (p. 97). The healthy reaction to stigmatisation is to fight back. 'Confrontation is necessary and good. Human rights . . . must be fought for' (p. 112). The lack of evidence for an inherent pathology' (p. 160) implies that causes of homosexuality are not to be sought in medical models. 'Evidence for a hormonal theory is weak' (p. 180), but genetic influences are not denied. Chapter 16 discusses theories explaining how homosexuality might be beneficial from an evolutionary standpoint. For example, if there are two alleles of a gene for homosexuality, the manifest condition may occur only in homozygotes (who will tend not to reproduce), but corresponding heterozygotes may enjoy advantageous characteristics (hypersexuality for example), remain fertile and pass on their homosexuality-promoting gene to their children.

Even as parents, homosexuals are seemingly at no disadvantage. Lesbian single mothers do as well as heterosexual single mothers (p. 184). The image of the homosexual as sad, unwanted, childless and lonely as he ages appears a 'myth' (p. 289).

It all seems a little too nice to be absolutely accurate. Some serious problems are simply left out. The problem of homosexual paedophilia, and the existence of PIE and the American Man/Boy Love Association, which so alarms straight society, is in no way solved by the bland assertion (undoubtedly true) that heterosexual paedophilia is commoner (p. 302). The connection between homosexual promiscuity and venereal disease, especially the recent AIDS epidemic, is not mentioned. Nevertheless, the book is a mine of useful information which would have been all the more useful had the writers not protested too much.

D. J. WEST, *Professor of Clinical Criminology, Cambridge*

Functional Gastrointestinal Disorders: A Behavioral Medicine Approach. By PAUL R. LATIMER. New York: Springer. 1983. Pp 174. Price \$23.95.

Functional gastrointestinal disorders are currently receiving considerable attention after many years of neglect. Their prevalence certainly warrants more discussion than is usually accorded them in medical textbooks because they are responsible for up to half of all attendances at gastrointestinal clinics. This book is therefore timely and should be welcomed by physicians, psychiatrists and psychologists who are called upon to treat these patients.

The author, a psychiatrist with a behaviour therapy

background, believes that all functional bowel disorders are similar in their aetiology and physiological mechanisms although differing in their clinical manifestations. He has selected the irritable bowel syndrome as a model and almost the entire book is devoted to this condition. The epidemiology, clinical features, and aetiological theories are reviewed in detail; there are also two chapters on colonic physiology and psychophysiology which will be useful to the trainee but too elementary for the experienced physician. After discussing various aetiological theories Dr Latimer comes down firmly in favour of the irritable bowel syndrome being a behavioural disorder and this conclusion sets the scene for description of a behavioural approach to treatment. He admits that no treatment has been shown to have lasting benefit, the evidence for behaviour therapy being among the weakest and he advocates systematic research to evaluate various therapeutic methods.

This is a thoughtful, well-written book for a specialised audience, suitable for a university or general hospital library.

GEOFFREY LLOYD, *Consultant Psychiatrist, Royal Infirmary, Edinburgh*

Rehabilitation of the Brain-Damaged Adult. By GERALD GOLDSTEIN and LESLIE RUTHVEN. New York: Plenum. 1983. Pp 362. \$27.50.

This book is written to appeal to all members of the team concerned with the rehabilitation of brain-damaged adults. In this context the term "brain-damaged adults" refers to those individuals sustaining demonstrable structural non-progressive brain damage as adults, and to older institutionalised brain-damaged patients.

The authors define rehabilitation as the restoration of function with regard to certain reasonable goals, ranging from simple activities of daily living to educational and vocational retraining.

Attention is paid to the planning of individual rehabilitation programmes with an attempt to integrate different approaches, for example neuropsychological and behavioural.

Thus there are chapters on Staff Development and Training, a description of the behavioural approach and a discussion of neuropsychological assessments. This last chapter describes in detail only the Halstead-Reitan Battery, used rather rarely in this country. The chapter follows rather than precedes the one on behavioural therapy, making it hard to envisage the design of individual rehabilitation programmes based on the findings of neuropsychological assessment.

A few case examples are quoted, including young