

Book Reviews

A LOOK AHEAD?

Psychiatry in Medicine: Retrospect and Prospect. By SIR DENIS HILL. London: The Nuffield Provincial Hospitals Trust. 1969. Pp. 182. Price 62½p.

On being elected to the Rock Carling Fellowship, Sir Denis Hill chose for his field of study the implications of the move of clinical psychiatry in recent years back into medicine. His objectives are made more specific in a passage from the Seebohm Report with which he ends his monograph, namely the much needed overall assessment of the psychiatric services and the resources they should have, their function in society, the contribution they should make, and where and how this should be done. No topic could be more pressing for psychiatrists at present, and it is a sign of the difficulties surrounding the task that his quotation should be taken from a report concerned with the future of the social work services.

A brief historical review of the geographical and ideological isolation of psychiatry from medicine leads to the new situation created by the coming of the National Health Service with the resultant reintegration of psychiatry into medicine, culminating in the Hospital Plan and its District General Hospitals each with a psychiatric unit. Correspondingly, the author comments upon the changed academic future of psychiatry, with the recent establishment of university departments in most medical schools. When he proceeds to the expansion of the psychiatric services and the changing centre of gravity from the hospital to the community, he gets into the thorny matters of the Seebohm Report.

Foreseeably, it is the complications in the relationships between the different sources of therapeutic provisions that begin to engage the author, and, though he explicitly recognizes the necessity for an entirely fresh and radical approach, we detect the perseveration of the old. Thus, after discussing the complex biological, psychological and social factors determining the emotional disturbances of children, he comes out firmly against the Seebohm Committee's recommendations. For him the services for these children should be developed within the hospitals and in a medical setting.

With all the heat engendered by this issue, we must, however, do more than 'keep our cool'; we must ask what does 'in a medical setting' imply?

There can be no question of the fundamental importance of the role of the doctor, and we can take for granted that he needs specific conditions for carrying out his tasks. It is a much less certain proposition, however, that the therapeutic endeavour required should be located in this way. Indeed, it is one that lays itself open to the familiar charge of medical omnipotence. Sir Denis assumes that this danger would be counter-acted by new relationships between medicine and the professions now in the mental health field. A greater danger comes from the extent to which our preconceptions and our very vocabulary prestructure our approach.

In defining the area of clinical practice with children, a quotation from Howells is given in which a definition is linked with the work of a Family *Psychiatry* Unit. What issues are being compounded here? What is the noun '*Psychiatry*' being assumed to define? In fact it merely describes what psychiatrists do, whatever their activities have come to include, and whether or not these are justifiably their prerogative.

In raising these questions it must be stressed that Sir Denis is alive to their implications. Nevertheless, is he, like so many of us, enmeshed in conceptual constraints that are extraordinarily difficult to discard? Thus one is struck by the fact that his next chapters are concerned with the varieties and incidence of the *psychiatric* disorders and how general practitioners and psychiatrists are responding to them. The large amount of disorder the family doctor copes with is appreciated, but so also is the severely limiting factor for future developments of the high proportion of general practitioners in whom the psychological patient evokes negative attitudes. To bring out the emerging patterns of psychiatric care, he considers three examples, the first (Burnley) based on a District General Hospital, the second (Plymouth) operating from a Mental Health Centre, and the third (The Middlesex) the work of a Teaching Hospital. Acknowledging the enterprise and effort with very limited resources in the first, Sir Denis concludes that it is difficult to maintain that this is a comprehensive service. What he sees as more adequate occurs in the Mental Health Centre. Here the much greater amount of psychotherapy is of special interest, as is the integration of the hospital and Local Authority personnel in the striving towards continuous care in the

community. In his own unit the notable feature was the exposure through the growing collaboration between the psychiatrist and the staff of the other units of a high incidence of psychiatric disturbance amongst the patients referred to the other departments of the hospital.

To highlight failures in our services, he takes the almost negligible provisions for the mental health needs of students, and the fate of the drop-outs, with their high proportions of chronic alcoholism and other serious disorder. For these failures the reluctance of medicine to take its responsibilities has been a major influence. Yet the doubts that exist about the extent to which the gaps are medical problems are stated; and in referring to alcoholics, it is not medical personnel who probably can make the most effective therapeutic contribution.

What then is psychiatry to do, and where? In an admirable chapter on the theoretical prejudices which have bedevilled our field Sir Denis puts the matter sharply. What 'is the extent of our responsibility to those in distress, who may or may not have physical disease as it is commonly understood'? It is necessary to look at the widespread beliefs which underpin our conceptions of what 'disease' means, *even our ideas about human nature* (reviewer's italics). How our concepts of disease affect what we do to patients is then illustrated by the controversies about the nature of depression. His own position he supports by a recent statement of Sir Aubrey Lewis on the vagueness of the distinction between the psychoses and the neuroses, a distinction with no secure foundation, neither in somatic pathology nor in psychopathology. In this quotation is the following sentence. 'Psychoses can be seen as faulty efforts at *self-protection* (reviewer's italics) and adaptation in the face of physical and psychological noxae'. This is assuredly a statement of major import. I believe its implications are not realized although they are central to the discussion of the future of our mental health provisions.

When he turns to the psychological, Sir Denis gives an informed appraisal of the influence of psychoanalysis. He is in no doubt that any special skills distinguishing psychiatrists from other doctors are psychotherapeutic in nature and derived in a major degree from psychoanalysis. Furthermore, he believes that it is these skills, now shared by psychiatric nurses and psychiatric social workers, which have saved the patient as a person in the flood of scientific study. As a specialist psychotherapist, he sees the analyst as teacher in the great expansion of psychotherapeutic skill that is needed, and in these skills he rightly stresses the basic part of psychological understanding. A surprising expectation is

then revealed, namely, that psychoanalysis should provide a *psychotherapy* as though it were a kind of technological procedure to be evolved and taught. In keeping with this notion is his use of the term 'supervision' as part of the relationship between the psychotherapist and the other professions. Amongst so much that is wise and perspicacious, this kind of over-simplification represents a curious lapse. While appropriate to a training period, in what sense could there ever be a continuing supervision? Experience has shown that if the psychiatrist can offer training to other professional groups which is judged by them as relevant to their tasks then these groups make free and continuing use of him as a consultant whenever they feel they are stretching the limits of their skills. But this is a very different relationship from a supervisory one.

It is, then, an intrusive 'medicocentrism' in what he envisages that will have to be scrutinized. For instance, the family doctor is placed as the prime caretaker with all other services accepting this primacy. Again, the psychiatrist is seen as offering a diagnostic service and taking decisions about treatments which others will have to implement. This is surely a medical model par excellence, and of course there will be many treatments for which it will be appropriate. With the 'treatment' of the person as a person, however, it has severe limitations. Without a high level of expertise in the skills others have to use, will the psychiatrist be much in demand as a consultant? Clearly as he sees the need for a quite new assimilation of psychotherapeutic skills into psychiatry, Sir Denis does not pursue his insights to their logical conclusions. In his quotation from Sir Aubrey Lewis, the psychological disorders are related to self-protection. Now if this is meant to be taken seriously, should we not expect some prominence in psychiatric theory and practice given to the nature of the self, its development and maintenance, and especially the way in which the culture affects these aspects? As already mentioned, Sir Denis comments that the personal skills of those treating the psychological disorders have saved the person from the kind of scientific study that has been dominant for the last several decades. But he does not confront psychiatry in any way appropriately challenging, e.g. how scientific is its scientific work if it omits so much of what is essential? (It was perhaps this 'unfinished business' that led him to deal with the status of 'meaning' in science in the Ernest Jones Lecture he gave last March.) I believe that it is here that so many of our allied professionals find psychiatry deficient.

Faced with the enormous incidence of psychological distress, it is readily understandable that the pro-

vision of therapeutic services by professional groups should preoccupy the psychiatrist. There is, however, another theme that must be taken into account and that is the effect on society of an awareness of its own ills and of the origins of some of them. Sir Denis does not consider this sociodynamic process. If the need for help is as large as the evidence suggests, can we, or should we, contemplate a situation in which so many would accept a dependent relationship on the caring professions? Is it not more likely that society, through various emergent growing points, will want to take its own destiny in hand more independently? When Freud first communicated his views on the development of the person, the major response was not for treatment but to create more freedom in education and in living. The psychiatric clinic which is perceived as having useful knowledge about human problems now has other than patients knocking at the door. Various groups, institutions and organizations are looking for help, seeking a relationship in which they can use in their own way some of the illumination the psychiatrist can shed on their problems rather than entering into a dependent relationship in which the therapeutic effort is handed over to the psychiatrist. Might not a dynamic of this kind underlie the move to place the social work services in the heart of the community? We cannot answer such questions easily, but it is important to note spontaneous trends as manifestations of such forces stemming from changes in the existential values of our culture. The dependent relationships which characterize medicine do not equip us to detect such forces without special effort.

The psychiatric clinic, then, may well have to become a very different place from one from which radiates a series of dependent relationships. Instead, its primary task may be to function as a resource centre whose expertise is used by others in their own way. As a centre for treating the more severely ill, it has unique opportunities for keeping up a level of expertise which will lead others to use it. Above all, can an adequate theory of personal development and functioning, an essential framework for the development of psychotherapeutic skill and for improving human relationships, come from any other source than a centre in which personal therapy is the main endeavour? When Sir Denis suggests that psychiatric clinics should have social scientists working in them, conceptual integration will not stem from the geographical proximity. A great deal of hard conceptual work will have to be done before we bridge some of the gap between what goes on in the individual and the forces in our culture that mould him. The reader is left wondering if the author gives adequate place

to the intimate relationship between theory and practice. These doubts are increased when it is also suggested that the skills of nurses may have to be raised through senior tutors taking degrees in psychology and sociology. Is there any evidence to support the view that such courses would do anything to improve that empathic understanding he has stressed so much? This matter is of much wider importance than the development of professional skill. The plain fact is that psychodynamic understanding has hardly penetrated education, especially adult education; were it to do so the community's resources for tackling some of the problems of psychological stress could be greatly increased. In this country, such movements as the School for Parents have hardly started.

The clarity and conciseness with which so many relevant issues are discussed in this short book are remarkable. It is an indispensable starting point for the thinking that must now be done. By taking his theme as 'psychiatry in medicine', Sir Denis may have imposed constraints on his own thinking, constraints which may have impeded his moving far enough. That he may have intuitively sensed that more far-reaching considerations will be needed is perhaps indicated by the final quotation from Seebom. Psychiatry in medicine may make retrospective influences too great; prospects may have to focus more on psychiatry in society.

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WHY WAS IT PUBLISHED?

The Autistic Child. By I. NEWTON KUGELMASS. Springfield, Illinois: Charles C. Thomas. 1970. Pp. 371. Price \$16.50.

The purpose of this book, as stated in the preface, is to 'integrate the newer knowledge of childhood autism as complete social aphasia with marked CNS disorganisation.' The subject matter includes clinical description, assessment, aetiology, and management of the autistic syndrome.

This volume is one of the Bannerstone Division of American Lectures in Living Chemistry series (under the general editorship of Dr. Kugelmass) which, according to the Editor's foreword is 'charged with the *nisus élan* of chemical wisdom, supreme in choice of international authors, optimal in standards of chemical scholarship, provocative in imagination for experimental research, comprehensive in discussions of scientific medicine and authoritative in chemical perspective of human disorders'. In fact, the present book is a review of some of the