contributes to the diversity and interest of the book.

It is easy for psychiatrists and psychoanalysts to ignore the topics represented in this book, and many will continue to do so, but it constitutes a worthwhile attempt to make sense, interestingly, critically, thoughtfully and responsibly, of an area which is burgeoning and perhaps even approaching meltdown in terms of alternative therapies and alternative syndromes. It deserves attention.

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Affect Regulation and the Origin of the Self. The Neurobiology of Emotional Development

By Allan N. Schore. Hillsdale, NJ: Lawrence Erlbaum. 1994. 542 pp. £119.95. ISBN 0-805-81396-9

This impressive work takes as its central theme the view that the adult's socio-affective life is critically determined by events in infancy between the child and the primary care-giver, usually the mother. Hardly news to a psychotherapist or anyone versed in modern revisions of psychoanalytic theory, notably attachment and object relations theory, but here we have a vast amount of neurobiological data supporting this contention and offering the possibility of a *rapprochement* between neurobiology and psychoanalysis, as Freud always hoped.

Allan Schore reveals himself as a polymath, the depth and breadth of whose reading, bringing together neurobiology, developmental neurochemistry, behavioural neurology, evolutionary biology, sociobiology, developmental psychology, developmental psychoanalysis and infant psychiatry, is staggering. Through a series of essays he produces evidence that genetically programmed structural connections in the developing infant brain are dependent on, and significantly modified by, the quality of the mother–infant relationship at a number of critical periods, particularly during the 'practising phase' between 12 and 20 months. During this period there is a massive turnover of synaptic connections, particularly in the right orbitofrontal cortex which is establishing links with the limbic, neuroendocrine and autonomic nervous systems. It is the development of this cortex and its reciprocal connections in the presence, or not, of an adult who can contain powerful affects and respond rapidly and intuitively to the infant's needs that crucially determines the development of the ability to self-regulate affect. Significant failures in this relationship predispose the adult to psychiatric disorder by limiting the repertoire of possible socio-affective adaptations when the individual is subjected to stress. The author would contend that all functional psychiatric disorder is determined by a series of neurodevelopmental failures, and there are chapters specifically dealing with the origins of affective disorders, personality disorders and vulnerability to psychosomatic disorder. The roles of monoamines (particularly dopamine) and endogenous opioids in the development of the orbitofrontal cortex and discussed in depth.

This is not an easy book to read. The number of references which pepper the pages and the strings of pretty gruesome compound adjectives are a barrier to understanding, though perhaps this problem with language is to some extent inevitable in this attempt to link the overlapping but distinct jargon of so many disciplines. A weakness of the book is that in his enthusiasm for integration he often fails to distinguish between work that is speculative and that which is empirical. Likewise, it is not always clear whether papers refer to animal models or are based on human studies without consulting the original work. However, once you've struggled through a chapter, you're often rewarded by a surprisingly clear and succinct summary.

These reservations aside, this is a superb integrative work, an excellent source book and required reading for any psychiatrists wishing to locate their work within the much broader study of mind. It is a book to borrow rather than to own but it deserves a place in a departmental library. It might also form the basis of what could be an enormously creative dialogue between neurobiology and psychoanalysis.

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Disorders of Affect Regulation. Alexithymia in Medical and Psychiatric Illness

Edited by Graeme J. Taylor, R. Michael Bagby & James D. A. Parker. Cambridge: Cambridge University Press. 1997. 359 pp. £45.00 (hb). ISBN 0-521-45610-X

I was somewhat wrong-footed when asked to review a book which by its title looked to be concerned with fairly straightforward biological psychiatry. I was further exercised reading the foreword to find that Freud's original formulation of libido "has now re-emerged in the more suitable guise of affects. Indeed, affect theory is how we are personally affected by events". Taking a deep breath, I read on! The book is concerned with alexithymia in medical and psychiatric illness. Alexithymia is defined as "deficits in the subjective awareness and cognitive processing of affects" and that certain medical and psychiatric illnesses arise from disorders of affect regulation.

There is a background to the work. There is an attempt to describe the various themes in the development and regulation of affects. Darwin's work appears to be seminal in describing the importance of signalling emotions by facial expression for the function of social groups in animals and man. Application of these ideas by system theory leads to the concept that emotion possibly modulates the organisation of behaviour and may be linked to the development of personality structure. So far so good, but what about pathology?

Alexithymia can apparently be measured by a number of scales, only one of which (presumably for copyright reasons) is given in the appendix. Most of the scale, 9 of 12 items, deals with the patient's inability to verbalise their feelings and emotions to others. The others deal with fantasy and dreams: "the content of the patients dreams closely resembles every day thoughts and events rather than being more symbolic or abstract in nature". In the broad Church of Psychiatry, how many but the analytically trained could answer those questions correctly?

The list of disorders resulting from alexithymia is almost endless: somatisation disorder, chronic pain, anxiety and depression, panic disorder, post-traumatic stress disorder, personality disorder, substance use disorder, eating disorders are listed among the psychiatric illnesses. Coronary