

Mental Health: Tribunal Procedure (2nd edn). By LARRY GOSTIN and PHIL FENNELL. London: Longman. 1992. 290 pp. £25.00.

As one who has sat on the wrong side of the tribunal table for some 20 years, I approached this manual for those representing patients with some trepidation. I need not have worried. Judged as a guide to procedure I found it clear, comprehensive and, I believe, fair to all parties. It covers everything from the admission of informal patients to the recall of restricted ones. It warns against persistently hostile questions being put to the responsible medical officer, and the need to obtain the cooperation of all those who might provide aftercare. Informality is still the fashion.

Unfortunately, the chapter on medical issues is the weakest part of the book – old-fashioned, poorly organised with unnecessary, idiosyncratic and inaccurate lists of drugs, and the Code of Practice sandwiched between paranoid states and learning disability. There is no attempt here to describe how mental disorders might lead to disturbed, irresponsible, suicidal or dangerous behaviour, or what psychiatrists might be trying to prevent when they recommend compulsory admission. Clearly, if one of the aims of this book is to educate the legal profession about psychiatry, it will miss its mark.

Doctors, however, can learn much from it. The authors cite no less than 34 statutes and 73 cases, a measure of how the law relating to tribunals has developed particularly since the 1983 Mental Health Act. Here, conveniently indexed, are our friends *Winterwerp v. Netherlands*, *X v. United Kingdom*, and *R v. Hallstrom*, to name only three.

There are, of course, issues which are not discussed. The role of relatives, the independence of 'independent' medical reports, and the problem of what to do when the client's instructions are not based on reality come to mind, but these will not prevent me keeping my copy.

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Counselling for Anxiety Problems. By RICHARD HALLAM. London: Sage Publications. 1992. 178 pp. £9.95.

This is a well planned book which will be a helpful introduction to the subject of anxiety and its behavioural and cognitive treatment for those in the counselling profession and for other professionals who deal with anxious patients.

The first chapter provides a theoretical framework for anxiety which could be usefully read by all in psychiatry; it is clear and thoughtful. Following chapters look at the genesis of anxiety and the assessment and treatment of patients. There are detailed case histories which illustrate the suggested format for working with these patients, demonstrating those factors which are

highlighted and focused upon, and those which are therapeutically ignored.

There are also excellent chapters on the role and art of confrontation and on the problems of ending therapy in a way which confirms, rather than destabilises, the gains already made by the patient.

Each chapter ends with suggested further reading – the references described so that the reader can choose those most pertinent to themselves. As well as this impressive list of references, there is also a list of explanatory booklets, a hand-out for anxious patients, and a list of questionnaires useful in assessing the extent of a person's anxiety problems.

All this adds up to a helpful book which highlights, with a refreshing simplicity, a proven way of treating anxious patients.

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Neurological Basis of Childhood Psychopathology. Developmental Clinical Psychology and Psychiatry Series. Volume 25. By GEORGE W. HYND and STEPHEN R. HOOPER. London: Sage Publications. 1992. 133 pp. £11.50.

Hynd & Hooper's book provides an introduction to neurological foundations and neuropsychological models of childhood psychopathology, broadly defining 'psychopathology' to include selected psychiatric and developmental disorders and specifically discussing depression, attention-deficit hyperactivity disorder, Tourette's syndrome, mental retardation, autism and reading disability. Given recent technological advances in brain – behaviour research and the accumulation of data in need of critical appraisal and integration, this volume promised to be a welcome addition to Sage publications' generally laudable series.

However, although the introductory chapters commendably raise issues about 'normality', interactions between cognitive and emotional development, syndrome validation, and the importance of accurate delineation of brain dysfunction in countering increased vulnerability for psychiatric disorder, consideration of these issues is disappointing in subsequent discussions of specific disorders. Comorbidity of disorders receives scant attention despite implications for syndrome validation, and division of disorders into 'psychiatric' and 'developmental' appears somewhat arbitrary – the statement: "whatever the neurological basis of ADHD, it is most likely developmental and/or genetic in origin" (p. 65) referring, for example, to a disorder designated as 'psychiatric'.

Despite a general division into 'neurobiological' and 'neurobehavioural' studies, there is marked inconsistency in both the selection (for example, genetic influences are discussed for some disorders but are barely

mentioned for others) and the organisation of material between chapters and, in this respect, Hynd & Hooper's book compares unfavourably with B. Pennington's *Diagnosing Learning Disorders* which clearly organises similar (sometimes identical) material by aetiologies, brain mechanisms and neuropsychological phenotype.

Contradictory research findings, diagnostic difficulties, imperfect understanding of normal/abnormal neurological development and its effects on adaptive and cognitive functioning complicate this area, and perhaps it is too soon to expect clarity without oversimplification. The essential message – that the behaviourally defined disorders discussed are neurologically based – is clear and, as a source book for supporting evidence, Hynd & Hooper's concise and adequately indexed volume is likely to be of use to professionals in many disciplines.

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Treatment of Age-Related Cognitive Dysfunction: A Pharmacological and Clinical Evaluation. Edited by G. RACAGNI and J. MENDELEWICZ. Basel, Switzerland: Karger. 1992. 154 pp. £60.50.

This volume was produced as a result of the workshop on "Treatment of age-related cognitive dysfunction: a pharmacological and clinical evaluation" held in Monte Carlo, 3–5 October 1991. This workshop, carried out under the auspices of the Commission for the European Community (EC), contained 16 contributions by researchers from the EC countries and North America. The production of a volume on age-related cognitive dysfunction and the prospects for its treatment is particularly timely and represents an excellent review of the problems of classification, neuropsychological characteristics, and the underlying mechanisms of aetiology and pathogenesis of a condition that is exciting the interest of researchers and the pharmaceutical industry, particularly with respect to the development of new therapeutic agents. The book explores and draws together animal models of learning and memory and discusses the properties of long-term potentiation as a model for understanding the electrical and chemical processes that constitute the synaptic basis of learning and memory, and the potential for promoting the activation of the amino acid receptors that underly these processes, providing a possible avenue for therapeutic intervention.

Another area of particular interest is the role of nerve growth factors and other neurotrophic agents whose absence may impair the development of neuronal systems, particularly the cholinergic. This again forms a

potential avenue for influencing the degeneration of cholinergic neurones in age-related cognitive dysfunction and the dementias. This book will interest all those working in the field whether they be pharmacologists, psychologists, psychiatrists, or neurologists. It brings together an overview of the current status of knowledge from several different points of view in a manner that would excite the reader, and is broad enough in its scope to act as a useful review and update across the disciplines.

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Adult Psychopathology and Diagnosis. Edited by MICHAEL HERSEN and SAMUEL M. TURNER. Chichester: John Wiley. 1991. 519 pp.

This is the second edition of this book, the first of which appeared in 1984. It has been updated and expanded, and again has been structured according to the DSM diagnostic categories. In addition to the two editors, no less than 25 other authors contribute to the 17 chapters in this book.

It is divided into three sections, the first dealing with models of psychiatric classification. Following a brief account of the evolution of descriptive psychopathology and classification from Emil Kraepelin to the present, various individual models are described. The author argues that DSM-III-R uses a dimensional rather than a categorical model. This section also includes a description of the practical use of DSM-III-R. For anyone not familiar with the use of the multiaxial system, this is a clearly written and comprehensive account. The advantages of such a system are also argued very convincingly.

The second and largest section deals with specific disorders. Each chapter provides the reader with a brief introduction, usually with a historical content, followed by a clinical description of the condition which includes the diagnostic criteria of DSM-III-R. The major theories of aetiology are discussed and most chapters also include a description of techniques of assessing and measuring behaviour comprising the syndrome. The editors point out in the preface that treatment is not discussed unless it contributes to the understanding of the psychopathology of the condition.

The chapters on organic disorders and sexual disorders are succinctly written with an enormous amount of information contained in relatively few pages. There are two chapters on psychoactive substance-use disorders, and while I found the one on drugs detailed and informative, I was disappointed in the contribution on alcohol where I felt the clinical description too brief to be of value. I also found the chapter on schizophrenia to be weak on clinical features with little attempt to elaborate on the tables of DSM criteria. On the other hand the