

This publication will interest anyone concerned with the development of psychiatric services in the United States. It has limited relevance to Britain. Changes here are likely to be implemented much more slowly. There should be adequate opportunity for ongoing research and evaluation. In changing to local provision stresses should not be of the same intensity as those reported between Federal health centres and State hospitals.

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**Critical Issues in Psychiatric Diagnosis.** Edited by ROBERT L. SPITZER and DONALD F. KLEIN. American Psychopathological Association Series. New York: Raven Press. 1978. Pp 356. \$30.00.

The pendulum has swung. For a decade or more a motley band of antipsychiatrists, sociologists and pop therapists have had the stage to themselves in North America (or at least so it has sometimes seemed from this side of the Atlantic). Mental illness was either a myth or the product of social deprivation, biology was bunk, and any therapist was acceptable provided he wasn't a doctor. But quite suddenly the paper tigers have crumpled and old fashioned biological psychiatry has reasserted itself. The 'medical model' is no longer a term of abuse and a proper concern for diagnostic criteria is almost fashionable. This book is a sign of this new found confidence and authority, and is welcome for that reason alone. It consists of a collection of twenty essays which presumably started life as the proceedings of a conference, though curiously this is never explicitly acknowledged. There are four sections: the first concerned with the definition of mental illness, the second with the role of projective and other psychological tests in the diagnostic process, the third with recent twin and adoption studies of schizophrenia, alcoholism and antisocial personality, and the last with biochemical and EEG correlates of clinical syndromes. Most of the authors are from NIMH, the Biometrics Research Unit in New York, Iowa or St Louis. The first chapter, appropriately enough, is a confident assertion by Jane Murphy that the major psychoses are universal and independent of cultural variables. Next come a pair of brave attempts by the editors themselves to define mental illness, followed by an incisive discussion of the issues involved by a Harvard lawyer, Michael Moore. Most of the other chapters are restatements of previously published work but some, like Goodwin's review of the evidence that alcoholism is genetically transmitted and Crowe's analogous review of genetic studies of antisocial

personality, are useful summaries of work that will not be familiar to everyone. The 'discussion' sections are mercifully short.

The editors' central conclusion is that the introduction of structured interviewing techniques and operational definitions has solved the once crippling problem of the unreliability of psychiatric diagnoses, and that what has to be done now is to establish the validity of these diagnostic concepts and to identify their biological correlates. I think they are right, but I wish their contributors showed a little more awareness of the role of past experience and current stress in the genesis of mental illness. It is not necessary to operate in a psychosocial vacuum in order to be scientifically respectable and unless biological psychiatry learns to adopt a broader perspective than it has had in the past it will not be long before the pendulum swings once more.

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**1978 Year Book of Psychiatry and Applied Mental Health.** Edited by DANIEL X. FREEDMAN, ARNOLD J. FRIEDHOFF, LAWRENCE C. KOLB, REGINALD S. LOURIE, JOHN C. NEMIAH and JOHN ROMANO. London: YB Medical Publishers. 1978. Pp 412. £24.50.

These year books abstract and comment upon selected papers from clinical psychiatry, the basic medical sciences, and social, forensic, and community applications. Some rationalization of headings is overdue: why 'general clinical topics' and 'clinical psychiatry'; or 'drug abuse' and 'drug addiction'. Four pages for behaviour therapy and a single reference to sex therapy hardly represents their current importance and emphasizes the need for a psychologist to be added to the distinguished editorial board. What, in 1978, seems to be most original? Possibly the interest in several new conceptual models both for depression and paranoid states. Where is the current accentuation in the U.S.A.? The elderly perhaps, the community, medico-legal issues and greater emphasis on objective studies of the psychotherapies. Any surprises? Several papers analyse questionnaire studies concerning sexual relations between doctors—all specialities, both sexes—and their patients. Individual psychiatric departments must decide whether money is better spent here or, as I would think, on gradually buying more journals.

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