

John Sym (?1581–1637) was a minister of religion at Leigh in Essex. He was thus an exact contemporary of Robert Burton (1577–1640), who was also in Holy Orders, but whereas Burton's *Anatomy of Melancholy* is perhaps the most famous and most frequently reprinted of antiquarian psychiatric texts, Sym's treatise seems to have dropped out of history.

What Sym's work brings out so well is the unrelenting condemnation of suicide at the time when he lived and wrote. It was considered a species of murder, condemned by the law, by religion, and by folklore. It was a sin, "most hainous and most to be abhorred in humane society". It was diabolical. Those posthumously found guilty by a coroner's jury of *felo de se* were savagely punished. They were denied the customary rites of Christian burial, and instead were buried face down at night in a public highway and pinioned with a wooden stake. Their properties and worldly goods were forfeited to the crown.

Sym was a militant puritan, and ostensibly subscribed to the universal abhorrence of self-killing. And yet, paradoxically perhaps, he acknowledged that self-destruction was not uniformly determined, but had a variety of causes, including melancholy – that is, mental illness. His long personal experience in giving what help he could to potential suicides had led him to believe that suicide may be prevented "not so much by arguments against the fact . . . as the discovery and removal of the motives and the causes" – a singularly enlightened approach and one far in advance of his time. Furthermore, it would appear that he was in practice much more tolerant of self-killing than the majority of his contemporaries, both clerical and secular.

This is a book to be warmly welcomed, not only for its intrinsic scholarship, but because it succeeds in finding room for Sym in the pantheon of early observers of the human condition alongside, for example, Robert Burton and Timothy Bright whose work, incidentally, he complements.

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**Problem-Solving Therapy for Depression: Theory, Research and Clinical Guidelines.** By ARTHUR M. NEZU, CHRISTINE M. NEZU and MICHAEL G. PERRI. Chichester: John Wiley. 1989. 274 pp. £19.15.

This book provides a valuable addition to the existing literature on the therapy of depression, and discusses a new model of treatment for this important disorder. Divided into two parts, it deals first with the existing behavioural and cognitive models of treatment and asks the pertinent question "Why another theory of depression?" It then proposes the problem-solving model as a multifactorial approach which can link and incorporate key features of other models, outlines its theoretical background, and shows how it can be applied to the treatment of depressive symptomatology.

The role of social and life events, biological and genetic factors, previous history and learning experiences, and the problem-solving process itself are used to show how clinical depression may be caused by a variety of factors, and to support the new treatment model put forward. The chapter dealing with the step by step processes of the problem-solving approach is particularly clear and useful.

The second half of the book concentrates on the ways in which problem-solving concepts can be applied to clinical practice, and is well illustrated by examples, including dialogue. A short section on "Pitfalls to avoid" is helpful, even for the more experienced therapist. I particularly liked the clear definitions of terms used throughout the book, and the summaries at the end of each chapter. For example, 'Brainstorming' is a much-used word nowadays, and my understanding of it has been clarified and extended.

All in all, this is a well-presented volume which integrates theory and practice effectively, although it is slightly marred for me by the somewhat tortuous sentence construction. Reasonably priced, it deserves to be read by all those concerned with the care of depressed people.

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**The Mind Observed: The Mental State Examination.** By ASHLEY BUSH. Melbourne: University of Melbourne. 1989. 55 minutes.  $\frac{3}{4}$ " U-MATIC, \$90.00;  $\frac{1}{2}$ " VHS, \$65.00.

The examiner feels a mass in the right hypochondrium, and without needing to cup open the abdomen he can be fairly certain that the mass is a liver. "A similar philosophical mechanism is in operation in the Mental State Examination", begins this videotape. Philosophy apart, what follows is a good lecture delivered at a cracking pace by a personable Australian psychiatrist on the Mental State Examination. However, it is illustrated by a series of doctor/patient interviews which have the sound turned down very low. As the lecturer pauses for breath, one can occasionally make out what is being said, but often it is not relevant to the commentary.

In the last few minutes of the video we can get to hear as well as see the interviews, and titles appear, identifying the phenomena as they flash by. Unfortunately, the effect is often humorous. For instance, a lady says that she feels lonely and a title appears saying THEMES OF LONELINESS. She says she wants counselling, and the title says INSIGHT: GOOD. Sometimes the titles prejudice the issues, as when FLATTENED AFFECT appears after a few seconds of an interview, and sometimes they are hard to follow, e.g. AFFECT UNREACTIVE (NARROW).

The video is of good technical quality, and the acting is very convincing. Features that make it of limited use