

Book Reviews

Editor: Sidney Crown

Drug-induced Movement Disorders. Edited by ANTHONY E. LANG and WILLIAM J. WEINER. New York: Futura Publishing. 1992. 395 pp.

This multi-authored American volume deals comprehensively with all aspects of drug-related movement disorders and is an excellent reference book. Each chapter is self-contained, and includes definitions of the particular side-effect, its clinical features, neurochemical correlates, pathological basis, and treatment. Despite the comprehensiveness, there is little of the repetition between chapters which often clutters books of this kind; this presumably reflects considerable editorial effort.

The first seven chapters are all well worth reading, running through the classic subtypes of neuroleptic-induced movement disorders, both acute and chronic, and including neuroleptic malignant syndrome. Also included is a chapter on spontaneous movement disorders in psychiatric patients, which provides a useful balance and reminder that it is not only medication but the diseases themselves which may be to blame. The well known but often overlooked diagnosis of Wilson's disease is rightly highlighted in this regard. The latter contributions discuss movement disorder side-effects of L-dopa, dopaminomimetics, and miscellaneous drugs such as anticonvulsants. Although dealing with specialised issues, these chapters will be valuable, for reference, to those dealing with Parkinson's disease and other neuropsychiatric conditions where drug-induced problems are more common and may be harder to distinguish from the underlying disorder.

What this book also makes clear, despite the wealth of studies reported (over 1200 are referenced), is how little is really known of the relationship between psychotropic drugs and movement disorders. For example, even some of the apparently well established risk factors for tardive dyskinesia prove to be rather less so once the primary literature is reviewed. Equally, the common treatments for drug-induced movement disorders also lack much empirical support. Many accepted beliefs in this field seem to derive from case reports or small uncontrolled studies from which unjustifiably firm conclusions have been drawn; paradoxically, one criticism of the comprehensiveness of the book is that many such studies are discussed in detail even though their limitations are recognised.

Despite these many gaps in understanding, this book emphasises that there can be no doubting the frequency and severity of movement disorders induced by drugs, notably neuroleptics. The practical question of how and when (or, indeed, if) we inform our patients about these potentially serious consequences raises issues of consent and compliance which also deserve attention.

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Children of Alcoholics: A Critical Appraisal of Theory and Research. By KENNETH J. SHER. Illinois: University of Chicago Press. 1992. 226 pp. £19.95.

It is refreshing to see a publication which draws attention to the effects of alcoholism on children. Like children of parents with schizophrenia or depression, children of alcoholics are a population which is at risk of developing alcoholism and other related problems. The author reports that "reasonable estimates suggest that at least 10% of the population can be considered to be children of alcoholics" in the USA. Although it is acknowledged that the concept 'children of alcoholics' does not define a precise clinical category, the book reviews systematically the present knowledge and gaps with "the goal of providing multiple frameworks for understanding the intergenerational transmission of alcoholism and related problems".

An extraordinary wealth of research is presented and carefully discussed, and this makes the book very useful for reference. On the other hand, this might make the book rather difficult to read for the busy clinician who is not a specialist in the field. However, the summary at the end of each chapter is very helpful in highlighting the main issues. Research quoted suggests that "alcoholism is more strongly related than other disorders" to child abuse (p. 26), a finding which is well known to clinicians.

The final chapter reviews the clinical literature, including therapeutic approaches, and discusses the potential risks of the label 'children of alcoholics', as not all children have psychological problems, nor are all in need of therapeutic interventions.

This book raises important issues for the clinician working with alcoholics and draws attention to the

effects of alcoholics on other family members in order to prevent, or reduce, future pathology. Certainly the assessment and therapeutic plan need to take this into consideration, with the corollary that adult and child psychiatric services need to collaborate in these tasks, a point implied but not stressed enough in the book.

I think that this book should be available in all psychiatric libraries for consultation, and that trainee psychiatrists should be encouraged to look at least at the summaries at the end of each chapter. Everyone dealing with alcoholic patients should be aware of themes explored in this book.

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Cocaine: Scientific and Social Dimensions. CIBA FOUNDATION SYMPOSIUM NUMBER 166. Chichester: John Wiley. 306 pp. £42.50.

A friend of mine, describing her father, said, "He wants to know about everything". Then she paused and corrected herself, "No, he does not want to know about everything, he wants to have an opinion about everything". The trouble with this book is that the various contributors express themselves in a mixture of knowledge and opinion and there is no clear separation of one from the other. Thus the readers of this book are fed much of both, and have to come to their own conclusions about which is which since many opinions are so authoritatively presented as to resemble something more substantial.

To some extent that problem is the consequence of the book's format. It is the edited transcript of a two-day symposium held in London in July 1991, chaired by Griffith Edwards with participants from the USA overwhelmingly in the majority. Most presented a short paper and there followed a discussion. Each of the 15 main chapters, excluding the opening and closing remarks from the chair and one general discussion on AIDS/HIV infection in cocaine users, is around 20 pages in length. The perspectives vary greatly: from the history of cocaine use in the USA to its molecular pharmacology and the determinants of its self-administration in laboratory animals (rhesus monkeys), to treatment approaches (human beings), policy implications, and ethical issues.

The intent at the symposium was to merge the horizon as seen from such different perspectives. These differences were vividly illustrated by two images (reproduced in the text of the opening remarks); of a caged laboratory rat hitched up to a self-administration system, and of a Bolivian peasant woman being dragged off (presumably to a cage without self-administration facilities) by armed police for involvement in coca paste-making activities. The book is a solid and sometimes irritating read; the lack of in-depth cocaine knowledge of the

small British contingent is conspicuous. There are some notable contributions, particularly David F. Musto on the history of cocaine use, C. D. Kaplan *et al* on "Are there 'casual users' of cocaine?" and Harold Kalant on policy formulation. But the product of the symposium, this book, fails to achieve its own declared objectives.

Because of the breadth of focus, the discussions after the papers tended to be either rigorous questioning by one expert in a specific field of another, or more general, often trite, questions or comments from others whose area of expertise it was not. This reviewer was therefore forced to question what merit there is in sharing horizons as broad as these. It is self-evident that one discipline, one area of investigation, can be informed by findings from another, but what are the limits of this approach? Do policy formulators and economists really need to know that cocaine-use probably is reinforced by mediation at dopamine 2, rather than dopamine 1, receptors? There is such a thing as *expansio ad absurdum* too!

What the book does demonstrate, however, is what happens if you put a mix of 24 international experts in a cage with a self-administration microphone for two days. They display their knowledge and then their lack of it.

DOUGLAS CAMERON, *Senior Lecturer in Substance Misuse, University of Leicester*

Cocaine, AIDS and Intravenous Drug Use. By S. R. FRIEDMAN, D. LIPTON and B. STIMMEL. New York: The Haworth Press. 1991. 124 pp. US \$8.95.

Most drug-misuse treatment services in the UK at present are seeing caseloads dominated by opiate users, partly because of the extensive provision of methadone treatment. Meanwhile, there is increasing concern that users of other drugs such as amphetamines, MDMA, and cocaine are being neglected; in the case of cocaine this concern is coupled with a great uncertainty about the extent of any possible USA-style epidemic, as predicted in recent years.

Against this background, no new, reasonably wide-ranging text on cocaine could be considered unwelcome. This one is not of the top rank: for one thing it is not exactly new but a republication of a special issue of the *Journal of Addictive Diseases* from 1991. It is a series of separate papers from the USA on aspects of the subjects contained in the title, rather than a systematic working through of the important links between these areas. On balance I definitely found it a useful book, the review of pharmacological treatments for cocaine abuse, and the study of changes in cocaine use in patients taken on to methadone programmes, being of particular clinical relevance. Other chapters include a study of cardiovascular dysfunction after cocaine and alcohol abuse (a reminder that we have recently not been used to treating