

particular enigma remains as far from being solved as ever.

Yet the participants remain buoyantly optimistic and there is no shortage of confident assertions, a sure sign that we are on thin ice. The currently fashionable therapies all receive an airing—progesterone, in natural or synthetic form, prolactin, pyridoxine, spironolactone—but, as before, the most striking therapeutic finding is that the placebo effect in this condition is often as high as fifty per cent.

Research is clearly being hampered by the use of different definitions of the syndrome and failure to specify definitions used. In addition, more women label their complaints as being due to the premenstrual syndrome than do investigators and a growing caution can be detected in the contributors to this volume when it comes to diagnosing cyclical behavioural and mood changes in women presenting to gynaecological and psychiatric clinics.

This book closes as it opens. The chairman, Pieter van Keep, encourages us all to find the best treatment by trial and error “though our knowledge, particularly through well-controlled clinical studies, is increasing all the time”. It is a characteristic mixture of realism and optimism though whether the contributors always have the two qualities in quite the right proportions is for the reader to judge.

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Review of Transference Neurosis and Transference Psychosis. By MARGARET I. LITTLE. New York: Jason Aronson. 1980. Pp 323. \$25.00.

Margaret I. Little is an English psycho-analyst whose work has received less attention than it deserves on both sides of the Atlantic. Now, as part of a new American interest in the work of English analysts, Robert Langs has edited this collection of her papers, unpublished fragments and poems. She was a devoted follower of Winnicott with a somewhat prickly independence which apparently brought her into conflict with many of her colleagues. This is made clear in the final chapter of the book in which she describes her personal and professional experiences in an unusually frank interview with Langs. Anyone interested in that period shortly after the war when controversy raged between the followers of Anna Freud and Melanie Klein will find this fascinating reading.

Her work centres around two related topics: the analyst's counter-transference and the treatment of borderline and psychotic patients who develop a transference psychosis in treatment. Both of these have become central issues in contemporary psycho-

analysis, and Little deserves much credit for drawing attention to them almost thirty years ago. In a transference psychosis the patient develops a delusional conviction usually that the analyst is either in love with them or is persecuting them. Although this presents serious technical problems for the analyst it also presents an opportunity to analyse psychotic mechanisms which may be of great importance to the patient. Often the delusion focuses on a specific item of the analyst's behaviour, something he said or a special look which takes on a delusional significance and the analyst has to be prepared to examine how his own behaviour contributed to this state of affairs. This is where the counter-transference becomes so important and all analysts agree that a sensitivity to his own reactions and a capacity to recognize his mistakes and misjudgments are essential features of a good analyst. There is, however, some disagreement on how this insight into the counter-transference should be used in the formulation of interpretations. Margaret Little believes that her first analyst mishandled her treatment and this made her especially sensitive to a situation where the patient recognizes difficulties his analyst is having, or where the patient feels the analyst is wrong but is not strong enough to stand up against him. At times she seems to be using the patient as a therapist to deal with her own anxieties and is not fully aware of the danger of a mutual type of acting out where the patient is at first excited by the confidences but later feels he has to look after and protect the analyst from depression and anxiety. While many readers will disagree with her on this and other issues in the book, they will find it stimulating and instructive reading.

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Sleep and Sleeplessness in Advanced Age. (*Advances in Sleep Research, Vol. 5*). Edited by RENE SPIEGEL. Lancaster, Lancs: MTP Press. 1981. Pp 272. £17.95.

Disturbed sleep is one of the commonest complaints with which patients present to doctors. In population surveys upwards of 15 per cent of the population report chronic insomnia. The frequency of such complaints rise steeply with age reaching a peak in the over 60's. The consumption of hypnotics has become commonplace and again this increases steeply with age. The problem of insomnia and in particular insomnia in the elderly, should therefore figure in the concerns of both general practitioners and psychiatrists. In the recent examinations for entry into the Royal College of Psychiatrists, I asked a number of candidates a few basic questions about sleep and its commoner disturbances. Such questions rarely elicited any information from the candidates and often