

appear to be dramatic, powerful and unsettling. It is from these that the patient is encouraged to go forward into the world with a new more daring, fresh and original way of being that will encourage him to fulfil his true potential, his true nature in the world and a more honest and sincere way of being. Presumably all this is ultimately designed to free him from constraints and inhibitions that have previously been restraining him and preventing his full expression. There is a certain Messianic zeal about the presentation and faith is certainly one of the keynotes in the book. The sceptical reader will come away wondering whether this is ultimately a beneficial and basically useful therapeutic approach. Whatever the book does not do, it provokes and draws attention to experiential and humanistic therapy and reminds the reader that beyond the dynamic and analytic other worlds are waiting.

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Therapies for Adolescents. By MICHAEL D. STEIN and J. KENT DAVIS. London: Sage Publications (Jossey Bass). 1982. Pp 393. £15.50.

This book, the authors feel, will serve a useful purpose in bringing a mass of literature to the practising clinician. There are seven sections covering emotional disorders, physical disorders, inter-personal skill deficits, anti-social behaviour, sexual problems, substance abuse and suicidal behaviour. The therapy orientation is behavioural: lip service only is paid to dynamic psychotherapy, entailing as it does more than "working through relationship difficulties between therapist and patient." Much of the therapy described in the book demands levels of skill which can only come from training and experience. There are several warnings not to use a particular treatment if not experienced. However the book is interesting and informative and covers a considerable range of disorder, and certainly it provides a stimulus to further reading.

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Study Guide and Self-Examination Review for Modern Synopsis of Comprehensive Textbook of Psychiatry/III. By HAROLD I. KAPLIN and BENJAMIN J. SADOCK. Baltimore, Maryland: Williams & Wilkins. 1983. Pp 383. £14.25.

This book of multiple choice questions is divided into 43 brief chapters, designed to cover basic science and clinical topics for American Board examinations. The answers are set out more fully than in most books

of this type and the reader is guided to appropriate pages in the parent textbook for further information.

Unfortunately, there are several reasons why this book is unsuitable for MRCPsych candidates. The questions follow various formats which are generally dissimilar from those used in the MRCPsych examination. This can only be confusing for candidates, who must be well rehearsed in answering the MRCPsych type of question. Part I candidates will find that too much emphasis has been given to personality theories to the detriment of coverage of other important areas, especially neuroanatomy and physiology.

Not surprisingly the text emphasises the use of the DSM-III classification system, mainly draws on the American literature and quotes American incidence and prevalence rates of illness. Reading the comprehensive answers drew my attention to the differences between American and British practice. In addition, I often felt uncomfortable with the jargon eg: "psychodiagnostician".

The idea of providing comprehensive answers to multiple choice questions and linking these to sections in a large textbook is laudable. However, I feel strongly that examination candidates need areas of dissonance reduced and not highlighted. I therefore cannot recommend this book to MRCPsych candidates.

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The Impaired Physician. Edited by STEPHEN C. SCHEIBER and BRIAN B. DOYLE. New York: Plenum. 1983. Pp 211. \$24.50.

This is a timely and useful book. Many psychiatrists will have had personal or professional contact with colleagues or the families of colleagues needing help, and will have encountered some of the difficulties described (denial of illness, unhelpful 'special' arrangements and so forth). If systematic attempts to identify and to provide help for doctors in distress are to be made, as is surely desirable, it is useful to look at the American experience.

The twelve contributors to this book survey, broadly, the nature and extent of the problems, groups particularly at risk (women physicians, psychiatrists) and personalities vulnerable to breakdown. The serious problems of drug dependency, alcoholism, depression and suicide are seen as the tip of an iceberg of distress much of which may be either untreated or treated late.

The various sections include one on possible preventive approaches at medical school. Educational

programmes, small groups for learning and support, and the usefulness or otherwise of attempts at screening are considered. Later sections consider the stresses and needs of newly qualified residents, doctors in practice, and their families. There is a section on the important issues of responsibility and confidentiality which arise in treatment situations, and the conflicts these may create for the psychiatrist.

The book covers areas which should interest not only those involved in the provision of occupational mental health services for medical students and doctors, but also those who are concerned with medical education, and those who may be involved in disciplinary procedures where health problems may be a factor.

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Handbook of Stress: Theoretical and Clinical Aspects.

Edited by LEO GOLDBERGER and SCHLOMO BREZNITZ. New York: Free Press. 1982. Pp 804. \$49.95.

This handbook is a vast undertaking: 47 chapters divided into seven major sections, reviewing almost every aspect of stress and its manifestations. Inevitably in an enterprise of this magnitude, the quality is uneven, and some of the chapters are poor and ill-informed. By and large however, it is an excellent volume containing some very interesting and useful material.

The first main section concerns basic psychological processes such as coping, conflict and decision making under stress. The section on basic biological processes summarises the physiological components of the stress response, and includes an intriguing chapter on brain asymmetry and emotion in relation to disease. Research paradigms and measurement issues are covered in the next part, with valuable discussions of coping processes by Moos and Billings, and life event inventories by Dohrenwend and others. In contrast with trends in Britain, many of the contributors favour questionnaire measures of life events despite their methodological limitations.

A major section is on common stressors, divided into environmental sources of stress such as occupation and the urban environment, and psychosocial stressors (marital conflict, shyness etc). Holt provides an outstanding review of occupational stress, with a clear delineation of independent variables (objective and subjective parameters of jobs) in relation to physiological and psychological responses.

Much of the evidence is inconclusive, with few studies establishing clear cause-effect relationships. The discussion of psychiatric and somatic conditions in

the next part is unfortunately rather brief, while the summary of treatments and supports is also far from comprehensive. Although the rôle of the liaison psychiatrist is briefly discussed by Leigh, the main emphasis is on behavioural and psychophysiological interventions. Finally, there is an interesting section on extreme stressors such as natural disasters, war and terrorism.

Few of the contributors manage convincingly to pin down the elusive concept of stress. In keeping with modern research trends, there is strong emphasis on cognitive appraisal, coping and social supports, rather than the simplistic stimulus-response formulations of Selye's early work. Some of the psychiatric contributors in particular appear to consider stress as synonymous with anxiety, while others regard anxiety as the response to stress. The handbook would have benefited from firmer editorial guidance on these questions of definition. Clinical aspects of the problem might also have received more space and stronger documentation. Nevertheless, considering that many volumes only a third of this size sell at a similar price, the handbook is very good value indeed. It is well presented with a clear and pleasing layout.

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Paediatric Neurology. 3rd edition. Edited by T. W. FARMER. Philadelphia: Harper & Row. 1983. Pp 768. £11.00.

There are three main groups of psychiatrists who may wish to have a textbook of paediatric neurology on their shelves. Child psychiatrists obviously have to be fully aware of this allied discipline: specialists in mental retardation probably see more paediatric neurology than practising neurologists; and students sitting for examinations who are required to know the latest "hard" bits of information about inherited diseases they may encounter—on their examination paper. None of these would wish to pay an extravagant price for the required reading, and all would like a comprehensive readable and informed text. This book should suit their purposes. It costs £11.00 for over 700 pages, a cost of about 1.4 pence a page. At last, value for money. If this publisher can produce such a book at this price, well type set and nicely finished, why cannot others!

There are 19 chapters, nine of which are of direct value to prospective readers from the above groups. Introductory chapters on neurological and neuroradiological examinations are clear and well illustrated. The sections on birth defects, developmental and inherited