

Dictionary of Medical Ethics. Edited by A. S. DUNCAN, G. R. DUNSTAN and R. B. WELBOURN. London: Darton Longman & Todd. 1977. Pp 336. £4.90.

A dictionary, of any type, is a book for reference rather than for steady reading. This poses a dilemma for the reviewer who balances the advantage of a speedily executed review against the slowness of seeing how the book helps in practice and reporting on its merits. The latter process has been adopted here and the consumer report is highly favourable. This dictionary is informative on the very wide range of ethical and para-ethical questions that arise in conversation with medical colleagues, nurses, social workers and, of course, clergy. It also provides clear facts and opinions for the curious layman, be he patient or potential patient.

The book cover cites 116 eminent contributors, and eminent is correct; their performance in print shows it. The items do not give answers in the slick sense. Part of each item describes the technicalities, from amniocentesis to ionizing radiation, from Buddhism to Islam. Part discusses what goes on in practice. The thread of ethics runs through every entry. The balance of ethical views is well kept by clear expression. There is sufficient argument advanced for the reader to make up his own mind. If he has already decided he will find that the contrary view is put with persuasion and a refreshing lack of dogmatism.

The standard medical problems are all there, abortion and euthanasia dealt with adequately in space and well in content. As interesting are items on consent, necessity and competence. It is difficult to find a relevant item that is missing; it seems all there, marriage counselling, mass medication and medical records.

Winston Churchill is said to have pronounced 'Swill claret but sip brandy'. This book is excellent brandy to be kept, cosseted, used and enjoyed.

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A Directory of Voluntary Counselling and Allied Services. Edited by JOHN HUMPHREYS. London: British Association for Counselling. 1978. Pp 117. £1.75.

This remains a valuable reference book for professional counsellors. Inevitably with a work of this kind there are shortcomings. It is surely too arbitrary to have approximately half the entries in Section I refer to the two major Marriage Guidance Councils when Samaritans and Alcoholics Anonymous are only included in Section II. Rather than

mentioning that a senior counsellor 'consults with her colleagues', the space could be better used to include addresses of these other major organizations.

Cross-referencing between the two sections is eccentric. Details of organizations mentioned more than once could be located in Section II rather than in the variety of places as at present.

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Creative Mental Health Services for the Elderly.

By RAYMOND GLASSCOTE, JON E. GUDEMAN and DONALD G. MILES. Washington D.C.: Joint Information Service of the American Psychiatric Association and the Mental Health Association. Pp 190. No price stated.

The aim of this survey is 'to be a guide and hopefully a stimulus to more creative and innovative applications of well known concepts in the field of mental health for the elderly'.

Part I is a brief and interesting overview of the American scene. People over 65 form a mere 10.5 per cent of the population (compared with 13 per cent here) but the problems resulting from the high morbidity for mental and physical illness are considerable. Since federal Medicaid has financed nursing homes for the elderly, State hospitals have been more and more loth to admit or to keep older patients and there has been a proliferation of nursing home care. This, as reported in a previous J.I.S. survey (rather regrettably titled *Old Folks at Homes*), is not as bad as had been expected, but has reduced the already scant involvement of psychiatrists who, according to Robert Butler (who coined the word 'ageism') 'avoid the elderly like the plague!'

The meat of the book is in Part II, which describes ten enterprising services, four in the U.S.A., two in Scandinavia, and four, gratifyingly, in England. The latter have in common a readiness to make bricks out of very little straw and a virtue of necessity by energetic home assessment, the fullest use of day hospitals and centres and community nursing and the conversion of generally rather seedy accommodation to short term assessment and treatment wards. The environment for long stay patients is the more depressing when compared with, say the splendid facilities at the Beckomberga Hospital in Stockholm, where, however, the community psychiatric services are relatively under-developed.

On the whole the quality and range of activities available to the elderly in the American and Scandinavian services described, as well as the standard of their accommodation, far exceed those to be found in