

Chapters 2-7 consider the status of the word, not so much as a source of object reference but as a vehicle of continually developing meaning, reflecting the growth of consciousness, linking rich systems of association, and serving to regulate behaviour. Chapter 8 considers the syntagmatic (predictive) and paradigmatic (associative) components of sentence structure. Chomsky's revolutionary contribution to linguistics is acknowledged but the notion of an innate language device is questioned. Luria stresses the "child's actual relationships with reality" and the need for the listener to extract the inner sense of an utterance.

Succeeding chapters treat briefly such topics as the communication of events and relationships, inner speech and speech utterance, writing and comprehension. In an unexpected chapter on language and thinking, he examines the role of syllogism and casts reasonable doubt on the rigid chronology of Piagetian developmental stages. The chapter on the cerebral organization of speech contains only a synopsis of material more expansively treated in "Traumatic Aphasia".

It is useful to be reminded that the understanding of communicative exchange requires more than linguistic analysis. The reflections on the nature of inner speech, inspired perhaps by his brilliant colleague Vygotsky, are most stimulating. And it is conceivable that the Jakobsonian dichotomy—syntagmatic and paradigmatic—has more explanatory force than we have bargained for. But the book falls between several stools: it is not technical or sophisticated enough for the linguist; it has not enough behavioural or neuroanatomical data for the neuropsychologist; and it does not touch the problems of psychiatry. However this in no way diminishes the importance of Luria's massive contribution to neuropsychology nor undervalues the gems of observation and intuition embedded in all his work. It is salutary to pay attention to attitudes and theoretical approaches that are unfashionable. Transformational grammar has (rightly) dominated the field for so long that its lesser neophytes may ignore the existence of alternative modes of thought. Perhaps on that account also a space should be found for the last posthumous collection of essays by a very distinguished neuroscientist.

FREDA NEWCOMBE, *External Scientific Staff of the Medical Research Council, The Radcliffe Infirmary, Oxford*

**Alcohol and the Family.** Edited by JIM ORFORD and JUDITH HARWIN. London: Croom Helm. 1982. Pp 295. £14.95.

Though described as one of a series on alcoholism published in association with the Alcohol Education

Centre, this book is not about alcoholism (however that is to be defined) but about alcohol and the family. In addition to the editors, twelve contributors from various disciplines in the UK and USA write about aspects of alcohol and the family in thirteen easily read chapters. They consider alcohol in history and in western literature; describe the factors affecting the use and abuse of alcohol in the family; review the impact on spouses and children of excessive use of alcohol and from a family perspective, consider prevention, management and the organization of services.

Within this family perspective and an associated (though far from uncritical) family systems approach, they show how the work of various disciplines can contribute to our thinking and action about alcohol related problems. Not least in importance, they draw attention to the limitations of our perspectives, policies and practices and indicate areas in which we need well organised and rigorous research.

The author and subject indices are good enough and the 21 pages of references offer a wide choice for further reading.

For the psychiatric trainee this book will not provide ready answers to M.R.C.Psych. questions. Family therapists looking for new techniques will not find the manual they might be seeking. Those needing ideas for a research project will find many but may be sobered by appreciating the difficulties involved.

These comments are not reservations on the book's usefulness. They are an invitation for it to be read, particularly as a preventive exercise for those who might have a tendency to be intoxicated into a new enthusiasm by the latest proof in theory or practice.

J. D. HALDANE, *Senior Lecturer and Director, Unit for Marital and Family Studies, University of Aberdeen.*

**Alcohol and Disease.** Edited by SHEILA SHERLOCK. Edinburgh: Churchill Livingstone. 1982. Pp 116. £9.50.

Examined from the standpoint of liaison psychiatry, this set of papers by experts in the field offers much to contemplate and learn. It is a first class statement of the hard scientific core of knowledge about the mechanisms, epidemiology and features of alcohol related disease so far as these are known. This alone warrants the attention of psychiatrists, for no amount of speculation can match one solid fact. Points of special interest to psychiatry include brief discussions of the aldehyde-amine reaction which may produce isoquinoline type opioid-like molecules in the brain, and which may turn out to be relevant to mechanisms of addiction, the effects of alcohol on fetal brain and

subsequent mental development, and the effects of malnutrition which accompanies alcoholism upon mental function.

So far so good, but there are some odd gaps in a compilation which promises in its prestigious introduction that there will be "something for everyone", and includes psychiatrists among that category. For example, in an otherwise highly informative chapter on the economic aspects, there is astonishingly little information about the costs of treatment for alcoholics; perhaps it is inestimable. Psychiatry does not appear as such in the index, though it is clear from the contents list that the last five chapters are about the brain, and even the mind. But the chapter on liver disease has but one brief allusion to neuropsychiatric disturbances, and it is really left to one splendidly clear review chapter by Max Glatt to reveal the present position of the tangled skein of neuropsychiatric therapies for alcohol related disease. He is not very encouraging, but gives an invaluable list of references. What is missing is a critical, cautious and factual statement of the place of all the resources now open to physicians and psychiatrists working together to alleviate an appalling social scourge.

In summary, look here for some, if not most, of the facts, but not to discover effective management ideas derived from them.

DUNCAN VERE, *Professor, Department of Therapeutics, The London Hospital Medical College*

**Social Skills Training Manual: Assessment, Programme Design and Management of Training.** By JILL WILKINSON and SANDRA CANTER. Chichester: John Wiley. 1982. Pp 148. £14.95, £5.95 (paperback).

As its title suggests, this book sets out to describe ways in which social skills training might be carried out in practice. The authors do not discuss the theoretical rationale underlying their approach, nor do they place this treatment methodology within the broader context of behavioural psychotherapy. This is unfortunate in that the impression they give is that social skills training is a panacea for everyone who has problems in the area of interpersonal relationships. However, the relatively poor results obtained from properly controlled outcome studies indicate that this is not the case. In fact, the most optimistic conclusion that can be drawn from the literature is that social skills training can be an important component of individualized behavioural programmes when carried out with carefully selected cases. By not emphasizing sufficiently the importance of a full behavioural analysis or suggesting how social skills training can be integrated with, for example, cognitive interventions, the authors

have presented a deceptively simple view of the field. Consequently, the unsophisticated reader who attempts to follow this "cook-book" approach with psychiatric patients is likely to become rapidly disillusioned with behavioural methods of intervention.

This book will be of most value to health care workers who already have a sound grasp of behavioural psychotherapy but who are inexperienced at running groups. The authors describe a wide range of exercises, designed to increase cohesiveness and reduce anxiety, which do not often appear in the academic literature. Thus, although one must have reservations about its use as an introduction to the field, this book contains material which will be of interest to clinicians who have the ability to conceptualize interpersonal problems in a behavioural framework, but who occasionally run short of practical ideas when working in the group setting.

DOUGAL MACKAY, *District Psychologist, Bristol and Weston Health District, Barrow Hospital*

**The Claybury Selection Battery Manual.** T. M. CAINE, D. J. SMAIL, O. B. A. WIJESINGHE, and D. A. WINTER. Windsor: NFER-Nelson. 1982. £4.65

**The Bexley Maudsley Automated Psychological Screening and Bexley Maudsley Category Sorting Manual.** W. ACKER, and C. ACKER. Windsor: NFER-Nelson. 1982. No price stated.

The Claybury battery consists of three short questionnaires—measuring direction of interest (extroversion/introversion), treatment expectancy and staff attitudes to treatment. These scales should only be used for research and that with the utmost caution. Little evidence for validity is presented and group scores are based on very small numbers; 11 secretaries, 14 salesmen, for example. Scale construction is only briefly described but appears to be based on unrotated principal component analysis of less than 200 subjects with no cross-validation. These rates are psychometrically weak.

The Bexley tests are notable for being presented on a micro-computer—a PET. However clever this modern presentation is the old fashioned virtues of psychometric practice, well sampled evidence of validity and reliability are lacking. Validity is attested by comparisons of criterion groups but numbers are small and relationships with a variety of other tests are not given. Without adequate psychometric data, this test cannot be recommended other than for exploratory purposes.

PAUL KLINE, *Reader in Psychometrics, University of Exeter*