

**Clinical Geropsychiatry.** 2nd edition. By ADRIAN VERWOEDT. Easton, Maryland: Williams & Wilkins. 1981. Pp 371. \$44.50.

British readers will find the style and terminology of this book very familiar, and therefore not experience the language problems sometimes encountered in American texts. Unfortunately this advantage is partly off-set by the layout which tends to fragment the topics, e.g. the initial chapter on affective disorders is separated by six other chapters from the one dealing with the management of affective disorders. A further criticism is that drug therapy in schizophrenia and dementia share a chapter in a way which does not bring out the critical distinction between the use of drugs in the respective conditions.

Such major topics as affective illness and dementia are not highlighted and there is disappointingly little in the book about epidemiology of mental illness in the elderly. On the other hand a lot of space is devoted to psychotherapy and there are numerous illustrations of the dynamics of problems. Unfortunately, many of these are drawn from the age groups 40 to 60 and are therefore a little inappropriate bearing in mind the title of the book.

The book is wide-ranging and essentially orthodox. Its strength may lie in the fact that its orientation is essentially dynamic and contrasts with that of traditional British texts. It is rich in references, mostly from the American literature. Some of these unfortunately may not be easily followed up by readers. There is also an interesting chapter on medico-legal aspects of the elderly in Northern Carolina and it is useful to compare their approaches with our own.

In a field not noted for the extent of its literature this is a welcome addition. Trainees will, however, find it of less value than more concise works, e.g. *Psychogeriatrics* by Brice Pitt, as an introduction to the problems of the elderly.

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**Bereavement Visiting.** Edited by GEOFFREY DYNE. London: King Edward's Hospital Fund for London. 1981. Pp 68. £2.85.

In his preface to this booklet, Dr Colin Murray Parkes points out that a study of the service given to relatives of patients who have died at St Christopher's Hospice was the first to demonstrate that good results can be obtained not only by professional counsellors, but also by carefully selected, trained, and supported volunteers. The writers describe how the service began and how it is organized. The importance of preparing and supporting the visitors is emphasised, and case studies are used to illustrate both the stresses

and the rewards of the work. Forms for referral to the service and for visitors notes are included and could be used as models.

The booklet is well produced and the material is handled at a level which would be helpful to prospective visitors. Those who contemplate setting up such a service will need more information on the selection and training of volunteers than can be provided here, but they will nevertheless find it excellent introductory reading.

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**Hypnosis and Relaxation: Modern Verification of an Old Equation.** By WILLIAM E. EDMONSTON JR. Chichester, W. Sussex: John Wiley. 1981. Pp 255. £13.95.

This is an important work which may come to play an important part in the history of the study of hypnosis. The author commences with a fascinating account of the historical origins of hypnosis, proceeds through a scholarly review of many investigations into its nature and concludes by the proposal of a term to replace it: anesis, from the Greek, to let go, to relax. He attempts to cut a way through the cluttered theoretical frameworks surrounding the concept of hypnosis and, in his own words, the purpose of the monograph is "an attempt to filter out relaxation as the essence of hypnosis as we have come to know it historically, clinically and experimentally".

The term hypnosis is, of course, overlain with a welter of obscurantist ideas, irrational beliefs and magical longings and fears that many who use techniques integral to the induction of hypnosis in their clinical practice have already foregone the use of the older term and adopted the word relaxation basing their substitution on the precedents of Jacobson's Relaxation Training and Benson's Relaxation Response. However the word relaxation is itself liable to misunderstanding having connotations inseparable from that of dozing or the approach to slumber and quite different from the concentrative mental exercise which Benson maintains is the essence of the Relaxation Response.

The author's involvement with the theme of relaxation in relation to hypnosis has led him to ignore certain phenomena which may be induced in the trance state such as anaesthesia and to this extent he falls into the same trap as did Barber and others who dismissed the concept of an altered state of consciousness and developed the hypothesis which equated hypnosis with role playing. Yet the induction under hypnosis of anaesthesia sufficient for painless