

The greater part of the book is concerned with theory and technique in the dynamic therapies and covers the spectrum from psychoanalysis to behaviour therapy and hypnosis. There is a long chapter on the management of 'special conditions', which includes schizophrenia, depression, alcoholism, phobias, anxiety reactions, the chronically mentally ill and personality disorders, and here he emphasises the importance of a non-dogmatic approach and a clinically sensitive use of both physical and dynamic treatments.

I enjoyed this book and I think it would be a pleasant if non-essential addition to the departmental library. The general psychiatrist will find in it a dynamic approach which respects organic treatments; the non-medical psychotherapist should find an invaluable guide to the boundaries between medical and dynamic methods; the psychotherapist might learn a lot about answering questions with clarity and good sense.

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**The Psychotherapeutic Conspiracy.** By ROBERT LANGS. New York: Jason Aronson. 1982. Pp 338. \$34.50.

Alarmed by the vast growth and bewildering array of the 'psychotherapies', Langs has written a valuable polemical account of their vicissitudes. Drawing an object-relations theory he takes a detailed look at unconscious needs of patients and therapists, and the emotional disturbance they hope to solve.

Patients often have a need to find and seemingly suffer at the hands of a psychologically impoverished therapist in order to appease an unconscious sense of guilt and masochistic drive. Therapists often project unconscious areas of themselves into the patient, ridding their pathology into the designated ill person.

Staying at the patient's surface tends to be easier, protective, attractively simple and far less threatening than attempting to delve into the patient-therapist interaction where Langs sees the truth. The naive view that the unconscious speaks directly, together with an apparent understanding of manifest content is none other than a seduction between therapist and patient.

He classifies behavioural, cognitive, primal scream, EST etc. as lie therapies in which patient and therapist collude to avoid seeking out psychological truths. This is achieved by avoiding focussing on Langs' bipersonal field, and the 'here and now' of the transference-countertransference, which he feels can be classified and analysed in its most minute detail, to reveal the truth of the object-relationships.

Langs instructively looks into Breuer's patient Anna

O and Freud's early *Studies in Hysteria*, trying to analyse the various mésalliances between patient and therapist. He attempts to link the various levels of misunderstanding within these treatments with different schools of psychotherapy today.

This good book will be at best scorned and misunderstood and, at worst, unread by the large number of people who are called therapists.

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**Psychotherapy Research: Methodological and Efficacy Issues.** American Psychiatric Association Commission on Psychiatric Therapies, Washington D.C. 1982. Pp 261. \$15.00.

The American Psychiatric Association has undertaken a major assignment—no less than the compilation of a psychiatric treatment manual. This is planned to serve as a guide to the practising clinician. In the light of the considerable differences psychiatrists exhibit in their contemporary diagnostic and therapeutic approaches, one does wonder whether psychiatry is ready to receive such a manual. Only time will tell. In the meanwhile, we can note the results of the first efforts by the APA, a volume prepared by a Commission on the Psychotherapies, composed of the many distinguished names in American psychiatry and under the chairmanship of the seemingly indefatigable, Toksoz Karasu.

Perhaps anticipating critical reaction to the inclusion of certain psychological therapies in the definitive manual, the Commission has grappled head-on with the question of whether psychotherapy works or not. The conclusion arrived at is that: ". . . . psychotherapy appears efficacious more often than not, but . . . . the conditions under which it works are not well understood". Another important conclusion the Commission reaches is that ". . . . most research data available do not adequately reflect the work of the clinicians as actually practiced. It is especially true that long-term psychotherapy and psychoanalysis have not been adequately evaluated". The reader is urged—quite rightly in my view—to bear in mind the "large body of clinical experience and knowledge, accumulated by practitioners over many decades", and to consider this clinical lore in any discussion about efficacy.

These conclusions are reached following a thorough, but at the same time succinct, examination of several methodological topics, including the nature of control groups, the selection and assignment of patients in clinical trials, research designs, and measurement of outcome. There are useful chapters, as well, on the