

Book Reviews

Editor: Sidney Crown

The Heredity of Behavior Disorders in Adults and Children. By S. G. VANDENBURG, S. M. SINGER and D. L. PAULS. New York: Plenum. 1986. Pp 301. \$35.00.

Reliable psychiatric diagnoses, new mathematical models and recombinant DNA technology have followed hard upon one another in the past decade to make psychiatric genetics not only respectable, but suddenly big business. Huntington's disease and narcolepsy have been tracked down on the genome and, even as this review is written, reports are emerging of the genes for manic depressive psychosis on chromosome 11, Tourette syndrome on chromosome 18 and Alzheimer's disease on chromosome 21. No-one could dispute the need for a contemporary textbook on psychiatric genetics.

The aims of this jointly-authored book are clearly set out after a foreword by Dr Elliott Gershon: these are to review the evidence for the importance of genetic factors in mental disorders, to show how this can further our understanding of their epidemiology, and at the same time to emphasise that genetic influences do not spell immutability. The text is written consistently well. However, in Chapter 2 ('The Diagnosis of Psychopathology') a small alarm bell sounds: they are evidently not entirely comfortable with the medical model. Such ambivalence is no bad thing in the right context, but it puts the authors of a book on genetics in a curious position. Take the title, for instance: what is meant by "behaviour disorders"? It is a term the authors choose not to define, despite their preoccupation (often justified) with operational definitions throughout the text. With a single exception (epilepsy), all the disorders they consider are better known as psychiatric disorders.

Chapter 3 reviews genetic causes of mental retardation and is used to introduce concepts in cellular genetics, such as mitosis and mosaicism. Chapter 4 is potentially the most important, and deals with the methodology of psychiatric genetics. The advantages and limitations of twin, family, and adoption studies are discussed capably, as is the importance of rigorously defining phenotypes and guarding against aetiological heterogeneity. The concepts of linkage and recombination and the use of restriction fragment length polymorphisms to detect linkage are explained clearly. Multifactorial models are rightly explained at length. This comprehensive section does miss one or two basic building blocks, nonetheless. The definition of fundamental terms of measurement in population genetics is, surely, mandatory in a text like this. Their inclusion might also have served to tighten up the authors' own

use of these terms, which is occasionally lax (what are "lifetime rate" and "incidence of risk"?)

The genetics of epilepsy are tackled next. Here, the authors seem to be out of their depth. We read of what "medical experts believe", and are given unabashed citations from textbooks of general neurology. Chapter 6, on schizophrenia, sees the authors back on dry land, but with legs still shaky. A workmanlike account of genetic studies leaves largely unexplored the potential significance of "schizotypal" (*sic*) personality and schizophrenia spectrum disorder. In the authors' own words: "For a thorough review of the evidence for a genetic basis for schizophrenia, see Gottesman and Shields (1982)".

However, there follow good, clearly argued chapters on alcoholism, criminality, and a variety of childhood disorders. Those concerning specific reading disabilities, stuttering, and Tourette's syndrome are particularly good, reflecting the authors' own interests. Elsewhere there are sections on affective disorders and the neuroses. Alzheimer's disease warrants two poorly-informed pages.

In summary, this book is a brave attempt to hit a fast-moving target. There are few references more recent than 1983. Joint authorship ensures a uniformly readable style, but betrays some gaps in the authors' collective expertise. Might a book like this benefit from discussion of related issues such as genetic counselling and, since the orientation is towards behaviour disorders, consideration of the genetics of some aspects of normal behaviour, such as personality? University libraries would reasonably be expected to own a copy, but interested individuals might best be advised to wait; with a growth area like genetics, it is a fairly safe bet that there will soon be more than one book to choose from.

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The Nazi Doctors: A Study of Psychology of Evil.

By ROBERT JAY LIFTON. London: MacMillan. 1986. Pp 561. £17.50.

Robert Lifton is justifiably renowned for the scholarly attention and ethical commitment he has given to the subject of man's confrontation with the extremes of human condition. His work on the Hiroshima survivor, the Vietnam war veteran, and the threat of massive genocide through the deployment of the nuclear bomb testify to his success. In turning to the Holocaust, and particularly to the contribution of the Nazi physician therein, Lifton has tackled, arguably, an episode unparalleled in history – the vigorous attempt to

exterminate an entire people, based on racial ideology. Although we are provoked to anguish over the question of how a previously civilised state could resort to such barbarity, Lifton's chief purpose is to shed light on what motivated the Nazi physician to forgo his ethical and healing role and assume the role of killer.

Two principal themes emerge with brilliant clarity. The first is uncomfortably linked to the psychiatric profession. The eugenics movement in the early 20th century found an eager audience in Germany, and meshed neatly with Hitler's racial doctrines. It was the likes of the psychiatrist Alfred Hoche (in an influential book co-authored with the jurist Karl Binding) that provided a 'scientific' foundation upon which the Nazi regime could promulgate, as early as July 1933, a law permitting the sterilisation of the chronically mentally ill and the intellectually retarded.

'Mercy' killing of these 'lives unworthy of life' was the logical next step. Soon after the start of the war the gas chamber was installed in a number of psychiatric hospitals, and the psychiatrist came to assume the role of executioner. Over the next two years, he was to acquire an expertise and proficiency that resulted in about a quarter of a million deaths. Thus, when the 'Final Solution' was devised in 1942, the machinery of genocide was ready, and the physician was prepared for his task of selection on the ramps at Auschwitz and for the supervision of the grisly procedure in the gas chamber.

The medical profession may have unwittingly provided a scientifically plausible rationale for the decision to exterminate the Jewish 'sub-human' race, but how could physicians like Josef Mengele and Eduard Wirth (the chief doctor at Auschwitz) have allowed themselves to be recruited to the ranks of killer? Lifton offers us an explanation by resorting to the phenomenon of 'doubling': the deployment of a second 'Auschwitz' self – a complement to the previous self of ethical doctor, husband, and father. Since the two, he argues, were totally autonomous, all requirements for moral responsibility could be transferred to the Auschwitz self and in turn to the pervasive Nazi ethos with which that self was fully identified.

Lifton's propositions help to illuminate what seems to be inherently incomprehensible. If he is unable to offer a totally convincing explanation, then he is in good company; Hannah Arendt, Mary Midgley (in her excellent essay on Wickedness), Erich Fromm and others have all wrestled with the dimension of evil in man's behaviour, and only succeeded partially. Lifton's book deserves close scrutiny by psychiatrists. They will gain in at least two significant ways: by acquiring a greater understanding of the nature of human destructiveness, and by realising how vulnerable their profession is to gross unethical pursuits.

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Drugs, Ageing and Society: Social and Pharmacological Perspectives. By BRUCE BURNS and CHRIS PHILLIPSON. Beckenham: Croom Helm. 1986. Pp 180. £19.95.

On opening this book, one is surprised that in a stiff-backed volume of relatively high cost, poor quality paper and typewriter setting have been used. The title is puzzling and somewhat unfortunate: it could imply that the authors are examining drug addiction in the elderly, rather than medication. They claim to "critically review the use and marketing" of medication used in the elderly. This aim tends to become obscured by the presentation of much data, which at times is repetitive. It is unclear for whom this is written. The authors suggest it could interest geriatricians, sociologists, psychiatrists, and pharmacists. Is it really then necessary to define dementia, postural hypotension, or beta blockers, to name but a few?

Numerous references are quoted. These range from respected authors to the *Mail on Sunday* and *Everywoman's Doctors Book of 1934*. It is difficult to take such information seriously, and this tends to detract from the important questions addressed. The chapters of special interest to psychiatrists include critical comment on the high use of psychotropic medication in the elderly. However, this is not balanced by a discussion of the high incidence of psychiatric illness in old people. Also, "unacceptable behaviour" in the elderly in elderly people's homes *does* need to be controlled – such control is by no means necessarily a "punitive" measure.

Sadly, despite the amount of sound information presented in this book few conclusions are reached, and I remain as unclear about the inter-relationships between drugs, ageing, and society as I was before reading it.

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Grieving: A Handbook for Those Who Care. By RUTH BRIGHT. Missouri: MMB Music Inc. 1986. Pp 229. \$19.50.

This book, written by a music therapist of 25 year's clinical experience, makes several claims, notably that (a) it is suitable for a wide readership, and (b) it provides a practical approach. The first claim is justified: practitioners and laymen can learn from this book, as can the bereaved themselves. The researcher should also find it inspiring, because (by her own admission) the author is essentially a pragmatist and many of her ideas require more formal scrutiny and testing. The rigorously-minded academic would be disappointed, therefore, if he were to expect this book to be a source of carefully-researched ideas and principles.

The second claim is also appropriate, because the author describes in some detail how she puts her ideas into practice. More specifically, for the uninitiated, there is a chapter on music therapy, and there are