

DOCTORS, DILEMMAS, DECISIONS

Ben Essex British Medical Journal Publishing Group, London (1994) 301 pages. Price £22.95

This book is aimed at medical students and their teachers, trainees and their trainers, practice managers, purchasers of services and anyone who is interested in professional judgement. The author feels the need to say that it is not a cookbook and attempts to analyse the judgement that lies behind decision making in general practice. It is based on research that continued for over 10 years and that analysed thousands of cases. The analysis produced over 800 rules of thumb which, in the end, the author says are based on pragmatism rather than evidence. The book is structured so that it looks at specific decisions, people with special problems and the organization of general practice. In addition, it examines factors with an ethical and social dimension. These areas are illustrated by over 200 cases from the community.

The cases are interesting and have several layers of complexity. They will be a godsend to any teacher struggling to find a case for a seminar or tutorial; because of their complexity they can probably be used by teachers of medical students as well as by teachers of postgraduate students. It is worth buying the book just to have access to the cases. However, I found the intrusion of the 800 rules a little distracting and indeed contrived. This is probably one of those books that is going to do well in an interactive electronic medium.

Judgement is an area that managers rarely talk about as it needs a combination of experience, reasoning and imagination. Ben Essex is to be applauded for using his experience in such a reflective manner and for the imagination with which the material is presented.

Tom O'Dowd

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COLLABORATIVE CARE: INTERPROFESSIONAL, INTERAGENCY AND INTERPERSONAL

Sally Hornby

Blackwell Scientific Publications, Oxford (1993)

188 pages. Price £14.99

Working together is difficult. The care of patients often involves help from agencies outwith medicine. The impact on patients of distress, social inadequacies, mental illness or poverty exceeds the scope of any single discipline, no matter how holistic, so we have to work across professional and other boundaries to enable our patients to benefit from whatever help is available. However, many doctors find that joining a multidisciplinary case con-

ference can be time consuming and frustrating; the assumptions of some workers from other disciplines imply perspectives, the relevance of which is not always obvious to a medical professional.

Sally Hornby is a social worker and psychotherapist. She faces the challenges of collaborative care by acknowledging and then anatomizing the difficulties. Hornby starts by defining a new vocabulary — one that is equally unfamiliar to everyone. For example, as neither 'patient' nor 'client' is universally acceptable, she proposes 'user'. She describes the four most common hindrances to collaboration: inadequate understanding of the subtle nature of helping relationships; a helping approach that is inadequate to the complex needs of the users; a separatist attitude to helping; and maladaptive methods for coping with role insecurity. A series of case studies illustrates how misunderstandings and defensive ill-will can occur and each situation is carefully dissected.

I found the author's obsession with jargon quite distracting and in particular the use of unfamiliar abbreviations. But the subject of how to work together is critically important and the examples offered here are well chosen. It is worth struggling with the obscurities in order to follow Hornby's careful analysis.

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DEPRESSIVE ILLNESS: A CRITICAL REVIEW OF CURRENT PRACTICE AND THE WAY AHEAD

Consensus statement

Clinical Resource and Audit Group (Chairman Christopher Freeman) Scottish Office, Edinburgh (1993) 106 pages.

This publication comes from the Clinical Resource and Audit Group of the Scottish Office, which is chaired by the Chief Medical Officer in Scotland, Professor Robert Kendell, who writes the foreword.

There is general agreement that depression is one of the most important and common diseases affecting people in the community, and publication of this booklet is therefore timely. Following the launch of the defeat depression campaign organized by the Royal College of Psychiatrists and Royal College of General Practitioners, it reports a consensus conference held in Glasgow under the auspices of the Clinical Resource and Audit Group in June 1993.

There is much that is excellent about this publication. It demonstrates the true partnership between psychiatrists and general practitioners much more effectively than the defeat depression campaign has achieved, and of the six chapters in this