

is about the setting in which psychotherapy is done. One setting is general practice. General practitioners should aim to develop psychotherapeutic techniques appropriate to this setting rather than import wholesale the techniques proper to the psychiatrist's setting. They can obtain valid results. Psychiatrists can only teach general practitioners to a limited extent and as far as there is an overlap between their settings and tasks.

The second part is devoted to a discussion of certain basic problems common to psychiatrist and general practitioner, e.g., examination by the patient; the need for the doctor to be aware of the influence of his own emotions.

The third part is concerned with the need in psychological medicine for the treatment to make sense both to patient and doctor. To this end the doctor must complete a two-stage task; first he must come to understand the patient and then he must help the patient to understand himself.

The fourth part is devoted to a study of the psychiatric interview.

Case-histories play an important part in the argument. Those chosen from general practice seem more intricate than the majority which this reviewer sees in the same setting. They are not always easy to follow and this may discourage some interested readers.

Dr Balint has far more belief in the value of the general practitioner than have most consultants and his belief is based on 10 years' close experience. This book is an important contribution to our work and deserves, like its predecessor, to be very widely read. Readers of this Journal will find it both stimulating and encouraging.

Teaching of Psychiatry and Mental Health. A WORLD HEALTH ORGANISATION. Geneva. 1961. Pp. vii + 186. Price 10s.

The papers in this book were presented to the World Health Organisation's Expert Committee on Mental Health, which met in Geneva in May 1960 to discuss the undergraduate teaching of psychiatry and mental health promotion.

It has always been, and always will be, the task of the general practitioner to integrate all knowledge available in the service of his patient, and it is interesting to find from the paper prepared by the mental health unit of the W.H.O. that almost everywhere there is a call for the teaching of psychiatry and psychotherapy appropriate for the general practitioner.

An outstanding contribution on how to answer this call comes

from the pen of Dr Matte-Blanco of Chile, who recognizes the basic need for the doctor to understand himself before attempting to understand his patient, and outlines the methods he has evolved in the University of Chile at Santiago. Dr Matte-Blanco's analytical approach to the problem is more in line with Dr Balint's teaching in this country than with that outlined in another paper by Dr Rodgers of Glasgow, who wisely stresses the fact that students tend to model themselves on the example set by their hospital chiefs.

It is fascinating to learn from Dr Kerbikov's contribution from the U.S.S.R. that Chekhov, doctor as well as writer, once said to a professor "If I were a lecturer I would try to draw my audience as deeply as possible into study of the subjective feelings of the patient, and I think this would really be of use to the students".

Altogether very good value for ten shillings.

An Introduction to Electroencephalography. R. R. HUGHES, M.D.,
M.R.C.P. Bristol. John Wright and Sons. Pp. 126. Price 30s.

Electroencephalography is not a technique likely to be used in general practice, but as machines become available up and down the country in special centres, more and more of our patients are likely to be investigated by this means and it is as well to know a bit about the subject. This short volume which has no less than 76 diagrams and illustrations is written in a language any doctor can follow, no small achievement for such a highly technical matter. The author clearly describes the normal findings and physiological modifications. The main use for our patients from general practice is to confirm epileptic seizures: their nature and if possible any localization. This is carefully explained and illustrated. Head injuries are commonplace in our work and sometimes we need to reassure our patients or their parents that no serious damage has occurred and to exclude the presence of epileptogenic foci. EEG findings taken in conjunction with the clinical findings can be of the greatest assistance in this matter. The same applies to the localization of tumours and cerebral abscesses which give rise to electrically silent areas, the changes being most marked in a rapidly growing tumour. Apart from epilepsy the readings are not a great help in psychiatric conditions, but they can be most useful in certain endocrine upsets especially those of the pituitary gland. This is not a book likely to be popular with family doctors but its 126 pages brings the reader completely up to date in this comparatively new technique.