

Depth psychology, a critical history. DIETER WYSS. London. George Allen and Unwin Limited. 1966. Pp. 568. Price 52s.

This long and comprehensive volume is divided into three parts. The first third of the book is devoted to Freud and his work, and how his theories of psycho-analysis evolved over the years. The translation reads well and some passages such as Freud's description of transference are excellent. The author then goes on to describe the contributions of Freud's followers, some of whom like Adler broke away from the master. German, British and American schools all have a place. Part II deals with the work of C. G. Jung, and other less well-known European workers. Part III deals with various fundamental problems of psycho-analysis, Freud's claim to scientific validity and so on. This is a book essentially for the student of psycho-analysis, and it could well whet his appetite for further reading, and here he will find a guide to all the most relevant literature. It will not appeal to many general practitioners.

Alcoholism. NEIL KESSEL, M.D., and HENRY WALTON, M.D. Edited by Professor G. M. Carstairs. Harmondsworth, Middlesex. Penguin Books Ltd. 1965. Pp. 192. Price 4s.

This is a first-class handbook for the doctor or layman who wants to have a terrible problem explained clearly, simply and with deep sympathetic understanding. Both the authors have studied the problem widely and in depth for many years and published their findings elsewhere.

Every general practitioner, and most doctors in hospital have been confronted with the problem patient. There has been and is the conflict of trying to deal with the clinical aspect only, the injury sustained under the influence or the over-dosage—the degradation and mess of an individual. This is where the average general practitioner either ignores the problem or removes the patient from his list. Or, the hospital doctor (quite often a senior consultant) refuses the use of a bed (even in the private wing). The general practitioner who tries to obtain help for the patient either by admission to a special unit or an outpatient interview is often frustrated by refusal or is given an appointment three months later. The authors say (page 122) . . . “This poses a demand which neither his medical school training nor his professional experience has equipped him to meet . . .” But, saying “. . . that they should know what treatment facilities are available in their own area and if necessary be prepared to press for better ones . . .” is not really providing an answer. Press whom for better services?

Alcoholism is a disease, it is such an enormous socio-economic, psychological, social, clinical problem that it requires the help of every doctor and every known social agency and service. There is a Japanese proverb which says . . . “First the man takes a drink, then the drink takes a drink, the drink takes a man . . .” The authors conclude by saying, “helping the vulnerable person by seeing that proper treatment is available and getting him to accept it, is a civilized and a merciful act, open to us all . . .”.

This little handbook is highly recommended, and at the price of a pot of tea or less than a double scotch and soda is within the reach of all.