

disseminated sclerosis discussed. Of course no one suggests that hypnosis can affect the organic progress of this demoralizing condition, but we are treating the patient, not the disease, and we should not neglect the enormous subjective help that we can give him by care of his psychological state.

The general practitioner has a knowledge of the patient's background and a continuity of responsibility that gives him an unrivalled opportunity in this field. The outstanding need of the general practitioner is for weapons with which he can explore and guide the psychological mechanisms of his patients. Here is a remarkable technique crying out for investigation, which requires no team, no laboratory, and no apparatus beyond a chair and one's voice.

The factor most likely to be lacking is time, but Drs Ambrose and Newbold can at least show us something of the possibilities, and limitations, of hypnosis.

The Organic Psychoses. JOHN G. DEWAN, M.A., M.D., PH.D.(CANTAB.), D.P.M.(ENG.), F.R.C.P.(C), F.A.C.P., F.A.P.A. and WILLIAM B. SPAULDING, M.D., F.R.C.P.(C). Toronto University Press: Oxford University Press, London, 1959. Pp. 166. Price 48s. 0d.

This is a useful and interesting little book which covers the subject of organic psychoses with commendable brevity in its 170 pages. A very generous list of references will satisfy those who wish to study the subject more deeply. When senile dementia and other chronic degenerative psychoses present, one is apt to assume the attitude that the disease must run its course and nothing radical can be done to stem the downward path. This book with its excellent case histories should make one think again. Things are not always what they seem to be and the apparently hopeless case can occasionally be shown to have some treatable organic basis. Even if the apparent dement turns out to be an inoperable cerebral tumour, there is some satisfaction in making a more accurate and precise diagnosis.

The reviewer did not like the style of the book. Had he not been reviewing it, he would never have reached part three where the volume came to life. In his opinion this section made the book. The introduction of a few illustrative cases would have made the first part much more readable. There were a few omissions from the long lists of diseases and syndromes. More might have been made of vascular insufficiency in the aged with the "drop syndrome" and the flashing lights of basilar insufficiency. No mention is made of the stupor which can occur as a result of a mid-brain lesion. One final point. There should always be some explanation even of the most obvious abbreviation, especially if the book is to be sold abroad. The meaning of H.M.C. on page 101 is still a complete mystery to the reviewer!