

any mood swing, or deterioration in the patient's psychotic state. Provided this simple precaution is adhered to rigidly, there is less need for apprehension in the case of the patient discharged on fluphenazine enanthate or decanoate, than for the patient discharged on oral phenothiazines. It would be interesting to know what personal experience Dr West has had of this drug and what prompted her letter.

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Book reviews

Ecology of the cancer patient. JOHN E. HEALEY, JR., M.D. Washington D.C., U.S.A. Interdisciplinary Communication Associates, Inc., 1353 28th Street, N.W., Washington, D.C. 2007. 1970. Pp. vii+184. Price \$2.00.

This book is a very able condensation by Dr John E. Healey of three conference discussions on the problem of rehabilitation of cancer patients. The first was in February 1967 on 'The head and neck'; the second in April 1968 on 'The breast, extremities and nervous system'; and the third in April 1969 on 'The pelvic area'. The theme of the discussions was that the cancer patient has as great an expectation of life as the sufferer from stroke or a cardiac ailment, yet there remains a defeatist attitude on the part of both medical and lay persons towards cancer. This is in spite of a progressive improvement in the results of treatment.

Surgery and radiology may leave the patient with visible results, as in head and neck surgery; with alteration in function as in colostomy and laryngectomy; with alteration in sexual attitudes after removal of ovaries and testes; with locomotor problems after brain and spine surgery or limb amputation. Each of these will in addition have its emotional and psychiatric effect and may require support from doctors, ancillary staff and family.

It was argued that the most efficient way to treat cancer patients was to bring them to special centres for this purpose where they would be looked after by the requisite members of a team consisting of surgeon, radiation therapist, prosthodontist and ten ancillary helpers, from nurse to vocational counsellor, from clergyman to psychiatrist. As things are, however, apart from a few well staffed special centres there is little co-ordination and much ignorance of what goes on. There is little statistical knowledge available. For example, the incidence of head and neck cancer is unknown, as are survival rates after various surgical and radiological treatments.

The problem of who should initiate rehabilitation treatment provoked controversy. Generally the surgeons thought that they should do so, as they were in intimate contact with the patient and

thus would know what was necessary. The psychiatrists and social workers on the other hand thought that surgeons were too busy and too often accompanied by a retinue of white coats to be able to establish rapport with him. Rehabilitation they argued should start before therapy to prepare the patient for what was likely to follow and should end only after the patient was back to a working day within his capacity, where he would be accepted by his family in spite of whatever disability he was left with.

From the point of view of medicine in this country it was surprising to find that there was no general practitioner at any of the conferences, little mention at any time of his existence, and certainly no thought of him as initiator, planner or helper in rehabilitation.

The book is well worth reading. The condensation is so well done that it is not only readable, but gives the cut and thrust and parry of argument. It rightly gives an optimistic slant to the after-treatment of cancer patients and underlines the urgent necessity for a plan to deal with it and the co-ordination and training of personnel. Our health service experts would do well to read it.

A dictionary of symptoms. J. GOMEZ. London. Paladin. 1970. Pp. 490. Price 12s. 0d. (60p).

This book is not intended for doctors. It is aimed at the intelligent family and compares well with its many competitors. It is well balanced and in its emphasis on probability diagnosis of symptoms like fatigue and headache it compares favourably with many standard medical texts. It does appear to have one consistent weakness; it is too brief on fertility control. The section on oral contraceptives and sterilization are disproportionately brief and male sterilization and therapeutic termination of pregnancy are not indexed and do not appear to have been mentioned at all. The range of normality is always difficult to define, but many family doctors today would not accept the statement on enuresis 'wet nights up to five-and-a-half years are well within normal limits'. Taken over all this is a most useful book and could well be recommended to patients seeking advice about one to buy on this subject.