

with the police and characteristics of areas where immigrants have congregated, have direct relevance to medical practice, as have discussion of the strains imposed by the event of immigration on individuals and whole families, including speculation on future tensions as the children of immigrants begin to abandon their original culture for that of their adopted country.

This book will be valuable to general practitioners with immigrant problems in their practice and perhaps equally valuable to paediatricians, psychiatrists, health visitors and district nurses working in these areas. In a wider sense it had educational value for all current and future medical practice in Britain. The guide to further reading and the extensive bibliography are useful and there is a valuable short list of relevant social work agencies with special knowledge and resources.

SHOLTO FORMAN

About the Illness Alcoholism (1972). KENYON, W. H. Liverpool: Merseyside Council on Alcoholism. Price: 20p.

The Merseyside Council on Alcoholism has published a re-written edition of their booklet on the illness alcoholism. The author is Mr W. H. Kenyon, who is the Executive Director of the Merseyside Council, and the foreword is by Lord Cohen of Birkenhead.

The booklet describes many aspects of alcoholism and begins with a historical review of the development of the illness in the United Kingdom and the factors which have influenced public reaction to alcoholism. Subsequent chapters describe the nature of the illness, including symptomatology and the effects which the illness has on family and community. The experience of the Council in the management and treatment of alcoholism is described and emphasis placed on the comprehensive nature of the care needed.

The functions of the general hospital, psychiatric hospital, alcoholic treatment units, out-patients, general practitioners, and alcoholics anonymous, are particularly mentioned.

There are two charts. The centre-page chart places in perspective the symptomatology of alcoholism with regard to the severity of the condition. The second chart illustrates the administrative structure of an information advisory centre and indicates those facilities which are associated with such a centre.

This booklet presents, in a concise manner, much of current thinking about alcoholism, and could well make a useful contribution to the general practitioner's understanding of the problem.

Perhaps a criticism that can be made is that the means of public and professional education regarding alcoholism are not outlined in sufficient detail.

Copies may be obtained from the Executive

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GARETH LLOYD

A Survey of Health Centres in the South-west (1972).

EDWARDS, J. R. Pp. 19. London: Update Publications Ltd. Price: 75p.

General practice is at once the newest and the oldest branch of medicine. Its antiquity may go back to Hippocrates, but its newness is a product of the National Health Service and the Royal College of General Practitioners. New sciences need new bases for measurement, so that it is perhaps unfair to criticise Dr Edwards' study for being unbalanced and halting.

He set out to enquire into the nature and functioning of health centres in South-west England. He visited 31 of the 35 and amassed a huge amount of data, not all of which are very clearly or sensibly presented. It would, for instance, surely have been better to compress or omit a table showing car places which takes up half of one of his 19 pages. The space gained by this and other compressions would have been better used to show plans of the centres; as it is he is obliged to describe the centres, e.g., "a relatively long corridor in the consulting suites. . . ." However, his remarks about how they are found to work in practice are good, even though without the plans the reader is hard put to it whether to agree or not. Presumably to have included plans would have made an expensive report priceless.

But the pity is the greater in that Dr Edwards' best section is that in which he comments on accommodation, and the best remark in this section is his feeling that "it is impossible to follow this line of reasoning [the Department of Health's plaintive cry that comparative data on health centres cannot be collected]. . . . From the limited individual effort . . . it is apparent that a vast amount of data on the good and bad points of many design features could be rapidly assembled and tabulated. The right questions have only to be asked and the results collected, but this could only be done by some central organisation". One can only hope that the Department, or the Royal College of General Practitioners, or the B.M.A. may be stung into activity.

"Give me a place to stand and I will move the earth" said Archimedes. Dr Edwards is one of our Archimedes, and general practice has in his report gained a small fulcrum with which to lever itself further forwards.

SIMON L. BARLEY

Health Services in a Population of 250,000.

CARSTAIRS, VERA and HOWIE, VIDA. Scottish Health Service Studies No. 24. Edinburgh: Scottish Home and Health Department.

This study is based on Government statistics, mainly for 1969, and sets out to give a picture of the health resources that exist to meet the health demands of a population of 250,000. Against this

background are reviewed the births and maternity services. The figures are such as to reveal the relatively heavy involvement by general practitioners in many aspects of midwifery. The section on general morbidity leans very heavily on work from the Royal College of General Practitioners. There are useful sections on the disabled in the community, on health centres, on specialists and hospital services.

The astonishing deficiency, however, is seen in Section 4 and 5 from which the uninitiated would conclude that the health care for children is delivered only through the hospital and local authority school health services.

The moral for this and for certain other aspects of a painstaking piece of work is that there is a desperate need for morbidity and work load figures from general practice to be fed into 'official sources'. If the study does nothing more than to drive this point home, it is still worth while but in fact it is likely also to serve as a useful index for administrators and planners.

J. D. E. KNOX

Psychiatry and Architecture (1972). SEAGER, C. P.
London: Society of Clinical Psychiatrists'
Special Report. Price: 30p.

This is a review of the literature about buildings for the psychiatrist's patients. It forms part of the work of a study group formed to draw up a brief for architects about to plan new psychiatric units because "there is general dissatisfaction with (the) old fashioned, large, isolated mental hospital . . . many points of view about what is appropriate for the (new) psychiatric unit (and) little systematic examination of different types . . . or of different internal and external arrangements".

There are 89 sources listed and reviewed under such headings as 'historical perspective', 'experimental work' and 'subnormality'. They include references to medical, psychological and architectural books and journals, conference reports and a personal communication. Nevertheless I

see serious limitations in this publication as an instrument for its declared purpose.

Its boundaries and the chosen headings suggest that the study group will try to answer the question "What sort of buildings do you want?" which is tantamount to the patient trying to answer the question "What sort of medicine do you want?". No, the briefing process is a dialogue, analogous to medical history taking, and the questions the client must be prepared to answer, concern the aims, processes and constraints of his own organisation as a system—in this case the system for delivery of care to psychiatric patients.

Who will occupy these buildings? What will they do? To what end? What is the acceptable range of sizes for therapeutic groups, for staff communities, for total residential communities? What are the role relationships within and between the various staff and patient communities? Surely it is upon the answers to this sort of question that the siting, the size and the internal circulation pattern of the building should be based?

Dr Seager quotes Bayes and Franklin in support of this view and offers part of an answer to the first question in the section of his review which he concludes by listing characteristics that distinguish psychiatric patients from others. But he offers little to help his group reach a consensus on the other, more controversial, matters. Perhaps he assumes they are familiar with the work of Goffman and Sommer and Townsend and the rest.

An architect recently reviewed the literature in order to equip herself in this field (Curtis, 1972) and of her 303 references only six appear in Dr Seager's list! This suggests that unless both disciplines join forces to study their problem they will, when they do meet, have already formed two different pictures of what they are setting out to do.

RUTH CAMMOCK

REFERENCE

- Curtis, J. (1972). *Head Against the Wall: an introduction to environmental psychology with particular reference to the psychiatric institution* University of Liverpool. (Unpublished).