deal for the quality of the *British Medical Journal* that it should publish such a volume as a vehicle for carrying up-to-date information about general practice.

There will doubtless be other volumes in the same series and together they will make a formidable set. However, whether one can justify paying £4 for each volume when one can get the same information by reading the *British Medical Journal* each week, is a matter for the individual doctor. For those doctors who do not read the *British Medical Journal* these volumes would obviously be of great value. One great advantage is that the references are easily available and save one ploughing through several volumes of the *British Medical Journal*.

I certainly think it more appropriate that these volumes should find their way onto the shelves of general practice libraries, rather than some of the more usual standard textbooks which are probably out of date. I therefore congratulate Dr Stephen Lock in compiling this edition and recommend it to our readers.

ARTHUR PRINCE

AT RISK

NSPCC Battered Child Research Team

Routledge & Kegan Paul, London (1976) 200 pages. Price £3.75

This book records the work and findings of the NSPCC Battered Child Research Team, set up by the NSPCC in 1968 and financed by four different charity grants and a four-year urban aid grant.

The first year of the study was concerned with a review of the literature and a retrospective study of 78 cases previously dealt with by the NSPCC. During the summer of 1968 Denver House was set up as the base from which the research study would emanate. Cases were to be accepted from hospitals, health departments, children's departments, general practice, health visitors and social workers. The area covered was confined to three London boroughs, and between January 1970 and September 1973 25 cases were chosen.

The team consisted of a head of department, deputy head, a research officer, three research social workers, a project co-ordinator, three secretaries and a telephonist. Later, a further research social worker joined and by 1972 two part-time clinical psychologists and a consultant forensic psychiatrist worked on a sessional basis. The

nursery was staffed by a matron, three nursery nurses, a mothering aid, a 'drop-in' foster mother and two lay workers.

After acceptance into the study and information searching, an initial case conference was held at which a therapy plan was made. The children and parents (usually the mother) were invited by social workers and decisions regarding the children's safety were usually made in consultation with other agencies. An attempt was made to establish a therapeutic relationship with the families over a minimum eighteenmonth period. The attendance at the day nursery was helpful in achieving this aim in many cases. From the outset, the team decided to have no dealings with the police and all legal formalities and procedures such as care orders were dealt with by outside agencies. At the end of the study the families were handed over to outside agencies, usually social workers.

The report gives details of the children—their age, sex, severity of injuries, development and progress. Facts regarding the age, social class, and ethnic origin of the parents are shown. The housing facilities and environmental conditions of the families are noted. As would be expected, a high degree of disrupted childbearing and emotional immaturity was found among the parents of the battered children. It was found that certain districts of the boroughs had a higher incidence of battering than others.

The authors conclude that there is no single factor in child abuse, but that it is "an interplay between emotional undernourishment and rejection in child-hood, unwilling parenthood, frustration and loneliness in adult relationships, particularly marriage and the confinement and stress of modern urban living". They further conclude that early protection of the children, a psychiatric assessment, individual psychotherapy and attendance at a specialized nursery, with intensive long-term treatment of the parents, are the essential ingredients of treatment.

The study concerns only 25 children and their families and for this reason conclusions must be drawn with caution. It may seem a pity that so much time, money, skill, care and thought which this study involved was aimed at symptomatic care and so little on prediagnosis and prophylaxis. The meticulous analysis of the cases is to be admired. However, it has to be admirted that on the whole the findings confirm the evidence already provided by previous authors and workers in this field.

The phenomenon of battering, the findings and conclusions of this study will come as no surprise to the experienced general practitioner, and city

family doctors will doubtless recognize in the conclusion regarding the aetiology quoted above all the ingredients of the battle which they daily fight on behalf of all their patients, old and young. Perhaps it is the knowledge of the impossibility of any simple solution that has caused apathy because, although the study received a great deal of interest from many disciplines and countries, the lack of interest—in some cases hostility—of general practitioners is noted. For a branch of the profession which prides itself upon its concern and care of families, it surely behoves us to consider the reason for this apathy. It is often the case that invitations to case conferences are given at short notice without prior warning. Perhaps the subsequent non-attendance can be taken as apathy, but the criticism in this study suggests more substantial evidence than this. We would do well to consider our role in this very difficult subject.

Alas, no one person—and certainly no one discipline—holds the key which opens the door to psychological, emotional and intellectual happiness in childhood, which, in turn, may engender the unselfishness of loving and caring parenthood. Until that Elysium arrives, the plague of child battering will remain with us.

MARGARET POLLAK

CIBA 43: HEALTH CARE IN A CHANGING SETTING

Ciba Foundation

Excerpta Medica, Amsterdam (1976) 188 pages. Price US \$14.25

This latest symposium report from Ciba constitutes an earnest, intelligent and erudite attempt to increase understanding of many of the thorny problems of the NHS, problems chiefly of economics, roles of personnel, efficiency and, of course, change. All are debated in a most stimulating way, making for far easier reading than in most such reports.

General practitioners who are grappling with the formation and functioning of primary care teams will find much of value. Perhaps the most telling point is that which calls for not only a willingness to change, but for making a fundamental and permanent commitment to the need for continuous change in a health service which serves a nation undergoing rapid economic, social and consumer change.

Whether it provides an answer to those who would like to reappraise the health service is left to the reader.

B.S.Cole