

place in England in 1767 and involved negligent treatment of a broken leg.

Angela Holder is an American lawyer who has provided a comprehensive account of current medical malpractice law. She quotes liberally from the Malpractice Commission which reported its findings in 1975. From the British reader's point of view, the findings of this Commission help to bring the extent of malpractice suits into perspective. There is a less than one in 100,000 chance of an incident occurring which will give rise to a malpractice suit against a physician. In cases which went to trial the average claimant who won received less than 3,000 dollars and only three per cent received 100,000 dollars or more.

Despite reassuring statistics physicians in America are deeply concerned about some of the larger sums awarded by juries swayed by slick attorneys. Contingency legal fees where lawyers agree to take cases for so much per cent of recovery are rightly criticized as legitimate small claims by patients who are often rejected by attorneys.

What does the future hold? Two alternatives are discussed by the author. Screening panels have been established in many parts of the country, and they decide if a reasonable case can be brought before a jury. The alternative is arbitration, which is more satisfactory in that arbitrators are generally less likely to be swayed by emotional issues than a lay jury.

This is not a book which will find itself on the shelves of many British general practitioners, but for anyone contemplating work in the USA it would be worthwhile delving into the many case histories cited as examples of the legal processes in a more litigation conscious society than our own.

D. J. G. BAIN

HANDBOOK OF PSYCHIATRY FOR SOCIAL WORKERS AND HEALTH VISITORS

Charles Bagg

Constable
London (1977)

434 pages. Price £5

Political developments are blurring the distinctions between trained and untrained social workers. Misunderstanding between social workers and the medical team increases rather than decreases. Therefore, any bridge is to be welcomed. Here is a comprehensive book which includes amongst its chapters one headed "Some areas of possible misunderstanding".

Dr Bagg is an experienced psychiatrist from Buckinghamshire with a special interest in child guidance. He has produced an encyclopaedia of 434 pages rather than a handbook: for example, the first 75 pages would stand on their own as a sensible and readable textbook on child psychiatry.

Despite its title the book does not deal with psychiatry alone but also deals comprehensively with social administration. The section on admission to hospital is particularly clear and helpful and is recommended by our attached social worker. Yet this is the section which will be the first to need revision if the current White Paper leads to legislation.

Dr Bagg includes a section covering a miscellaneous collection of organic diseases liable to produce mental changes and social service involvement, which is where many social workers feel particularly out of their depth. However, a potted medical text is inevitably superficial and is no substitute for factual discussion with medical colleagues in the health team and access to a well stocked practice library.

My colleagues and I have found it refreshing to have a British book on our shelves on this topic, and it has been referred to by our health visitor, visiting students, and members of our administrative staff, who have all found it most interesting.

Our main criticism is that Dr Bagg attempts to give us an entire working library in one volume, with the inevitable result that some subjects have been treated in less depth than one would wish. However, this paperback edition does bring the price within the range of the average practice and is therefore to be recommended.

JAMES FISHER

SICK HEALTH CENTRES—AND HOW TO MAKE THEM BETTER

J. Gerald Beales

Pitman Medical
London (1978)

147 pages. Price £5

The author of this book has spent five years studying health centres and the results of his research make sober reading, although the text is occasionally spiced with gems of dry humour. The recurring themes are of conflict, misunderstanding, poor design, and poor administration, all illustrated by anecdotal evidence.

Many health centres seem to have

been formed on the basis that if one puts an assortment of people into a building together then they are bound to meet and form a successful primary care team. In reality, previously existing friction between individual doctors or various groups of staff is only exacerbated. If they do not wish to meet, they will not do so.

Among the conclusions drawn are that all the individuals involved must make a positive attempt to communicate; that the separate practices are better kept in small units each with its own waiting area; and that the local authority should involve everyone who is to work in the centre with the design and planning from the beginning. Indeed, the common thread running through the book is the problem of communication—or lack of it. Another suggestion for improvement is to have a health centre manager.

It is a pity that the general impression given is that all health centres are disasters and best avoided. There are successful health centres, although my own opinion is that the chances of success are inversely proportional to the size of the centre!

A great deal of common sense pervades this book and the suggestions are well worth considering by all working in health centres, or thinking of doing so, by local authorities before they plan them, and by the groups who are supposed to give more than lip service to the concept of the primary health care team.

K. J. BOLDEN

PSYCHOLOGICAL DISORDERS OF CHILDREN: A HANDBOOK FOR PRIMARY CARE PHYSICIANS

Mark A. Stewart and Ann Gath

William and Wilkins
Baltimore (1978)

156 pages. Price £4.95

This could be regarded as a mid-Atlantic book but its subtitle should be interpreted according to American usage for it is aimed primarily at residents in psychiatry and paediatrics as well as those in family practice and nursing. The mainspring (the authors make no secret of this) is to keep up with the Jones's in adult psychiatry, hoping by presenting 'hard information' about child psychiatry to acquire scientific respectability for it.

The book represents something of a comeback for structured interviews and diagnostic labelling, both of which the authors consider to have become under-