



ABC OF ANTENATAL CARE

Geoffrey Chamberlain

British Medical Journal, London (1992)

84 pages. Price £9.95

This book, which was originally published as a series of articles in the *British Medical Journal*, is a worthy addition to the excellent series of ABC books.

The book is well designed and produced, and the style of writing is clear and concise. The diagrams, particularly those of ultrasound scans, are well chosen and described. The 16 chapters cover many of the traditional as well as not so traditional topics of antenatal care. For example, the chapter on working in pregnancy should be useful to general practitioners, as they are increasingly questioned by their patients about the effects of working with visual display units or biological or physical hazards.

However, I was slightly unhappy that some of the topics were dealt with in insufficient depth for the interested general practitioner although at the end of each chapter there is a short list of recommended reading. Also, since I suspect the book is intended primarily for general practitioners, a contribution from a general practitioner to such topics as the organization of antenatal care or normal antenatal management, would have been useful.

Professor Chamberlain's main message that 'Healthy women with normal pregnancy need little formal care and those at risk need the best of scientific medicine' is an excellent principle which should be enthusiastically accepted and embraced by all those who care for pregnant women.

JAMIE BAHRAMI

Regional adviser in general practice, Leeds

THE LONGEST ART

Kenneth Lane

Royal College of General Practitioners, London (1992)

180 pages. Price £15.00

In 1969, British doctors paid £6 to insure against all the legal risks they ran, general practitioners were experimenting with appointment systems wary that they might lead to an explosion in workload, and most were still delivering babies at home. In many other respects, however, general practitioners' work, attitudes and values were essentially the same as they are today. They anguished over the ethical problems of abortion and contraception. They pursued a love-hate relationship with out-of-hours work, and above all they prized their continuing relationship with patients.

The longest art by Kenneth Lane was originally published in 1969 and represents a personal account of the day-to-day work

and thoughts of a country general practitioner of that time. In 1992, it is strangely haunting, reflecting the origins of the legacies which now constrain us: attitudes to screening healthy people; the split between hospital and general practice; ingrained attitudes to salaried service.

The 18 chapters in the book are illustrated with delightfully anecdotal case histories. If I have a criticism, it is that there are not enough case histories to justify the author's sometimes lengthy personal views. Nevertheless, the book is easy to read. Though it both starts and ends with a tear, it is written with the authority and sensitivity which only someone completely in control of his subject can achieve.

The longest art is essential reading for those who wish to understand how general practice got where it is today. Its simplicity highlights the values and strengths of our profession and succeeds where other more academic treatises have failed.

PETER STOTT

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PREVENTING MENTAL ILLNESS IN PRACTICE

Jennifer Newton

Routledge, London (1992)

226 pages. Price £40.00

Jennifer Newton was commissioned by the National Association for Mental Health in Britain (MIND) to review existing programmes for the prevention of mental illness in order to bring together basic principles of 'good practice'. The author bases her estimate of the quality and efficacy of each programme on three principles. First, that it should be targeted at vulnerable groups using a 'disease modelling' approach. Secondly, that the intervention provided should increase an individual's capacity to control his or her own circumstances. Finally, that the programme should make maximum use of existing community and voluntary support networks.

The author first provides a brief review of disease models in mental health including the importance of the locus of control, life events and difficulties, vulnerability and social support. She uses these models as the bedrock on which opportunities for prevention might best be developed. Although clearly the research evidence on which she bases her assessments of prevention are psychological and social the author does acknowledge that other factors such as co-morbidity and genetic and biological factors must play a role. Specific patient groups for which prevention is applicable are then considered: young children and their families, adolescents, people in crisis, those with schizophrenia and elderly people suffering from mental illness.

This is a somewhat subjective and personal view of prevention services. However, the author is a research psychologist with