

siderable amount of teaching goes on and this is not confined only to the local doctors.

At a time when it is being seriously proposed that we might do better to relinquish any attempt to be doctor to whole families, this book provides a most important justification for continuing our traditional role. If emotional disorder is so often a family disorder, a single family doctor is more likely to perceive the nature of the trouble than separate doctors for each individual. Indeed this book pays tribute to the value of the general practitioner as an accessory to the service described. One might add, however, the provisos that we should fully accept our psychiatric role and organize adequate training for ourselves.

This is an important book. It is also a very well-written one. Finally, it is short.

**Family Ill Health—An Investigation in General Practice.** ROBERT KELLNER, M.B., CH.B. London. Tavistock Publications. 1963. Pp. vii + 112. Price 20s.

Every general practitioner is aware of the family or household incidence of ill health. There are those families who make constant and often unnecessary demands on his time and patience; there are also those whose requirements though frequent cannot be called trivial. These are the ones who present the problems; for two or three years the family are constant attenders and then for no obvious reason their demands cease and they may not be seen again for years. What is happening in these families? Sometimes a persistent streptococcus is the cause of recurrent sore throats, sometimes a frank psychoneuroses in one or more of the family is to blame. As often as not there is no obvious reason.

Just as no person who is physically sick can avoid some change in his mental equilibrium, however mild, so no family with a sick member can itself escape the effect of this on its individual members. If the sick person is the bread-winner the effect may be great, if the housewife the resulting upset on the others may be severe, but even if it is only a minor illness in one of the children there is a resulting upset in the attitudes of all the other members. There is disharmony. Every doctor knows that even when he has been at pains to explain the disability to the relatives they are apt to exaggerate, for illness still holds something of the mysterious to those untrained and merely to be "under the doctor" implies a significant degree of ill health.

Dr Kellner has done a service in publishing this pioneer survey of family ill health although his selection of cases is limited to those families in which a member had an overt emotional disturbance or had attended with functional symptoms. He divided his families into four groups. Group 1, the rare attenders, group 2 the average attenders, group 3 the frequent attenders, and group 4 the uneven pattern of attenders, but as he himself admits the grouping is arbitrary and there is considerable overlapping between the groups.

A great deal of work has been done in this investigation. It is full and

thorough and as a medico-social document the work will be read by many interested in this branch of general practice. General practitioners however will lay down the book with a feeling of frustration. They will have discovered little which they did not know before and will have digested many platitudes. In his summing up Dr Kellner writes: "it seems that illness in the family, chiefly severe and prolonged illness, can make the relatives unhappy or afraid or can produce pre-occupation with disease. This may induce them to consult their general practitioner more often; it may sometimes precipitate neurotic symptoms or psychosomatic disorder, and perhaps predispose to physical illness". Well! well!!

**Psychological Medicine.** D. CURRAN, C.B.E., M.B., F.R.C.P., D.P.M. Fifth Edition. Edinburgh and London. E. & S Livingstone Ltd. 1963. Pp. vi + 417. Price 30s.

The fact that this book has run to five editions in 20 years, speaks for itself. The sub-title of the volume describes it aptly as a short introduction to psychiatry, and it is recommended for both medical students and all non-psychiatric doctors, especially those in general practice. It is well printed, free from jargon and has a free-flowing style which makes for easy reading. The whole subject of psychiatry is covered, and it is refreshing to find so much good sense packed into such a short volume. The introductory chapter is brilliantly written and whets the reader's appetite to know more about the subject which is so often misunderstood. Mental illness cannot be studied in the same way as overt organic disease. For the student the book is a sound guide, and for the postgraduate it is an excellent refresher course. The chapter on treatment is difficult, at a time when new drugs emerge almost every month, but the subject is adequately covered. The last chapter on the legal aspect of mental illness brings one completely up to date. There are one or two small errors. Manic depressive psychosis is given second place as regards mental hospital admissions. According to the 1961 Statistical Review on Mental Health, the admissions for this illness were higher than for any other group. Reserpine is said in some cases to cause depression after four to six months. It can happen very soon after the administration of the drug in those who are going to react. These are minor criticisms in an excellent book which has the added attraction of being reasonably priced.

**Aspects of Psychotherapy.** I. ATKIN, M.D., D.P.M. Edinburgh and London E. & S. Livingstone Ltd. 1962. Pp. vii + 103. Price 10s 6d..

This collection of articles is presented by Dr Atkin in "the hope that they will stimulate younger psychiatrists, and be helpful to general practitioners who can spare a modicum of time for psychotherapy."

He commences by recommending a lay definition of psychotherapy as