



psychiatrists, particularly those working in the forensic field. It is, nevertheless, an easily understood, clear overview of the issues in relation to mentally disordered offenders (MDO) in particular and will be of value to those coming newly to the subject.

The introduction to risk as a general concept is interesting, if rather brief, and is followed by sections that review the work of some historically important Government committees, the functions of the mental health review tribunal and parole board, among others, and describe some of the research into the relationship between violence in its various forms, and mental disorder. Professor Prins brings to the book his own experience of working as a member of two inquiries, and describes certain others chosen, by his own admission, in a somewhat arbitrary manner but included in order to illustrate different points. I suspect that any member of the public, with little or no experience of people with mental illness or any form of mental disorder, who reads this will find it the most disturbing section. Why does it seem that the same sort of errors or omissions are made time and time again?

There might, perhaps, have been a more searching and extensive explanation of the difficulties that arise when attempting to equate the aims of mental health professionals and the criminal justice system in dealing effectively with MDOs, although some of these are raised. There is a description of a fictitious case conference and the participants from some of the various different professional groups who might be involved. Although in some places these caricatures may not be so recognisable, regrettably in others they still represent reality.

I was most anxious to reach the part of the book entitled 'Improving Practice'. Initially I found myself somewhat disappointed, but through no fault of the author. In reading about risk assessment and management one can become possessed by the search for revelation and the ultimate answer to the unanswerable question. We are encouraged by much of what we might see that relates to these areas to believe in the Holy Grail of absolute prevention. What Professor Prins does so successfully is to remind us that there is actually no such thing. Our efforts should be focused on maintaining high standards in relation to the basic elements of practice. We should obtain, record and share information, foster good communication and liaison with all those involved and maintain a degree of suspicion within appropriate professional limits, and ask questions accordingly. Perhaps one of the most important messages that we should be seeking to put across is that for some, death, not only their own but regrettably in some cases that of another person,

may be an entirely unpredictable and unpreventable but almost inevitable outcome in certain circumstances.

Martin Humphreys, Senior Lecturer in Forensic Psychiatry, University of Birmingham, Reaside Clinic, Birmingham Great Park, Birmingham B45 9BE

Talking cure. Mind and Method of the Tavistock Clinic

Edited by David Taylor. London: Duckworth. 1999. 203 pp. £14.95 (hb). ISBN: 0-7156-2924-7

A book to accompany a successful television series often fails to capture the spirit of the original, and very rarely transcends the visual medium. I enjoyed the television series, which largely managed to get across psychodynamic concepts in an accessible way. I was left, however, with an impression that the television director had chosen charismatic figures and had brought together the 'plot' in each episode but left viewers still uncertain of what the Tavistock as an institution stands for.

This book is far more than a book to support the television series: it is a rich and resonant account of the practice and theory underlying psychoanalytic approaches to therapy. That would be enough to earn a recommendation for libraries, but the book goes well beyond an account of psychoanalytic practice. It takes a life-cycle view and cleverly weaves in issues of groups, families and institutions that have been central to the work of the Tavistock.

The style is a compelling mix of clinical and observational anecdotes, linked to clear expositions of some complex theoretical ideas. These are salted with humour and some excellent plate photographs. Black and white photographic plates might not have been allowed if this had been published directly by the BBC, but, the relatively simple technology is extremely powerful in conveying emotional meaning. For example, there are stills from the Robertsons' cine-film of Laura adjacent to an image of the Madonna and child, to show the physicality of infant desire, and a further image of two youths and a boy looking at the camera with 'frozen watchfulness'. These images add poignancy to the text that is already saturated with meaning.

Although I enjoyed the book greatly, the authors are also clear in setting out a position that can be contested. For example, the excellent chapters covering childhood make assumptions about the development of cognition and memory that do not sit easily with modern developmental psychology. On the other hand, the book tackles the very difficult theme of childhood sexuality and aggres-

sion in a way that presents Melanie Klein in an accessible way.

I had expected to review a book that gave an interesting set of programme notes to the television series. The book does indeed complement the series in this way, but goes far beyond that. The Tavistock is a diverse institution, and the editor has done something of real value in this synthesis. In the chapter 'What causes the mind?' there is a discussion of Proust who "understood that memory and imagination have to be sought actively, too, by mental effort". This book is evidence of the effort to develop a style of psychoanalytic thinking that characterises the Tavistock.

I would recommend the book to a medical student struggling to understand family reaction to the death of an infant, to a psychiatric trainee who is curious about psychoanalysis, to a friend making sense of a hostile work environment and to seasoned colleagues who knew the theory but would welcome the clinical depth. The book could be read sequentially to give a chronological and developmental overview, linked to particular episodes of the television series, used as a basis for a reading seminar or dipped into and enjoyed.

Frank Margison, Consultant Psychiatrist in Psychotherapy, Gaskell Psychotherapy Centre, Manchester Royal Infirmary, Swinton Grove, Manchester M13 0EU

Forget Me Not. Mental Health Services for Older People

By the Audit Commission. London: Audit Commission. 2000. 190 pp. £20.00 (pb). ISBN: 1-86240-203-5

Everyone involved with services for the elderly with mental illness should welcome this report from the Audit Commission. Effectively a bench marking exercise covering England and Wales during 2000 and 2001, this is the first time the auditors have attended to this area of clinical practice. By involving NHS trusts, health authorities, social service departments, the independent sector, carers and primary care it is the first attempt by the Commission to evaluate working across agencies with a strong emphasis on 'joined-up working'.

This first report includes 12 anonymised areas and provides comparative data about the commissioning and resourcing of services and methods of service delivery, with a good deal of opinion from carers and primary care. Bar charts make the data easy to view and each of the six sections conclude with clear and convincing recommendations. There are valuable



vignettes of good practice and innovation. The variation between areas begs obvious questions, not least of which is why great differences in funding bear no relationship to need.

The recommendations of good practice and the process of audit are in harmony with the report of a joint working party of the Royal College of Psychiatrists and Royal College of Physicians (1998). This working party emphasised the importance of coordinated service development that took account of examples of good practice and was more accountable to the public. It called for comparison of practice against a national reference framework. We now eagerly await publication of the National Service Framework for Older People.

The *Forget Me Not* report is largely devoted to dementia care and my major criticism is the lack of data on resources committed to functional mental illness or discussion about the needs of this group. The absence of a statement demanding a more vigorous attitude to the early treatment of depression outside specialist services is a missed opportunity.

This gripe aside, the report is essential reading for anyone involved with commissioning, planning and providing these services. It is written with clarity and contains sensible advice and good ideas. Reading it resurrects any flagging passion to improve services for this vulnerable group of people. It reminded me what can and should be achieved and, in case I had forgotten, of the excitement and potential that exists in this area of work.

ROYAL COLLEGE OF PSYCHIATRISTS & ROYAL COLLEGE OF PHYSICIANS (1998) *Care of Older People With Mental Illness: Specialist Services and Medical Training*. CR69. London: Royal College of Psychiatrists & Royal College of Physicians.

David Anderson, Consultant Old Age Psychiatrist, Mossley Hill Hospital, Liverpool

Hospital Treatment and Care

By G. Howe. London: Kingsley Publishers. 1999. 160 pp. £11.95 (pb). ISBN: 1-85302-744-8

This book is the third volume in a series addressing different aspects of mental health care and focuses on user experiences of hospital care. Each chapter consists of a case study, followed by a group discussion with 12 service users and carers. The author is the chair of the group.

Obviously the objective of such a book is to draw attention to flaws in the

system, but this book is not a long whinge. On the contrary, it is clear that much attention has been given to present both sides of the story. Several negative narratives are balanced by the same person's positive experiences, mostly at a later time in a different setting.

It is difficult to feel a strong sense of identification and discomfort reading the stories, especially because it is all so recognisable. Mostly it concerns the lack of respect, poor communication and poor basic care. What makes it worse is that some follow-up stories show how relatively small shifts in the attitudes of professionals can make colossal differences to patients. We should question whether it is tolerable that some patients are so unhappy with care under the NHS that they are willing to mortgage their houses in order to afford private care. And can we really not provide the same quality of care consistently throughout the NHS? If anything, this book is a strong endorsement of the National Institute for Clinical Excellence and the Commission for Health Improvement.

Of course the book has its weaknesses. The group functions as a Greek choir, often oddly neutralising the impact of the story by their commentary rather than allowing the cases to speak for themselves, too rarely adding personal experiences. The language is also distracting, members being described as survivors and sufferers, and people in the case stories as patients. The introduction and summary are good, highlighting the key issues.

In summary, a book that touched me. No one will agree with every position expressed, but it will be difficult not to agree with the overall message: too many people receive poor care in hospital.

Matt Muijen, Director of the Sainsbury Centre for Mental Health, 134–138 Borough High Street, London SE1 1LD

Offenders with personality disorder

By Royal College of Psychiatrists. London: Royal College of Psychiatrists. CR71. 1999. 95 pp. £12.50. ISBN: 1-901242-34

Until a few years ago most writing on personality disorder made for dismal reading. The reference list consisted of all the usual suspects and, however great one's respect for the man, it had to be accepted that a topic was dead when the last word on it came from Aubrey Lewis. Happily, things look different now, with a flurry of legislative activity and a growing body of research. It would be comforting

to believe that this change represented the coming of age of psychiatry. Has the profession realised at last that difficult patients do not go away just because one ignores them? Well, no. Like many comforting beliefs, this one would be untrue. Most credit should go to the government, for forcing us to confront a problem that had been ignored for too long.

This development may have unfortunate consequences, as the Government must be tempted to ignore psychiatry completely. While the impulse is understandable, this would be a serious mistake, for two reasons. First, psychiatrists had good reason to be wary of the compulsory treatment of someone's personality, and a workable solution will have to deal with many of these concerns. Second, if the 'big idea' amounts to locking up all the bad people before they commit their offences, the government needs all the advice it can get. After all, if the solution was so simple, other (democratic) countries would have adopted it already. This book shows that the solution is far from simple. It shows that progress is likely to be made over the long-term, through properly funded research and treatment programmes. There is little encouragement here for anyone who is looking for a quick and dramatic answer.

In less than 100 pages the book summarises the state of our knowledge about offending and personality disorder. The matter of fact tone tells a depressing tale of children who are the victims of poor or cruel parenting, made worse by exclusion from schools. They graduate to offending of varying degrees, before forming and breaking dysfunctional relationships that serve to complete the cycle.

Despite its origins as the work of a College committee, it is concise and readable throughout. The authors have synthesised a wide range of views to produce a consensus that is nicely balanced between, on the one hand, acknowledging our limitations and, on the other, pointing the way forward. They spell out the difficulties facing researchers and clinicians in this area, without ever being tempted to throw up their hands in horror and abandon the challenge. This book should be in your library. If you are thinking of a research project, you should have read it already. If you are involved in providing a psychiatric service, you should read it soon. If you are thinking of making laws in this area, you should read it twice.

Tony Maden, Professor of Forensic Psychiatry, Imperial College, The Academic Centre, Uxbridge Road, Southall, Middlesex UB1 3EU