

now in the Reykjavik Mental Hospital had been reared by foster parents. All the brothers and sisters of the patients in the first group were studied to determine whether they had been in a foster home during the whole of their childhood and adolescence. With suitable precautions these two groups were examined to see whether separation from the biological parents during childhood leads to an increased risk of schizophrenia, and whether genetic factors predominate over environmental influences. The author concludes that the latter do not play an important part in causing schizophrenia but that they can bring it on at a particular time, or modify it. More surprising is his hypothesis that there are two personality characteristics—one associated with anomalies of thinking and the other with nervous tension—which are gene-controlled: the former being dominant and the latter recessive. When both occur in the same person, schizophrenia is likely to result: when one of them occurs alone it may have a beneficial effect, and he conjectures, not very convincingly, that 'the six per cent of the population that should possess this characteristic perhaps includes the individuals who are the cultural and habitual leaders in human societies'.

**PSYCHIATRY AND ANTI-PSYCHIATRY** By D. Cooper. (Pp. xiii + 128. 25s.) Tavistock Publications: London. 1967.

It is difficult for a reviewer, indoctrinated in orthodox psychiatry, to detach himself sufficiently from his prejudices to examine dispassionately a thesis that regards 'normality' as a half-way stage to a 'sanity' that very few manage to reach and that is nearer to 'madness' than to 'normality'. He is not helped by the occasional ironic aside ('whether the formal training of psychiatrists includes qualifications in magical omnipotence is perhaps uncertain . . .'), or by the loading of argument with emotion. It remains obscure how much contradictory demands made on a person by his family are responsible for a 'breakdown' labelled schizophrenia, or merely give it pathoplastic colouring. The author describes the interesting experimental unit that he organized at Shenley Hospital. The results, in a similar series of patients, expressed conventionally in 'An ironic addendum' in terms of discharge and readmission rates, and adjustment to work, are superior to those obtained by conventional treatment.

**ECLECTIC PSYCHIATRY** By Rudolf Kaelbling and R. M. Patterson. (Pp. 891. \$17.50.) Charles C. Thomas: Springfield, Illinois. 1966.

Eclecticism can be as dangerous in psychiatry as in architecture or philosophy: unless it has a rigorous systematic basis, it degenerates into a wishy-washy syncretism and its results appear as a patchwork of clashing fragments. Drs. Kaelbling and Patterson, writing for doctors who are not psychiatrists, avoid the fundamental grounds of contemporary dispute about such matters as the theory of psycho-analysis and the efficacy of psychotherapy; they provide instead a broad, well-informed, mildly biased account of conservative belief

and practice. Their cautious half-way commitment is illustrated by the statement in their preface, that 'neither philosophy nor research methodology is of prime concern in teaching psychiatry, although one cannot be completely without either. What must be learned is how to identify a psychiatric problem, and then how it can be pursued to the frontiers of our present-day knowledge'.

There are some novel features, such as Tables which are catalogues of symptoms (for example, Table xii with the caption 'Major mental complexes designated after mythological figures', among whom Demosthenes and Epaminondas are listed alongside Cain, Heracles, and Oedipus); a distribution of space which slightes the major psychoses—in Part 4, for example, on 'Clinical Psychiatric Syndromes', 62 pages are devoted to neuroses, personality disorders, and adjustment reactions, 50 pages to sociopathies, but only 25 pages to schizophrenia and nine pages to the affective psychoses. A professor from the English Department of their university edited the manuscript 'for style, grammar and logic'—a humble but effective use of academic talent.

**INTERPERSONAL PERCEPTION** By R. D. Laing, H. Phillipson and A. R. Lee. (Pp. vii + 179; 15 tables. 35s.) Charles C. Thomas: Springfield, Illinois. 1966.

This book begins with the following sentence: 'The human race is a myriad of refractive surfaces staining the white radiance of eternity.' Its concluding section is entitled 'The spiral of reciprocal mistrust in international relations'. The intervening pages are taken up with a rambling discussion focused on personal interaction; the description of an unstandardized and unvalidated test, the Interpersonal Perception Method; and the results of the application of this test to a small group of 'disturbed and non-disturbed' married couples. Although there is much talk about dyadic systems and a plethora of Tables relating to them, no mention is made of previous sociometric studies which have encountered the many problems of method in this field. Both Dr. Laing's admirers and his detractors will find their opinions confirmed by this volume.

#### BOOKS RECEIVED

(Review in a later issue is not precluded by notice here of books recently received.)

**SOCIAL PSYCHIATRY** Vol. 1. August and October issues 1966. Edited by W. V. Baeyer and others. DM 36 per vol. Berlin, Heidelberg and New York: Springer-Verlag.

**BASIC IDEAS IN NEUROPHYSIOLOGY** By T. D. M. Roberts. (Pp. xi + 108; illustrated. 25s.) London: Butterworths. 1966.

**BRAIN PHYSIOLOGY AND PSYCHOLOGY** Edited by C. R. Evans and A. D. J. Robertson. (Pp. viii + 280; illustrated. 32s. 6d.) London: Butterworths. 1966.

- PSYCHIATRY IN THE PRACTICE OF MEDICINE By A. J. Enelow and M. Wexler. (Pp. viii + 355. 52s.) London: Oxford University Press. 1966.
- A HANDBOOK OF SURGICAL DIATHERMY By J. P. Mitchell and G. N. Lumb. (Pp. 100; 106 figures. 37s. 6d.) Bristol: John Wright & Sons. 1966.
- LES CÉPHALÉES ALLERGIQUES By J. Blamoutier and C. Denimal. (Pp. 112; 11 figures. F.24) Paris: Expansion Scientifique française. 1966.
- STEREOTAXIC ATLAS OF THE FOREBRAIN OF THE GUINEA PIG By T. Luparello. (Pp. 80; 63 figures. DM 43.) Basel and New York: S. Karger AG. 1967.
- THE DEVELOPMENT OF SEX DIFFERENCES Edited by E. E. Maccoby. (Pp. 351; illustrated. 60s.) London: Tavistock Publications. 1967.
- ESSENTIELLE HYPERTONIE. Klinik, Psychophysiologie und psychopathologie By A. W. von Eiff, G. Kloska and PH. Quint. (Pp. xii + 232; 9 figures, 3 tables. DM 45, Stuttgart: Georg Thieme Verlag. 1967.
- MADNESS AND CIVILISATION By M. Foucault. (Pp. xiv + 299. 35s.) London: Tavistock Publications. 1967.
- IL PROBLEMA DELLA COSCIENZA IN NEUROPSICHIATRIA By R. Viziolo and Clelia Bietti. (Pp. 216; illustrated.) Pisa: Omnia Medica. 1966.
- PADIATRISCHE NEUROCHIRURGIE Edited by J. Gerlach, H. P. Jensen, W. Koos and H. Kraus. (Pp. xx + 876; 635 figures. DM 287.) Stuttgart: Georg Thieme Verlag. 1967.
- SCHEMA DER SEGMENTALEN HAUTINNERVATION: DERMATOME By K. Hansen and H. Schliak. (50 tear-off standard charts for clinical use; size  $8\frac{1}{2} \times 5\frac{1}{2}$ ". DM 9.80) Stuttgart: Georg Thieme Verlag. 1967.
- BEITRAGE SUR EKSTASE Bibliotheca Psychiatrica et Neurologica No. 134 Edited by Th. Spoerri. (Pp. iv + 207; 2 figures. 79s.) Basel: S. Karger. 1968.
- ADVANCES IN OPHTHALMOLOGY Vol. 19. Bibliotheca Ophthalmologica No. 73 Edited by M. J. Roper-Hall, H. Sautter, and E. B. Streiff. (Pp. vi + 221; 92 figures, 20 tables. 117s.) S. Karger: Basel. 1967.
- A STEREOTAXIC ATLAS OF THE JAVA MONKEY BRAIN (*Macaca irus*) By Totada R. Shantha, Sohan L. Manocha, and G. H. Bourne. (Pp. iv + 68; 64 figures. 69s.) S. Karger: Basel. 1968.
- INDIVIDUALITY IN PAIN AND SUFFERING By Asenath Petrie. (Pp. xvii + 153; 33 figures, 30 tables. 45s.) Chicago and London: University of Chicago Press. 1968.
- STUDIES IN PSYCHIATRIC ART. Its Psychodynamics Therapeutic Value, and Relationship to Modern Art By R. W. Pickford. (Pp. xix + 340; illustrated \$14.00.) Springfield, Illinois: Charles C. Thomas. 1967.
- THE LOSS OF LOVED ONES. The Effects of a Death in the Family on Personality Development. Compiled and edited by D. M. Moriarty. (Pp. xvi + 203; 2 figures. \$8.50.) Springfield, Illinois: Charles C. Thomas. 1967.
- ECHOENZEPHALOGRAPHIE By H. W. Pia and C.-L. Geletneky. (Pp. viii + 168; 128 figures, 20 tables. DM 59.) Stuttgart: Georg Thieme Verlag. 1967.
- ANGIOGRAPHIE DES HIRNKREISLAUFS By K. Decker and H. Backmund. (Pp. viii + 76; illustrated. DM 44. Stuttgart: Georg Thieme Verlag. 1967.
- HYDRODYNAMIK, ELEKTROLYT- UND SAURE-BASEN-HAUSHALT IM LIQUOR UND NERVENSYSTEM. Symposium vom 27. 2.-1.3. 1967 der Neurologischen Klinik des Krankenhauses Nordwest, Frankfurtam Mein. Edited by G. Kienle. (Pp. xi + 268; 168 figures, 46 tables. DM 52.40.) Stuttgart: Georg Thieme Verlag. 1967.

PROLONGED COMA AND RECOVERY

*The Editor has received the following letter from Professor W. H. Sweet, Professor of Surgery at Massachusetts General Hospital and chief of the neurosurgical service there. It covers an important subject and he hopes that readers will try to help Professor Sweet's investigations.*

24 January, 1968

Dear Sir—The ability of physicians to maintain life for very long periods in the unconscious patient raises the question as to how long such skills should be deployed. As physicians we are eager to promote the recovery of everyone who can do so. In order to deprive no one of his chances on this score it is relevant to know the longest periods of coma which have been followed by useful survival.

A committee of the Massachusetts General Hospital is studying our own records and the world literature to determine pertinent features in all patients who, *despite coma for over five weeks*, have made a useful recovery. We think it is vital not to overlook any well-documented patient in this category. We should be grateful if any reader of this journal would draw our attention to any case published under a title which is not indicative of survival after prolonged coma. We are also eager to receive accounts of such cases as yet unreported. A publication incorporating our own and others' data is planned.—I am, etc.,

WILLIAM H. SWEET

Chairman, Committee on Management of the Unconscious Patient  
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