Book reviews


“...This book is the successor to Tredgold's textbook....” asserts Professor Bicknell in the opening sentence. “...However”, she continues, “...the replacement of the medical model by the multidisciplinary approach has caused us to produce an entirely new book.” One can only agree that with three editors and forty contributors, this book bears little resemblance to the original Tredgold. Is it, though, an entirely new book?

Tredgold, writing in the early years of this century, was concerned mainly with description of the variety of “syndromes” which had mental handicap as their common feature. Later editions increasingly recognised differing degrees and types of disability, and the postulated aetiologies largely reflected the prejudices and concerns of the era. In that sense Tredgold defined the current state of the art, and that is no less true of this present volume. Gone is the rigid categorisation of mentally handicapped persons according to supposed aetiology; instead there is a comprehensive overview of the various elements (education, health and social services) which together make up a modern service. For maintaining a fairly consistent style throughout the book and avoiding a glaring overlap between chapters, the editors are to be congratulated. The impressive quality of the proof-reading is another plus.

Broadly speaking, the major topics covered are service organisation, legal aspects, individual aspects (including aetiological considerations) educational issues and intervention strategies. Service organisation is presented, probably appropriately, in a fairly descriptive manner and the concept of normalisation in the delivery of human services is introduced as a general theme of the text. As a sophisticated discussion of public policy development, I particularly liked Malcolm Johnson’s chapter; his comment “Mental handicap policy probably represents the most radical and coherent thrust for positive change to be found on the UK scene” illustrates the quality of his thought.

Of particular interest to the practising professional, the chapters on Intervention take the Community Mental Handicap Team as the central element of service provision, and draw together the variety of contributions of the different members. Overall, I think the authors succeed in this notably difficult task. In Chapter 24, Hollins hints at the difficulties of achieving successful teamwork, but unfortunately has little space to elaborate on team building skills. Perhaps that topic is worth a textbook all of its own!

Further positive aspects of this volume include the attempts by all the authors to support their conclusions with detailed references to the literature, and the descriptions of North American practices in community care and special education. Unfortunately, like any textbook, this too has its weakness. Most notable is the (presumably deliberate) avoidance of serious controversy. Perhaps that is the price to be paid for having an overall coherent thrust. Even so, some discussion would surely be warranted of the inevitable conflict and compromise implicit in public policy formulation: an example would be the dialectic between vaccine damage compensation for the few and the need to attain agreed minimal standards for the many. Smaller criticisms include lack of discussion of the economic costs of change and the comparative lack of pointers towards future research.

Overall then, this is a textbook of interest to a number of professional groups and those responsible for service planning and the allocation of funds. It is not a “hands on” book in the sense of telling a newly appointed professional how to begin. Perhaps a good beginning would be to read this book!

The broad scope of this book is, I feel, at once both its strength and its weakness. On account of its general interest, this book will find a place in the libraries of Community Mental Handicap Teams and specialised professional workers. What thought of the needs of psychiatrists specialising in, or having a special interest in, the psychiatry of mental handicap? This was after all the target audience of Tredgold’s original textbook. For them, apart from a valuable overview of the current scene, this book has comparatively little to offer. Of most direct relevance is Chapter 28 by Andrew Reid, but this essentially just summarises his own paperback on the subject. Nowhere is to be found the detailed approach to history-taking and mental state examination appropriate to the mentally handicapped person and their family. One is left no wiser about, for example, the recognition of a mood disorder in an autistic person or the specific clinical signs of a dementing illness in a person with Down’s Syndrome. Of course, Reid alludes to those in general terms, but not in anything like the detail required by the doctor in clinical practice. As far as I can see, such a book has yet to be written. If, when it is, it will become the true successor to Tredgold, in theme, if not in lineage.

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At first sight the pineal does not look very exciting, but being in the middle of the head it has long been considered to have some central function. The isolation of the pineal hormone melatonin by Aaron Lerner in 1958, and the anatomical studies which have identified a retinal-suprachiasmatic nucleus-pineal pathway have been major achievements of modern neurobiology. The pineal of lower vertebrates has been revealed as an endocrine organ, a biological clock, and the classical “third eye”, whilst that of higher mammals has been shown to function as a sensory organ that detects photoperiod. A modern caesium atomic clock has an error of less than 0.00001 s/day, but cannot adjust to the outside world; in contrast, the mam-