However, it was an enjoyable read as an adjunct to core texts. I would also recommend this book to patients with a relatively high level of education and an interest in learning more about anxiety.

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100 Years of the IPA

The Centenary History of the International Psychoanalytical Association 1910–2010 Evolution and Change



100 Years of the IPA.
The Centenary History
of the International
Psychoanalytical
Association, 1910–2010:
Evolution and Change

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Peter Loewenberg & Nellie L. Thompson

The International Psychoanalytical Association

ARNAC

The International Psychoanalytical Association (IPA) was founded in 1910. At that stage there were fewer than 100 members, most of whom were friends or colleagues. Despite its modest size there was no shortage of prestige – it was founded by Sigmund Freud, on an idea proposed by Sándor Ferenczi. The first president was Carl Jung and its first secretary was Otto Rank. Other founding members included Max Eitingon and Karl Abraham. Today, it is an association that counts 12 000 psychoanalysts as members and works with 70 constituent organisations. It is recognised as the world's primary accrediting and regulatory body for psychoanalysis and takes an active role in the development of psychoanalytic thought and practice throughout the world.

2010 was the centenary year of the IPA and is marked by the publication of this book, a collection of essays from 41 of the member nations, each describing their own history and development within their particular geographical area. The psychoanalytic world is broadly split into four within the book: Europe, North America, Latin America and Asia and Oceania together.

The book begins with an essay from the Viennese branch of the IPA and the subsequent chapters trace the story of the growth and development of not just the IPA, but psychoanalytic thought and practice, outwards from Vienna and across the globe. It thus provides not just a history of the constituent member organisations, but an interesting account of the interplay between the social, cultural and political factors that both shaped, and were shaped by, the spread of an understanding of the unconscious.

For those with an interest in psychoanalysis or psychotherapy, the rich historical detail and the linking of advances to the context of the time provides both a fascinating read and much to consider in terms of how and why psychoanalysis in the reader's own patch may have reached where it has. For those working within the National Health Service (NHS) in the UK today, the book serves as a timely reminder of how the history of psychoanalysis is one of periods of enthusiasm and uptake followed by waning interest or attack, often to the point that it seems as though survival is

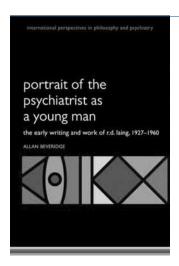
threatened. Splits and divisions are commonplace. Throughout, however, is a clear message that in some form or another psychoanalytic thought and practice not only survives, but spreads and grows.

The collected histories of the member organisations provide many examples of how survival often requires history to be processed to allow the required change. Also highlighted is the need for innovation and to remain responsive to the environment of the time, including a flexible approach as to how treatments and training are not only funded, but structured. Edith Kurzweil is quoted in the history of German psychoanalysis, making the point that a country gives rise to the form of psychoanalysis it needs. The example of the growth of psychoanalysis in China since the end of the Cultural Revolution (where there is now a rigorous 3-year analytic training for psychiatrists and psychologists) illustrates not just this sentiment, but the importance of creating a training programme capable of providing the treatments that a country can use at that particular point in time.

For the reader without a particular interest in psychoanalysis or psychotherapy there is still much of interest and relevance within the book, especially in the current climate of enforced change and upheaval within the NHS. Reading the book leaves one in no doubt as to the importance of the emotional life of an organisation and how this can affect its functioning. The value of holding onto the history, in particular the importance of the 'primal scene' of an organisation to its subsequent growth and development, is illustrated time and again. The histories of those groups who had their primal scenes or conceptions in the product of a forced marriage or a brutal takeover – and how those traumas affected not just their emotional life, but their smooth running until the trauma was processed – seems particularly relevant when similar events seem to be happening within different parts of the NHS today. It is in this area that the book, and the IPA, provides an eloquent and convincing argument for the importance of continually developing a rigorous and structured approach to understanding the present through an honest appraisal of past and current emotions, conscious or otherwise.

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Portrait of the
Psychiatrist
as a Young Man
The Early Writing
and Work
of R. D. Laing, 1927–1960

By Allan Beveridge. Oxford University Press. 2011. £39.99 (pb). 384 pp. ISBN: 9780199583577

The memory of R. D. Laing, the most famous British psychiatrist to date, refuses to fade almost 25 years after his death. In 2011, a plaque was unveiled in his honour at his childhood home in

Govanhill, Glasgow, on what would have been his 84th birthday. His memory has also been reinvigorated by this new intellectual biography of the early Laing by Allan Beveridge, another Glasgow-born psychiatrist with a broad interest in the arts and humanities. This volume is an important addition to the Laing literature, a body of work where one might have imagined all had already been said, because it synthesises primary research undertaken in the Laing archive at Glasgow University Library Special Collections with an in-depth understanding of both Laing's published work and the secondary literature on Laing from both academic sources and popular accounts.

One of the joys of the book is its use of extensive quotes from Laing's unpublished notebooks, including some entitled 'Elements for an Autobiography'. Laing did publish a first instalment of his autobiography in Wisdom, Madness and Folly. The Making of a Psychiatrist, 1927-1957, which also included a section on his views of mainstream psychiatry at the point of publication in 1985, 4 years before his death. The near match between the years covered by Beveridge's biography and the autobiography allows for an exploration of where notes made by Laing at the time, diverge from his retrospective account many years later. The tendency by Laing to overplay the uniqueness of his insights and to play down the contribution of those around him is a theme of recent Laing scholarship that is brought out, once again, in this work by Beveridge. The complexity of this issue is well handled, and to read this book is to be left in no doubt that Laing was a serious and committed thinker from an early date and some of the theories that were to come to fruition in The Divided Self were already being rehearsed at medical school in prize-winning essays. Evidence is presented in an analysis of what Laing both read and retained in his library, of a precocious and driven scholar who, unusually for a medical student, was more interested in literature, theology and European philosophy than in science. Laing read and wrote daily, denying himself sleep in his pursuit of the frontier of philosophy which he hoped to extend. The Glasgow of his formative years was fertile soil to cultivate these interests, with the young Laing joining a mixed group of older men - including some such as Abenheimer and Schorstein with direct connections to thinkers admired by Laing such as Jaspers and Heidegger - to discuss philosophy.

The final ingredient for the mixture that was to produce Laing's seminal 1960 publication was clinical practice and research and, as in the autobiography, the experiences of the neurosurgical unit, the army psychiatric unit, the mental hospital, the department of psychological medicine and the move to the Tavistock Clinic are all covered in detail. The 1950s was a pivotal decade for modern psychiatry, adding to the interest of this book. Again, a fascinating aspect of this book is the comparison of notes made on patients contemporaneously, to be found in the Laing archive, with the later incorporation of the shortened, anonymised and reinterpreted case histories in Laing's published work. An impression is formed of a dedicated clinician trying to do the best for each individual in his care. The approach continues with Laing's move to London despite Laing having doubts as to his initial practice there, removed from his primary interest in the psychotic state.

Of particular interest for myself is the account of Laing's 18 months at Gartnavel Royal Hospital and his relationship with the Physician-Superintendent, Angus McNiven, there. We are at the tipping point of institutional psychiatry and Laing's contribution, along with others, to the movement towards closing the asylums is one of his main legacies, along with the strong advocacy that the severely mentally ill have a legitimate voice.

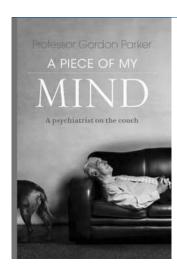
The book leaves us with Laing – a psychiatric Icarus (see end of Chapter 1) – fully winged and about to take flight with the

publication of *The Divided Self* in 1960. We are left with an insightful and fresh account of the making of this particular psychiatrist, with the biases of our knowledge of Laing's subsequent divisive reception kept to a minimum.

A finer memorial birthday present would be hard to imagine.

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A Piece of My Mind: A Psychiatrist on the Couch

By Gordon Parker. Pan Macmillan Australia. 2012. AUD \$13.63 (pb). 347pp. ISBN: 9781743345320

What makes a good psychiatrist? Is it a bonus to like your colleagues? What does depression mean? What is it like to be a professor of psychiatry? Disparate questions find disparately satisfying answers in this lively but disjointed book, part memoir, part polemic, by a grizzly Australian academic who early on defines his role with consummate clarity as one of 'a prickly bastard who keeps asking questions and won't shut up'.

The biographic opening speeds through early decades, carried by a fluent, informal style. Parker's emotive recall of events is interesting; his use of 'closure', for example, seems to overlap with justice and satisfaction. En route from medical school to professorial chair, via a detour into comedy writing, he paints a fondly detailed picture not only of Australian psychiatry but of Australian culture at an interesting time. Readers familiar with the world of psychiatry – not necessarily Parker's target audience – may take perverse comfort from the fact that stigma, petty managerialism and vested interest have long bedevilled the efforts of psychiatrists all over the planet. Parker delights in bringing them to book, although his method is curiously unfunny for a comedy writer.

His definition of a good psychiatrist is unashamedly Hippocratic. Like any other branch of medicine, he contends, the art and science of the craft lies in pattern detection; the recognition of shifts and signs in the suffering that enable a physician to do something useful. Where the suffering is mainly mental, the patterns may be much harder to recognise. He expands on this idea as he approaches his main theme, the diagnosis and treatment of depressive disorders. Here the relaxed, thoughtful tone gives way to a didactic voice which is clumsy at first. A résumé of the research paradigms that led to his *grand oeuvre* reads like a cut-and-paste from 20 years' worth of grant applications, but over the next 60 pages the scholarly style finds its stride in a cogent analysis of depression as an illness. Those who worry about the medicalisation of distress in the DSM era