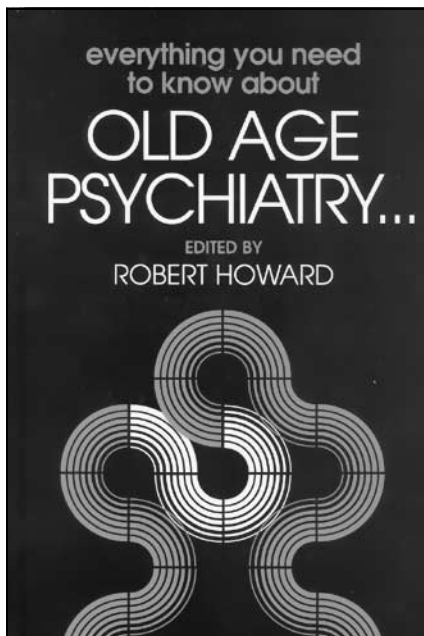


Book reviews

EDITED BY SIDNEY CROWN and ALAN LEE

Everything you Need to Know about Old Age Psychiatry

Edited by Robert Howard. Wrightson Biomedical. 1999. 292 pp. £45 (hb). ISBN 1 871816 38 6



Robert Howard presents the proceedings of another of the admirable Maudsley courses. We are not told its date, but evidence suggests 1998. It is an excellent update, although not cheap (except perhaps by comparison with attending the course) and given its ephemeral nature might have been more worthy of paperback format. The range is apt and wide. It includes genetics and prions; clinical, forensic and service aspects of the dementias; ethical questions; and a range of topics on functional disorders.

The contributors include many of the 'usual suspects', as well as less familiar names, and the standard of content and presentation is high. There is much nowadays that is technical and intricate, and some sections need close attention, but reading this book is real 'CPD'. None of the contributions reads like a mere verbatim text of a talk, and several must have

been extensively reworked or re-edited for the book (at least, one hopes they were, for they would have made difficult listening). Thus, the pitfalls of publishing 'conference proceedings' have been successfully avoided.

Daunting, alongside some of the science, are names of new drugs, many being no doubt electronic coinages. A course of some of the listed new antidepressants, at £30 or £40 per month, may cost twenty or thirty times as much as a similar course of amitriptyline. This raises the naughty thought of a trial of the effect on their depression of giving to some depressed old people, instead of the drug, an equivalent addition to their pension. Happily, since the book was published, some prices have come down somewhat from those quoted.

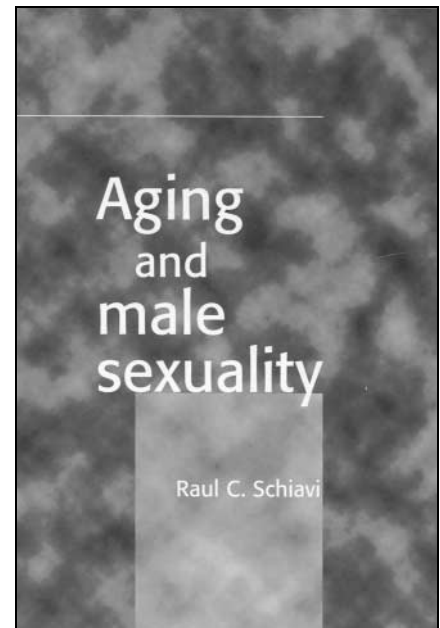
My only small gripe is the dumbed-down title: Aubrey Lewis would shudder, and rightly. The editor writes that he chose the title in a "particularly cheerful and expansive state of mind", thereby leaving much to the imagination. But no one should be adding to the dumbing down that is already ubiquitous in academia, and the book, good as it is, is a long way from being 'everything'. Perhaps Dr Howard might choose an alternative for the future volumes (and courses), which one hopes that he will continue to produce.

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Aging and Male Sexuality

By Raul C. Schiavi. Cambridge: Cambridge University Press. 1999. 253 pp. £27.95 (hb). ISBN 0521 65391 6

This book goes a long way towards disentangling the complexities of an increasingly common clinical situation. Imagine a 70-year-old man with depression, complaining that he is having problems achieving and maintaining erections. He suffers from diabetes, and is taking anti-hypertensives and an antidepressant. How



much of his sexual dysfunction is a complication of his diabetes, a symptom of his depression, a side-effect of his medication or just to be expected in a man of his age?

In this excellent book Schiavi reviews the available research findings to elucidate the current state of our knowledge in this field. This involves a truly multi-disciplinary overview, including the science of ageing in the introductory chapters to give some estimate of how the 'healthy' ageing process affects sexual behaviour in men. Later chapters attempt a thorough and systematic review of the factors that can affect sexual function in older men, including medical and psychiatric illness and the effects of drugs (including alcohol). There is even a very welcome chapter reviewing what is known about the sexuality of older homosexual men, although this partly serves to demonstrate the paucity of research in this area.

The book's main strength is the author's insistence on the importance of the social, cultural and relationship context of sexual behaviour. In an era of sexual medicine, when male sexual dysfunction seems to have been reduced to a mechanistic problem to be solved by swallowing a tablet of sildenafil, it is refreshing to find a leading researcher taking this stance. He deplores the use of outcome measures such as coital frequency when motivational and affective dimensions of the sexual experience are ignored. He berates clinics that ignore the organic factors so common in the

sexual problems of the ageing male, but equally criticises medical approaches where the evaluation of psychological factors is "cursory at best", with the focus on the penis at the expense of the individual and the context of his life. This is emphasised by the helpful and judicious use of case histories to illustrate the full range of presenting problems.

This is an authoritative yet readable book that should be helpful not just to those working specifically with older patients or in psychosexual clinics, but to any clinician interested in sexuality and how people in our society come to terms with the physical and psychological changes of ageing.

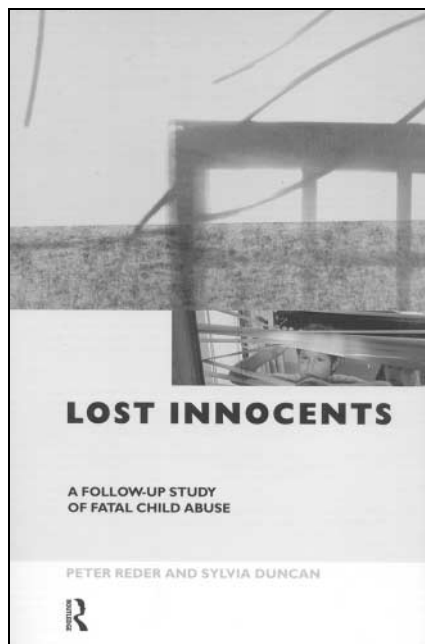
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Lost Innocents: A Follow-Up Study of Fatal Child Abuse

By Peter Reder & Sylvia Duncan. London: Routledge. 1999. 178 pp. £14.99 (pb). ISBN 0 415 20270 1

This excellent book reports on the authors' second major study into fatal child abuse in the UK. It is a follow-up to their report, *Beyond Blame* (Reder *et al*, 1993). The book describes the findings of their study of the 112 part 8 reviews (a part 8 review is the procedure carried out by local area child protection committees and local authorities after a child has been killed or seriously harmed by his or her caregivers) reported to the Home Office during the year ending March 1994.

Reder & Duncan describe many significant findings, outline implications for practice and make important recommendations. For example, they suggest that many assessments of risk are inadequate, owing to a failure to obtain comprehensive information on caregivers. They discuss 'cumulative error', where a number of factors or decisions (each of which may be relatively harmless) may interact and compound each other so that the risk of a disaster is greatly increased. The need for a coherent framework to guide assessments is discussed. Strong arguments are made for the adequate resourcing of services and proper



training and supervision of professionals. A revised model for case reviews, which would both allow for disciplinary action where appropriate but also enhance opportunities to learn how to improve practice, is considered.

This book, attractively presented, with well-chosen case vignettes and excellent reference list, author and subject indexes, should be required reading for health, social services and other professionals involved in working with children, especially (but not only) in child protection work. Professionals (including psychiatrists) who work in adult services should also read it, as they may be in a position to make important contributions to the identification and prevention of child abuse. Those responsible for planning services and allocating resources also need to consider the messages of this study. It is to be hoped that the findings of Reder & Duncan, along with other recent work in this area (e.g. Dent, 1998), will help in developing services to protect children from harm.

Dent, R. (1998) *Dangerous Care: Working to Protect Children*. London: The Bridge Publishing House.

Reder, P., Duncan, S. & Gray, M. (1993) *Beyond Blame, Child Abuse Tragedies Revisited*. London: Routledge.

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The Use of Psychological Testing for Treatment Planning and Outcomes Assessment (2nd edn)

Edited by Mark E. Maruish. London: Lawrence Erlbaum. 1999.

1507 pp. £200.00 (hb). ISBN 0 8058 2761 7

This large volume is divided into four sections. The first begins with three useful chapters on the use of psychological tests in psychiatric screening, treatment planning and outcome evaluation, respectively. The section also contains good chapters on statistical procedures for single case designs and for group data, and a rather pedestrian chapter providing guidelines for the selection of tests for planning treatment and assessing outcome.

The bulk of the book consists, not, as one might expect, of review of available instruments for use in different circumstances, but of chapter-by-chapter reviews of particular instruments. In themselves the chapters are a useful source of information concerning these tests. However, no rationale is provided for the choice of the instruments reviewed or the exclusion of alternatives. Some are obvious choices, such as the Beck scales and the immortal Minnesota Multiphasic Personality Inventory and Rorschach test. For others, I would have liked to have been convinced that these were the best available measures of their kind. From the point of view of a UK reader, the choice reflects the North American origins of the book and omits such widely used measures as the General Health Questionnaire. Another example is the assessment of marital satisfaction by means of the Snider and Aikman measures, whereas in the UK the Golombok-Rust Inventory of Sexual Satisfaction is preferred. Interestingly, the only measure of British provenance is the Hamilton Depression Inventory, an Americanisation of Max Hamilton's standardised clinical interview published in 1960.

There is a loose structure to each chapter which involves a description of the development of standardisation, psychometric properties, uses and interpretation. Beyond this the editor appears to have left it to the discretion of individual authors. Some have included case examples, some problems and limitations.

A book of this size is unwieldy. Even if one accepts that it is unlikely to be anyone's choice of bedtime reading it is unnecessarily bulky, even as a reference work. Fewer and fewer people work with both children and