know already, that the perception of complex stimuli lies in the brain of the beholder.

What are the functions of a review? I suggest that they are to indicate what a book is about, to place it in its general psychiatric context and to give a personal evaluation. These functions involve increasing degrees of subjectivity, but this is unavoidable. Books are reviewed by people who have some expertise in the field under review. One could hardly fault Professor Stengel in this. His extensive knowledge ranges from organic psychiatry to psychoanalysis; he has had his own University department, and has done valuable clinical and epidemiological research. His opinions merit attention, therefore, even if they are not universally accepted.

Just as the writers of one of the letters you publish point out that they are entitled to their opinion of a reviewer's views, others of us are entitled to our opinion of their opinion of a reviewer's views. Possibly they are over-sensitive to criticism of writings with which they feel themselves to be in some way involved.

Opinions on the value of contemporary writing are notoriously unreliable. Future generations of students and young psychiatrists will decide their reading for themselves. I doubt whether in 1978 any attention will be paid to what will be regarded as the boring and out-of-date controversies of the previous decade, and, as Dr. Anthony points out, young psychiatrists of the present are not incapable of finding their way to writings, including those under discussion, if they find them helpful.

SIDNEY CROWN.

Department of Psychiatry, The London Hospital, Whitechapel, London, E.1.

DEAR SIR,

I have followed with interest the correspondence about Professor Stengel's review of Professor Sir Aubrey Lewis's book.

Your critics of Professor Stengel's review seem disturbed about the recruiting of young doctors into psychiatry "for the next 200 years", but one of the main reasons why doctors have not been attracted to psychiatry in the past must surely be our nearreligious preoccupation with the "gospel" according to Freud, Kraepelin and the rest, which has at times made us a laughing stock in the eyes of our medical and scientific colleagues.

It will be a sad day for twentieth-century psychiatry when an eminent professor is not allowed to be less than charitable about the writings of an equally eminent colleague, and it is to be sincerely hoped that no attempt is being made to elevate Sir Aubrey's excellent essays into yet another paternalistic fount of wisdom. It was therefore unedifying, if unfortunately predictable, to read the petition against Professor Stengel's review by the senior and junior Common Rooms of the Maudsley Hospital, who doubtless feel that their graceful gesture to Sir Aubrey is being criticized.

I hope that these two distinguished men will be allowed to express their opinions in peace, and that the nineteenth-century scene of a psychiatrist's disciples' petitioning against critics will not recur in your correspondence columns.

PETER HALL.

G. W. GRUMET.

Powick Hospital, Powick, nr. Worcester.

PSYCHODIAGNOSIS IN SCHIZOPHRENIA Dear Sir,

I was dismayed to read in the January, 1968, issue a review roundly condemning *Psychodiagnosis in Schizophrenia* by I. B. Weiner. I have used this text during the last year and my impressions of it are in total disharmony with those of the reviewer. I believe Professor Fish's criticisms of this book to be reckless and needlessly abrasive, and to betray at best a scant familiarity with its contents. Dr. Fish's wholesale condemnation of American psychiatry and clinical psychology certainly has no place in a journal of this calibre.

722 West 168th Street,

New York, N.Y., 10032.

DEAR SIR.

I am sorry that Dr. Grumet finds it necessary to suggest that I do not read the books I review. The fact is that Weiner claimed that it is possible to use psychological tests in the diagnosis of schizophrenia. The general view of psychiatrists and clinical psychologists in this country is that psychodiagnostic tests are not of much value as far as the problem of schizophrenia is concerned. I see no reason to alter my criticisms of American psychiatry. Practically every European psychiatrist with a knowledge of American psychiatry is aware that American psychiatrists and clinical psychologists have an extremely wide concept of schizophrenia, which is so wide at times as to be almost meaningless.

FRANK FISH.

University Department of Psychiatry, 6 Abercrombie Square, Liverpool 7.

HUMAN SEXUAL RESPONSE

DEAR SIR,

I regret that a journal of repute such as The British

Journal of Psychiatry should see fit to publish a comparatively favourable review of the book by W. H. Masters and V. E. Johnson entitled Human Sexual Response (Journal, February, 1968, p. 259). Concerning the ethical aspect of the experiments described, each of us must decide for himself. To me they represent such a degradation of the human spirit as to alarm me for the future of our cultural heritage.

Concerning the uselessness of the results obtained there should be no hesitation. Your reviewer describes the object of the enquiry as an investigation into "what physical reactions develop as the human male and female respond to effectual sexual stimulation, and why do men and women behave as they do when responding?" Experiments in which prostitutes are encouraged to masturbate in public, and paid volunteers to copulate before observers cannot answer these questions. (Do these questions really need to be asked?) Normal coitus is an expression of love between two human beings, and privacy and respect for each other is of its essence.

The authors claim that the participants in their experiments only differed from the general population in having a "basic interest in and desire for effectiveness in sexual performance". This is manifestly untrue. The "general population" share this interest but have more sense and decency than to volunteer for such exhibitions.

Most of us know that intercourse can and does become a more joyous and wonderful experience, but this comes from a life shared together with increasing love and loyalty to each other. A preoccupation with physiological details is one way of stultifying this natural development and remaining at an adolescent stage.

I do not know whether your reviewer or the authors of the book will consider this letter worth answering. But if they do, I would ask them before replying to read, and ponder, two sonnets of Shakespeare's: one begins with the line:

"The expense of spirit in a waste of shame." The other:

"Let me not to the marriage of true minds

Admit impediments."

In these matters the poets are better teachers than physiologists.

M. O'C. DRURY.

St. Patrick's Hospital, James's Street, Dublin 8.

DEAR SIR,

In his letter about my review of Human Sexual Response, Dr. Drury complains that the results reported in the book are useless. It could indeed be argued that they have little immediate value in psychiatric practice, but is this not a narrow yardstick of merit in research? Dr. Masters and Mrs. Johnson have, with sensitive regard to technical difficulties and to ethical objections by others, established a method of studying human sexual function which complements (or transcends) those of personal introspection and anecdotal inquiry. The text of their book makes it clear that the authors were well aware of sampling problems and of the fact that these were not fully solved.

Relevant psychological studies are needed to make the reported observations more useful to the psychiatrist. In the meantime, the anatomical and physiological findings already available are likely to be of direct value to doctors who have to advise patients on such matters as the optimum mechanical conditions for impregnation, or the risks of sexual activity during pregnancy or by hypertensive men. These are prosaic questions, but they need to be answered, and the poets cannot help us with them. The contents of *Human Sexual Response* appear to me as technological advances, which like the now respected Kinsey Report can do our cultural heritage no harm.

DENIS PARR.

Lady Chichester Hospital, New Church Road, Hove 3, Sussex.

PSYCHIATRIC SERVICES FOR THE DEAF DEAR SIR,

Following Dr. Denmark's letter in your last issue I wish to apologise for the serious omission I made in not mentioning his clinic. I think it is the only unit in the country which is treating deaf psychiatric patients, and I know Dr. Denmark has been pioneering this work for many years.

It seems impossible to impress the Ministry of Health with the importance of this aspect of psychiatry, although there are many potentially employable and treatable patients who are languishing for lack of treatment facilities.

LOUIS MINSKI.

16 Hillside Road, Cheam, Sutton, Surrey.

NATURE, NURTURE OR JUST HAPPENINGS

DEAR SIR,

Whatever else one may think of the complex scene of contemporary psychiatry, one has had a glimpse of

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