

with scrupulous rigour. Reactions to every conceivable form of death are considered, including those to miscarriages, abortions, still births and cot deaths. Every testable theory is tested.

Psychoanalysis gets pretty short shrift, but attachment theory is more sympathetically dealt with. Essentially, as we all knew anyway, the greater the degree of attachment, the more intense the grief. Archer points out more than once that, in cultures where infant mortality is high, mothers do not form strong attachments to their children and consequently do not grieve their death. Murray Parkes, the British authority on grief, is respectfully and repeatedly cited, as are the Stroebe, whose dual-process model of recovery from loss, involving an oscillation between facing grief and breaking bonds and denial, avoidance and controlled distraction, is extensively discussed and recommended. Archer believes, as do many psychologists, that our preoccupation with the necessity for grief work, which, he says, is sometimes confused with rumination, has deflected us from considering the value of indulging in comforting fantasies, becoming immersed in new interests and even denial.

Although the word evolution is placed prominently in the book's subtitle, the topic of evolution surfaces only in Chapter 9, and even then, not very convincingly. The value of evolutionary theory is that it generates testable hypotheses. These include: that we are programmed to grieve most intensely for those with what is called the highest reproductive value, that is, those who would have been the most able to reproduce our genes; that we would grieve more for kin than for non-kin, and more for the young than for the old; and that those parents least able to reproduce their lost child would grieve more, that is, older parents would grieve more than younger ones. The trouble with this kind of hypothesis-testing is that, for one reason or another, there are always exceptions to the rule.

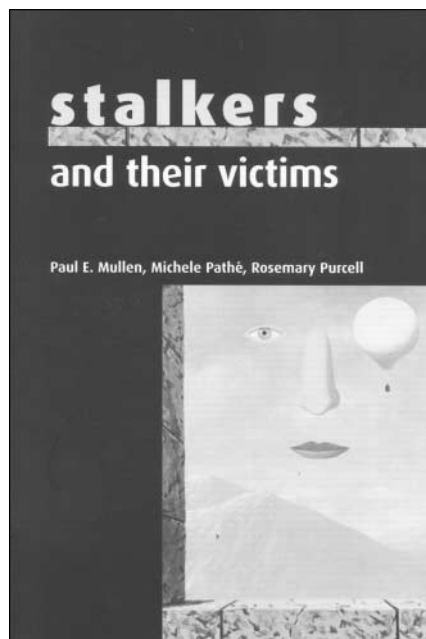
This has to be the longest and most comprehensive study on grief ever written, but despite its length, I had no difficulty reading it from cover to cover, and I learned a lot about a lot of things along the way. It is a mine of information, and there are 40 pages of up-to-date references. I did sometimes wonder why it was necessary to examine such a simple phenomenon in such meticulous detail. This should remain the definitive text on the

subject for some years to come, which I imagine was Archer's intention.

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Stalkers and Their Victims

By Paul E. Mullen, Michele Pathé & Rosemary Purcell. Cambridge: Cambridge University Press. 2000. 310 pp. £24.95 (pb). ISBN 0 521 66950 2



Stalking has rapidly gripped the popular imagination, partly because some of the facts are so good that the media does not have to make them up. For example, a US study of the enclosures sent in mail to Hollywood celebrities and US Congress members included syringes of blood and semen, a bedpan and a coyote's head.

We are used to the idea of celebrities being stalked, but there are many more obscure and unusual victims, for example, the incarcerated armed robber who received considerable media exposure and was subsequently inundated with letters from adoring women. One became so persistent, even flashing her genitals at him during a non-contact prison visit, that the inglorious victim had to appeal through his lawyer for the 'hero-worship' to stop.

Hence, this is one of those rare books, absolutely essential for forensic psychiatry seminar reading lists, which if browsed in

the library, you will take home because you cannot put it down.

Although this deserves a wider audience, because the stories it tells are more gripping than any crime bestseller, perhaps only in a work by academic psychiatrists would one find the following: "We have come to realise that many stalkers inflict considerable pain and damage on themselves in the pursuit of their victim". While the popular media has devoted thousands of column inches in pursuing the curiosity of stalking, nowhere else will you find the kind of dispassionate attempt at understanding that rigorous behavioural science, as exemplified by this book, can bring to a forensic phenomenon.

But the problem of trying to embark on the study of a behaviour that is as yet not properly defined can also make objective study appear ponderous. For example, the attempt to operationalise the definition of stalking – "the behaviour should consist of at least ten separate intrusions and/or communications, the conduct spanning a period of at least four weeks" – appears oddly unfeeling to victims.

The authors, all from Monash University Department of Psychiatry in Australia, acknowledge that "nobody would want to advise a terrified victim who has had a man stand outside the house looking up at the window on nine consecutive nights that, according to Mullen *et al* (1999), there was another night to go before he or she could lay claim to being stalked". On the other hand, it is only in a book like this, where adherence to data is the guiding principle, that you can uncover the truth. For example, stalking is in fact not a modern phenomenon at all but is centuries old, with some surprising practitioners, including Kierkegaard, the Danish philosopher.

The work is comprehensive, including discussion of related phenomena such as stalking by proxy, cyber-stalking and false victims of stalking, with some excellent practical advice on management of stalking from both the professional's and the victim's standpoint.

The few weaknesses include a neglect of the issue of assassins, who are one subtype of stalker, albeit rare, but whose evidence suggests are often evaluated by mental health professionals at some point before they step out on the path toward assassination. Also, although the research is relatively meagre, there is a literature on predicting future violence from threatening letters, including some useful anecdotal

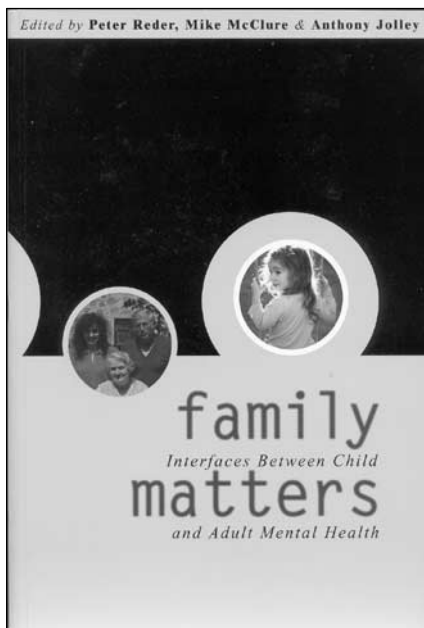
comments from US private and public agencies involved in threat management, which the authors appear to believe is not academic enough to include fully.

The final problem is common to practically all accounts of bizarre and ultimately self-defeating behaviour: a full understanding of why stalkers do it still seems elusive. Perhaps the authors could have elaborated on what a good theory of motivation might look like, even if it is as yet unattainable. Certainly the authors' own classification of stalking, based on differing motivations, is the most convincing of the many rival taxonomies, but there remains an abyss between the theoretical understanding advanced here and our ability to predict what stalkers will do next.

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Family Matters: Interfaces Between Child and Adult Mental Health

Edited by Peter Reder, Mike McClure & Anthony Jolley. London: Routledge. 2000. 347 pp. £15.99 (pb). ISBN 0 415 22218 4



Some time ago, while teaching an MRCPsych course about family influences on psychiatric presentations, I discovered that very few of the trainees had ever witnessed a family

interview, which was generally seen as the province of child psychiatry. Shortly afterwards, the teenage sister of a young woman with schizophrenia unexpectedly hanged herself. The staff team sifted through the possible explanations for the link between the sisters' mental states and how the suicide might have been prevented by the younger girl's greater involvement in her sister's management. Had she been adequately included in discussions about the possible causes of schizophrenia, its likely course, the risks for others in the family and so on?

This book arose out of a conference held in 1998 called 'Interfaces between child and adult mental health'. It aimed to acknowledge the mutual interaction between children and parents, to recognise the various ways that children's and adults' problems overlap and to consider implications for service delivery.

As the editors state, there are a number of theoretical and practical reasons why psychiatry has emphasised the differences between age groups rather than their interrelationships. These include differences in the theories and knowledge bases that dominate the specialities, the organisational structure of services and the way professionals are trained. The authors cite the example of a single mother with depression who has a 7-year-old child with a profound sleep disturbance. How likely would it be that the management of both would be fully integrated?

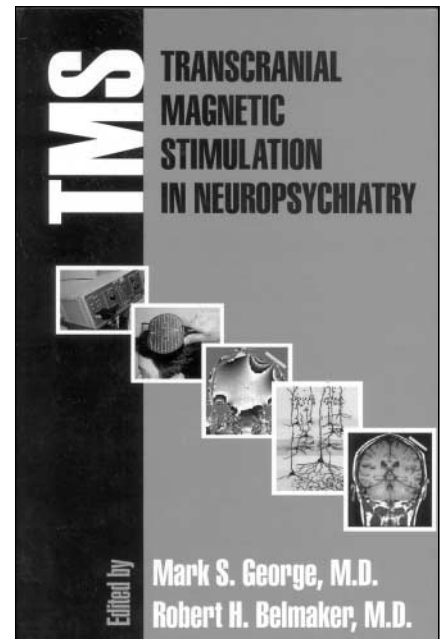
In many ways this book is much better than most publications of conference proceedings. Each chapter has been carefully edited and the result is an easy-to-read, uniform style with lots of clinical examples. Extra sections have been added to cover topics not included at the conference, many from highly regarded experts. Most importantly, a section on service developments provides six illustrations of attempts to involve children in the management of their parents' mental health problems and of effective liaison between child and adult services. Finally, a section on future directions proposes ways to address the interfaces and integrate service delivery.

The result is a very important book for psychiatrists across the life span, with a number of ideas for service development.

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Transcranial Magnetic Stimulation in Neuropsychiatry

Edited by Mark S. George & Robert H. Belmaker. Washington, DC: American Psychiatric Press. 2000. 298 pp. £33.50 (hb). ISBN 0 88048 948 0



The notion that transcranial magnetic stimulation (TMS) is an exciting topic for research and clinic has gained widespread currency in recent years. This may be because of its vaguely 'New Age' connotation (p. 9), or because of hopes of finding an alternative to physical treatments with a poor public image, such as electroconvulsive therapy (ECT). In the UK, the Institute for National Health Service Research and Development's Health Technology Assessment Programme has, for example, decided to commission a study comparing TMS with ECT, a clear sign not only that the policy-makers have taken note, but also that research planning is driven by factors external to the logic of the scientific process.

The editors have assembled a number of the most active workers from the USA, Israel and Germany, who give an up-to-date description of the field. Basic sciences are covered well by Bohning, a pioneer of the use of TMS in combination with (functional) magnetic resonance imaging, and Belmaker *et al*, who deal with the basic pharmacology of the method. Practical issues, such as safety, are comprehensively presented. One of the most informative chapters is that of Ziemann on basic neurophysiological studies. The book redresses