

Another disturbing finding is the high drop-out rate of trainees during the survey. No predicting factors for drop-outs were found and these trainees valued the teaching sessions as much as the attenders. Clearly holidays, study leave, MRCPsych examinations and changeover of jobs has an effect on the attendance but this would not appear to be the whole answer. Again, a few trainees reported that they were being actively discouraged from attending the sessions by some consultant psychiatrists. This lack of enthusiasm for psychological treatments by consultant psychiatrists has been reported by other workers.<sup>6,7</sup> Despite this attitude of senior medical staff it is encouraging that over 50% of the trainees have continued to attend the sessions in the post-survey period. Evaluation of the sessions did mean that major changes were not made to the teaching programme in response to the drop-out rate and that after the survey the attendance has steadily increased. Such evaluation of teaching would seem to provide vital information to all psychiatrists involved in teaching but appears to be performed relatively infrequently.

This study demonstrates the usefulness of objective measurement in planning and assessing teaching programmes and the ease of administering most measures. Such techniques may have a wider applicability for all consultant psychiatrists involved in postgraduate teaching. It also demonstrates that trainee psychiatrists have little knowledge of training in behavioural psychotherapy despite the College's recommendations and that even limited teaching input can significantly alter this knowledge. Behavioural psychotherapy, however, is concerned with practical treatment approaches and further studies are

being planned to examine the acquisition of behavioural therapeutic skills by trainee psychiatrists.

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## Book Reviews

**Alcohol—A Balanced View: Report from General Practice 24.** London: The Royal College of General Practitioners. Pp 57. £5.00

This Report from the Royal College of General Practitioners was released a few weeks after our own College's Report *Alcohol our Favourite Drug*. They complement each other extremely well. The General Practitioner's Report is designed principally as an aide and encouragement to the family doctor and demonstrates the value and importance of taking a greater interest in the effect of alcohol on the patient's health. It points out that the primary health care team is ideally placed to recognise alcohol related problems at an early stage and identify hazardous patterns of drinking. Doctors are notoriously reluctant to become involved in working with problem drinkers. This negative view may in the past have arisen because the focus has been on the 'alcoholic' rather than on alcohol as hazardous to health. The present report takes the view that injudicious drinking can be viewed as something akin to blood pressure which is often normal and causes no concern, yet when raised can cause serious illness. The book provides advice about

taking a drinking history that is both brief and realistic and describes techniques of drawing patients into a therapeutic alliance with their doctor in seeking ways of reducing his or her drinking. There is much clear practical advice about the management of alcohol problems.

The book ably and succinctly spells out the extent of alcohol related problems in the United Kingdom. There is a particularly interesting discussion on the question of relative risk at different levels of consumption. This is something most patients wish to know about, they want to know the chances of damage associated with a particular course of action.

The authors do acknowledge that rescuing the casualties of drinking will never suffice and that the root causes of the problem such as price and availability needs to be confronted by the population and by politicians. This book does not dwell on these issues which are addressed much more fully in the Royal College of Psychiatrists' Report. This position is of course justified by the focus on the practical and clinical contribution which the general practitioner can make. They might, however, have given a little

further space to describing the ways in which the general practitioner can use his considerable authority in the community, for instance to ensure that the public health aspects of increased availability are fully considered when a new off-licence is proposed in a neighbourhood or extended licences are sought.

The content of this report points the direction for the future of general practice. It is likely that there will be a growing concern with health promotion and techniques for persuading patients to change their habits and adopt less damaging ways of life. The report should help to dispel much of the pessimism which so often attends the management of alcohol problems and place the issue in the forefront of the mind of any concerned and competent physician. It is hoped that the recommendations in this book will be widely read and have an impact on both undergraduate and postgraduate training for general practitioners.

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**Let's Drink to Your Health** by Ian Robertson and Nick Heather. Leicester: The British Psychological Society. Pp 154. £3.95

The local bookshop these days displays along with sections devoted to cookery, travel and even literature, shelves and shelves of books concerned with 'self improvement' involving topics such as weight reduction, combating shyness or techniques for looking younger. This book is one of this increasingly popular genre concerned with self help.

It is addressed to anyone whose drinking is causing them problems, although it could be read and with advantage by anyone who is a regular drinker. Unfortunately the distinctly problem orientated opening might even deter some who were drinking far above the guidelines contained in the book and yet did not feel that their consumption had reached 'problem' proportions. On the outside cover the book also states "Are you an alcoholic? then this book is definitely not FOR YOU". The book is therefore concerned with reducing alcohol consumption to manageable and enjoyable proportions.

The authors point out that it is a 'doing book' and there are lots of quizzes for the reader to try and diaries and resolutions for him or her to write down and keep. I suspect the style might appeal more to a relatively middle class reader, although a similar Scottish Health Education Group Booklet, also by these authors on the same theme, proved acceptable to a very wide readership. Phrases such as "decreased penile tumescence" used to explain the meaning of reduced sexual function might seem a little removed from the everyday language of the people. However, for the most part each issue is clearly and often amusingly explained. Illustrations and cartoons are introduced to extremely good effect.

Injudicious drinking, like smoking and overeating, are habits that have become damaging to health. These habits are often extremely difficult to change and this book offers

practical advice about the skills which are needed to make and sustain resolutions. We can all identify with the difficulties involved in changing our way of life and that the problem drinker is not uniquely weak willed in finding it hard to make the necessary changes. The chapters devoted to techniques for cutting down and finding alternatives to alcohol and coping with relapse are particularly helpful. This would be an ideal book to give to the patient who, while not physically dependent on alcohol, has recognised that his or her drinking has become a troublesome rather than an enjoyable component of life. It should also find a wider readership amongst those who drink regularly and would benefit from becoming more aware of the nature of alcohol as a drug and guidelines about sensible drinking practices. I hope it will be widely available in the bookshops.

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**A Family Affair: Helping Families to Cope with Mental Illness.** Formulated by the Committee on Psychiatry and the Community of the Group for the Advancement of Psychiatry (GAP). New York: Brunner/Mazel. 1986. Pp 102. \$17.95 (cloth); £12.50 (paper)

The GAP is an unusual organisation, composed of independent groups of US psychiatrists who produce periodic reviews of important developments in their area of expertise. These reports usually present a middle-of-the-road opinion typical of a committee product. *A Family Affair* is an exception to this. A populist approach is employed. The book reports on more than 450 letters solicited by the well-known US agony aunt Abigail Van Buren or 'Dear Abby'. Families living with a member diagnosed as 'mentally ill' were invited to write in about their specific problems associated with that person. As expected, the letters highlight exceptional cases of distress, deprivation and inadequate professional services. While all of these issues have been clearly documented in numerous systematic surveys such as the 1974 National Schizophrenia Fellowship survey of Creer and Wing and the recent work of Jane Gibbons in Southampton repetition in this format helps to dramatise the plight of so many families.

This compilation of letters is well-edited and should be compulsory reading for all mental health professionals, social workers as well as medical students and general practitioner trainees. Although it is currently fashionable to acknowledge the crucial role of the family in mental health care, few services have developed comprehensive programmes for training families in the caregiving roles expected of them. Unfortunately, this volume does not include detailed descriptions of effective family programmes. Indeed, a long list of books "for psychiatrists to recommend to family members (*after they've read them themselves!*)" is provided. A briefer annotated bibliography may have been a more effective strategy to promote action on this long-neglected issue.

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