Book Reviews

C. Cotman (Ed.).

Synaptic Plasticity.

New York: The Guilford Press, 1985.

Pp. 579.

Reviewed by Wickliffe C. Abraham.

The nervous system has a remarkable capacity for modifiability, or plasticity, that is expressed as a result of experience and in response to injury. Such characteristics have not always been appreciated, in part because of the static neuroanatomical techniques of the past, plus the knowledge that new nerve cells are not made in the adult. It is now abundantly clear, however, that the modification of existing neurones more than makes up for their mitotic limitations. Synaptic Plasticity, edited by Carl Cotman, brings together 16 reviews of this field of research, divided into three topic areas: synaptic plasticity evoked by injury, synaptic plasticity as a natural neural process, and interventive approaches to nervous system repair.

Terminal sprouting to fill synaptic sites left by degenerating neurones is observed throughout the neuraxis, and is detailed in a number of chapters. Goldberger and Murray give additional attention to larger issues, such as why neonatal recovery is better than in the adult and whether structural responses are critical for functional recovery. The other major question, dealt with somewhat less adequately in section 2, is whether structural plasticity also plays a role in normal learning and memory formation. Several interesting correlations between neural and behavioural changes are provided; however the general case, put most strongly by Greenough and Chang, is not yet completely convincing.

The final four chapters present the "wave of the future" research in neuroscience, that is the grafting of brain tissue to promote recovery from specific neural disorders. These chapters provide fascinating overviews of the techniques, problems, and possibilities associated with this exciting new development in brain research, and are a delight to read.

Overall, this is one edited book that hangs together well, containing well-written contributions with sufficient background for the nonspecialist. My chief disappointment was the failure of many of the contributors to address in more depth the larger issues. The disappointment is soothed in part, however, by the occasional gem such as Tsukahara's elegant work on the red nucleus, which directly tests whether sprouting is critical to either injury response or conditioning in this sytem. The other main weakness of the book is its concentration on the structural aspect of synaptic plasticity, essentially ignoring the whole area of research on the functional modifiability of already existing synapses. Finally, one should be aware that the chapters are now somewhat dated, with references of the pre-1985 vintage. These considerations aside, the book represents an excellent resource on structural synaptic plasticity and is highly recommended for advanced students and researchers in allied fields.

Steve L. Ellyson and John F. Dovidio (Eds.). Power, Dominance and Nonverbal Behavior. Montana: Springer-Verlag, 1985. Reviewed by Gabrielle M. Maxwell.

This edited volume is based largely on papers presented at a symposium. Unfortunately it also reads like it. The papers represent very disparate viewpoints and lack synthesis or a critical assessment of the alternate viewpoints and methodologies. For example, an evolutionary perspective which regards dominance displays as biologically based and related to an inherited success-striving trait which owes its survival to evolutionary selection guides the research questions of Weisfield and Linkey in chapter 6. On the other hand, Whitehurst and Derlega present very compelling evidence in Chapter 9 for a perspective in which situations and social norms determine the expression of dominance behaviour. They show that the same people respond differentially to situations: in some instances displaying dominance or submissive cues and in other instances, not displaying such signals. The reader might have expected an attempt to reconcile such a major theoretical divergence yet nowhere is there a discussion of the validity of these contrary reviews or any indication that the diversity and range of evidence cited by the papers, could be brought to bear on the issue.

Given such a lack of theoretical integration it is not surprising that other more minor weaknesses irritate, such as the failure of the authors to refer to one another's work. This results both in duplications and in contradictions about findings.

On the positive side there are some good articles. In the introduction, useful distinctions are made between power, status and dominance. Power, it is suggested is the potential for social influence and derives from the social position occupied by the individual in a given context while status refers to the relative position of the individual in a given social hierarchy. In contrast, dominance describes behaviour. Unfortunately the issue of whether such behaviour indicates stable individual differences or situational responses, is an issue never properly addressed. Harper's overview of non-verbal cues is a good review of the main encoding studies but is weak in its discussion of such moderating factors as gender (more effectively dealt with by Henley and Harmon in Chapter 8) or decoding issues. However, Chapter 7 by Dovidio and Ellyson is an effective review of decoding and the factors affecting decoding. Chapter 9 which presents an appropriately complex account of the role of touch as a function of control preferences, was rewarding and so was the challenge of Exline's presentation of data on the impact of tension leakage in the presidential debates in affecting the image formed by viewers.

On the other hand, I found Chapters 3 to 6, which approached dominance from the assumption of inherent phylogenetically determined patterns, either unconvincing or uninteresting to a reader who is concerned to understand the variety and complexity of human behaviour.

The final summary chapter by Patterson points to the extent to which males, those who are older, of higher socio-economic status, or in positions of high status, use non-verbal dominance cues as a method of maintaining relationships rather than as displays of underlying personality traits. I find his conclusions much more realistic in the light of the evidence, than the socio-biological convictions of the primatologists.

D. A. Soskis.

Teaching Self Hypnosis — An Introductory Guide for Clinicians.

Norton: U.S.A. 1986.

Pp. 220, \$53.85.

E. T. Dowd and J. M. Healey (Eds.).

Case Studies in Hypnotherapy.

Guildford Press, 1986.

Pp. 318.

Reviewed by Graham Geddes.

Hypnosis has always been a subject of interest to Psychologists and has been extensively investigated experimentally and used clinically, particularly in the United States. In this country, hypnosis has been brought to our attention by such people as Dr David Marks, (formerly of Otago University) and Dr A. Barabasz (formerly of Canterbury University), but the activities of the local branch members of the Australian Society of Hypnosis (A.S.H.) have stimulated interest and promulgated its use in recent times. Increasing numbers of Psychologists in this country are becoming interested in hypnosis, and any new literature in this area, will command consideration.

There is a large literature on heterohypnosis, but surprisingly little on autohypnosis, inspite of the importance placed on self hypnosis by Clinicians. A book on self hypnosis is therefore. to be welcomed. Soskis, a psychiatrist from Pennsylvania, has written a very readable and concise book on this subject, which has chapters on the nature of hypnosis, preparation and assessment of clients, and the details of a self hypnotic procedure, which is written down in transcript and can be read out to the client (although he uses a hand levitation induction, which practitioners in this country seem to have difficulty eliciting). There are also short chapters on using hypnosis with anxiety and other clinical problems, with the chapter on the use of hypnosis in pain control, being particularly good. He does not forget the importance of practice and follow up, and throughout, emphasises the use of self hypnosis in an ethical and responsible manner. He presents no empirical data whatsoever to support the effectiveness of this technique, but as an introductory book on self hypnosis for clinicians, it fulfills its purpose adequately, although ideally it should be used in conjunction with an introductory workshop. Experienced hypnotherapists will probably find little

new in this book and neither will those who have read Clarke and Jackson's book on *Hypnosis and Behavioural Therapy* with its chapter on self hypnosis.

Books devoted to case studies are not uncommon in the clinical psychology literature and can be sources of innovations in a particular area of therapy, but in my opinion, Dowd and Healy's book of *Case Studies in Hypno-*

therapy is somewhat disappointing.

There are 24 chapters on a wide range of clinical problems, including anxiety, depression, pain, sexual disturbances, family problems, and enuresis, but the most interesting sections are those dealing with the use of hypnosis in serious personality disturbances. In nearly all these case studies, hypnosis is used in conjunction with some other form of therapy, which often leaves the reader wondering whether it was really necessary at all, although some authors attempt to demonstrate, with little conviction, how it has been a special advantage. An objective of the book was to demonstrate the use of hypnosis with different theoretical orientations, and this to some extent was achieved, but the majority of case studies were orientated around a psychodynamic approach. Another aim was to provide details of the hypnotic procedures used, but most authors provide skimpy information in this area. None of the authors provide any data to indicate the effectiveness of the interventions, not even pre and post measures on common psychological tests. The book is not completely without value however, and could be of interest to those clinicians who are looking at the use of hypnosis in various clinical areas.

John Dawson.

The Process of Committal.

Auckland: Mental Health Foundation, 1987.

Pp. 178 \$8.

Reviewed by Robert G. Knight.

Civil committal is the process of involuntary detention and treatment of people who, in terms of the 1969 Mental Health Act, are mentally disordered. The powers given by the Act to control the lives of patients are considerable, and the decision to commit has such important implications that the fairness of the medical and judical procedures involved should be above reproach. In the major part of this

monograph, John Dawson, former legal officer of the Mental Health Foundation, documents the process of committal for a group of 207 patients in four North Island Hospitals. In addition, he provides background descriptions of the application of the Mental Health Act, and relates the New Zealand experience to research in other comparable countries. His report makes fascinating and often disturbing reading.

At present, committal is essentially the concern of lawyers and physicians. However, any professional working with acutely disturbed psychiatric patients will appreciate how much time and energy the procedures of formal admission consume. Decisions to commit are often made in crisis conditions. The patient being assessed may be disruptive, the family disturbed, and medical or nursing staff under considerable pressure to act quickly, with a minimum of useful information about the client. Dawson is sensitive to the practical problems of conducting a fair committal hearing. Something of the sense of urgency and chaos that may surround the involuntary admission of a patient is conveyed using actual quotations from applicants, patients, doctors, and judges. The blend of qualitative impressions conveyed by means of quotations, and quantitative data, heightens for the reader the reality of the committal situation: The conflicts of interest and the frequent confusion. Many of the quotes provide a compelling insight into the illogical way the committal standard is applied, but one of the most delightful was the reason given by one physician why a patient was not in need of detention: "He's not mentally ill. It's just that people are scared of big Maoris who get drunk and speak with an Irish accent, and punch people." (p.151).

The importance of this report is that it raises issues about the use of civil committal procedures in this country and talks of unfairness in institutions, not overseas, but right here in New Zealand. It would be a salutory experience for anyone involved in the day-to-day application of the Mental Health Act to consider the recommendations for reform, which the author outlines in the final chapter. These are sensible and conservative and could probably be accommodated by the current legislation. This is one of the best publications to come from the New Zealand Mental Health Foundation. Dawson's authoritative and accessible

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account of committal procedures deserves a wide audience, particularly as the Government prepares to enact new mental health legislation in the near future.

D. Gillies and M. Lader.
Guide to the Use of Psychotropic Drugs.
New York: Churchill Livingstone, 1986.
Pp. 532.
Reviewed by Gail Tripp.

As Gillies and Lader divided their book into three distinct sections, the same approach has been taken in reviewing their work.

Section one of the book (pp 1–35) is described by the authors as "an outline of psychiatry designed to acquaint the reader with these difficult to understand conditions." However in their assumption of limited knowledge on the part of the reader, the authors have simplified our understanding of these disorders to the point of inaccuracy. This, coupled with their use of inappropriate and outdated terminology, leads one to question the writers source of information. Unfortunately one is left wondering, as no references are cited in this or later sections of the book.

The second section of Gillies and Lader's offering provides a brief summary of the different types of drugs used in psychiatry on the basis of their classes. As in the previous section, their summary is so brief that it adds little to the overall usefulness of the book. Much of the material presented here is also covered in the final section of the book.

In this final section Gillies and Lader have

provided an alphabetical listing of drugs currently used in psychiatry, according to their official names. This section of the book is particularly comprehensive, with each drug discussed under the following headings; pharmacokinetic considerations, indications, dosage, mode of action, side effects, contraindications, precautions, drug interactions, dependence potential, overdose and points of interest. Details are also given on the drugs approved name, its chemical group, structure, as well as a list of proprietary products, the forms available and the appearance of each drug. My comments on this section refer not to content, but rather the presentation of this information.

Accessing the above information is made difficult by the authors failure to include an index. To obain information on a given drug it is necessary to know the drugs official name, and its correct spelling. Once this is established, one must look through the book for the appropriate page. As the drugs are simply listed alphabetically, and not according to class, there is extensive repetition of core information. This repetition lengthens the book unnecessarily. Finally I was disappointed that the authors did not take the opportunity to discuss the efficacy of different drugs with similar indications

The authors initially suggested that their book would be of most use to pharmacists and those in related professions. However, given the brevity of their section on psychiatric disorders I would caution any such reader to seek additional information. As a reference for psychologists, the format of the final section reduces the books usefulness.