

years', and that substantial additions have been made to each chapter. This makes a strong case for discarding well-thumbed copies of the second edition.

The relationship between sociology and psychiatry has mostly been an uneasy one. From the 1960s, under strong Marxist influences such as that of Foucault (who was really a philosopher), sociologists mostly tended to ride the 'anti-psychiatry' bandwagon. They denounced psychiatrists as agents of social control who were ignorant or dismissive of their patients' social context and of cultural influences on psychological disorders. Eaton was different, in coming from the 'mental hygiene' tradition and, in the footsteps of Morton Kramer, having an outstanding knowledge of the epidemiology of mental disorders. This difference from mainstream sociology can be seen particularly in his clear, jargon-free style as well as in the lack of doctrinal influence.

Among psychiatrists, the target readership of this text will be senior trainees, but consultants may wish to refresh their minds with it for continuing professional development; social work students and those doing advanced nursing courses would also find it very useful, although not necessarily recommended by their teachers. With the closure of many mental hospitals, specialist psychiatric libraries may now be much fewer, but libraries for health professionals should certainly find room for it. It is very adequately illustrated with figures and tables.

The most important sections include: the social construction of bizarre behaviour (e.g. mental disorder in non-Western culture); the methods of epidemiology; stress and depressive disorder; social selection and drift; theories of collective behaviour; and diffusion of therapeutic innovations. Eaton concludes that a most important role of the sociological framework is in showing how we, as a group, come to define a given emotion or behaviour as important. Although mental disorder is defined at the level of the individual, 'insanity' is defined at the level of society. He urges an end to polemics about genes *v.* environment, since the social environment provides a powerful tool for understanding the effects of genes on behaviour. This integrative view is a valuable one.

---

**Hugh Freeman** Honorary Visiting Fellow,  
Green College, 43 Woodstock Road, Oxford  
OX2 6HG, UK

### **Mental Health in India 1950–2000: Essays in Honour of Professor N. N. Wig**

Edited by R. Srinivasa Murthy. Bangalore: People's Action for Mental Health. 2000. 299 pp. £5.00 (pb). No ISBN. Copies available from: Apt C-301, Casa Angal 18, NS Palya, Bannerghatta Road, Bangalore 560076, India

This is almost a very good book. If the contents had a little more accurately reflected the title, we would have had a fitting tribute to one of the leaders of Indian psychiatry in the second half of the 20th century. I know of Professor Wig, but it was only on careful reading of the 25 chapters that I was reminded (or learned) of his very substantial achievements: his contribution to outcome studies in schizophrenia; his work on acute and transient psychosis; his coining of the term 'Dhat syndrome'; his promotion of the delivery of psychiatric services through primary health care; his leadership in developing the National Mental Health Programme in India; and so on. Glimpses of the man appear in chapters such as those written by Ahmad Molit and David Goldberg but the one-page biographical sketch does not do him justice. A more detailed assessment of his contribution to Indian and international psychiatry would have been welcome.

But there are some nuggets of historical information buried deep in the text: the first lunatic asylum was opened in Madras (now Chennai) in 1794, but it was only in 1905 that psychiatry was recognised as a speciality in India. At the time of independence in 1947, although there were several hundred million Indians, there were only 17 mental hospitals with 8425 beds. Then, as now, as this book emphasises again and again, almost all care of the mentally ill in India was provided by the extended family. However, as Murthy and Ghosh point out, how long this will last remains to be seen, with increasing urbanisation, increasing numbers of nuclear and single-parent families, and the increasing influence of the mass media in shaping the aspirations of young people and family life.

---

**Robin G. McCreadie** Director of Clinical Research, Crichton Royal Hospital, Bankend Road, Dumfries DG1 4TG, UK

### **The Maudsley Neuropsychiatry Modules: A Teaching Package for Self-Paced Learning or Small Group Seminars**

Author/Producer: Steve Church; Director: David Goldberg; Editors: Anthony David & Alwyn Lishman. London: Maudsley. Pack contains: Workbook, 163 pp. Package price £250. ISBN 0 9500289 8 3; Answerbook (on floppy disk); 2 video-tapes (2000); reference textbook: Lishman (1997)

What a splendid idea: neuropsychiatry is a clinical subject, so the notion of providing video-taped interviews with experts in the field, followed by clinical interviews with real patients accompanied by a workbook must be one of the best ways of learning the subject. In addition, the package contains, as a reference textbook, a copy of Lishman's *Organic Psychiatry* (1997).

The videos and workbook are divided into seven modules, dealing with the main areas of neuropsychiatry. Each module is subdivided into various sections, with revision exercises and feedback after each exercise. Throughout the workbook further reading is recommended from *Organic Psychiatry*. (An outline of the modules is available at [www.iop.kcl.ac.uk/main/publineu.htm](http://www.iop.kcl.ac.uk/main/publineu.htm).)

The videos are interesting and well-produced and the reference to Lishman's text means that anyone who has conscientiously studied the course will have learnt a great deal about neuropsychiatry and will have enjoyed the trip.

This teaching package will form an excellent preparation for the MRCPsych examination. More broadly, it presents examples of how to take a neuropsychiatric history, carry out a cognitive state examination and observe movement disorders or other neuropsychiatric symptoms – all of which will be invaluable to any clinician.

The package is intended for use not by individuals, but by local psychiatric training groups in which a clinical tutor might take responsibility for the pack and for providing supplementary help to trainees. The videos contain recordings of real patients and therefore a number of restrictions apply and the product is not available to individuals outside an academic setting.

As far as neuropsychiatry is concerned, some parts of this package are better than others. The neuroimaging section is particularly successful, and the opportunity of seeing Professor Lishman carrying out a