

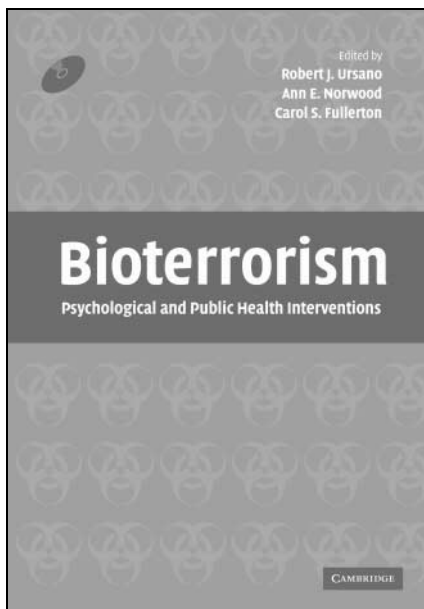
fairly short book, the price can only be described as bizarre; a cheaper paperback version must surely follow.

Among the byways of psychiatric history, the contribution of August Wimmer (1872–1937) in Copenhagen must surely be one of the least frequented. His major writing on psychogenic psychoses was never translated from Danish into any other language, but this has now been done by Johan Schioldann, a Danish psychiatrist settled in Australia. A characteristically learned introduction by German Berrios sets this newly discovered work in its wider context.

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Bioterrorism: Psychological and Public Health Interventions

Edited by Robert J. Ursano, Ann E. Norwood & Carol S. Fullerton. Cambridge: Cambridge University Press. 2004. 376 pp. £70.00 (hb). ISBN 0521814723



This publication is a collaborative endeavour by international authors with expertise that can guide planned responses to terrorism, in particular bioterrorism. Ursano (2002) has listed the goals of terrorism as: erosion of national security; disruption of

the continuity of society; and destruction of social capital. The contributors to this book are keen to show that these invisible threats to our present-day society can, to some degree, be mastered – inchoate anxiety perhaps need not rule.

The book offers interesting, albeit depressing, historical perspectives on the impact of war and conflict on civilians. It discusses planning by the British government in the 1920s for coping with the dead and wounded should London be bombed in future conflicts. The role of US civil defence personnel – perhaps in training people not to panic – is described in detail in relation to America's fear of atomic bombs. This included well-publicised rehearsals of actions to take, even if they would ultimately have little effect on survival chances. Another chapter covers what might be learned from the public health impact of the 1918 influenza pandemic.

It is acknowledged that terrorism is a potent precipitant of psychiatric illness. For example, rates of post-traumatic stress disorder went up by 173% in lower Manhattan following the terrorist attack on the World Trade Center in 2001, and it was reported that 35% of Oklahoma residents had psychological problems following the attack there in 1996. Forty-three per cent of those attending hospitals following the Scud missile attacks on Israel were psychological casualties.

Much has been learned of the impact of disasters on public mental health. There is less specific knowledge in relation to bioterrorism, although responses are likely to be similar, whatever the cause of the disaster. The experts indicate that human responses are to a large extent predictable: many more people presented with symptoms they believed to be related to anthrax exposure following the World Trade Center attack than were infected, and some people are particularly vulnerable to such perceived threats. Those previously exposed to trauma may be at heightened risk. The authors are agreed that services should have plans for dealing with the mental health consequences of exposure (or threat of exposure) to biological agents just as they do for dealing with the physical consequences. Information should be provided by respected sources, communicated clearly. Rather than focusing on censorship, the provision of evidence-based guidelines for responsible reporting is recommended (a parallel with suicide reporting and prevention).

The need for bioterrorism to be included in local and national disaster planning efforts seems self-evident. This book provides some interesting and readable papers that should help guide those charged with developing such plans.

Ursano, R. J. (2002) *Terrorism and Public Health* (Presentation to the Institute of Medicine). Washington, DC: National Academies of Science.

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The Large Group Re-Visited: The Herd, Primal Horde, Crowds and Masses

By Stanley Schneider & Haim Weinberg. London: Jessica Kingsley. 2003. 240 pp. US\$34.95 (pb). ISBN 1 8431 097 5

This is number 25 in the International Library of Group Analysis. The two Israeli editors have gathered 15 contributors from 7 countries. The book's title refers to the seminal book *The Large Group*, edited by Lionel Kreeger in 1975. I am reviewing this book for the non-specialist psychiatrist interested in what may be useful in clinical practice. I might have written a different review for psychoanalytically oriented readers.

Three of the 13 chapters relate to work in clinical settings. Lipgar provides a riveting account of his attempt to create a regular ward-meeting in the most awful imaginable type of back ward that characterised the gigantic American state hospitals in the 1960s, and still exist no doubt in parts of the world. Closer to home, Berke gives examples of projective processes at the Arbour's Crisis Centre in London, which do not presume psychoanalytic knowledge. In the third, Tasher describes a German in-patient psychotherapy clinic that has regular large-group meetings but unfortunately I found the writing insufficiently clear to understand fully what was being described.

Two chapters, although not directly clinical, I found very helpful in thinking