

language, influence of past on future experiences, and gender differences. This is followed by a focus on alloparents (individuals other than parents who take on a parental role) and adolescence. The book ends by considering the impact that early experiences have on later-life trajectories.

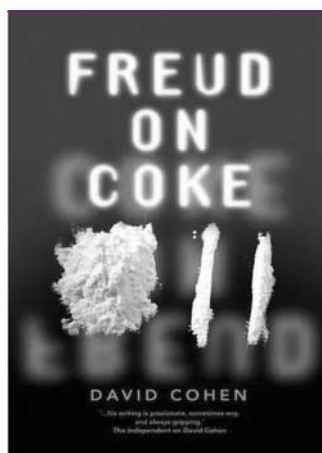
The chapter on biology and the brain catches attention, not least because of its attractive rough sketches which illustrate the points being made in a very memorable fashion. Following a logical thread, the conclusion is that, at least to some extent, the brain remains plastic throughout life and that there is always reason for optimism in the face of adversity.

Resilience and good feelings are very much in the news at the moment and this chapter provides a summary of some of the evidence base for promoting both. The quality of care that a child receives has an impact on their internal characteristics with a consequent impact on their resilience. However, the very negative effects of child maltreatment are seldom escaped and the author makes the point that 'loading' of factors such as poverty, birth order, parental unemployment and poor health must be considered alongside genetic determinants.

The introduction to the book includes a section about the importance of evaluating research findings very carefully. This warning must be borne in mind when reading the whole book as assertions and conclusions reached by the author must be actively evaluated by the reader.

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Freud on Coke

By David Cohen.
Cutting Edge Press. 2011.
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Cohen lets us know early on that his work is part history (exploring Freud's drug use) and part polemic on the current place of drugs within society. Perhaps with this in mind he warns us that we 'are now entering a war zone'.

The central story begins in the conversational manner of a late-night bar, developing some drama through damaging letters between Freud and Wilhelm Fleiss, which Freud managed to suppress during his lifetime through the help of a princess (Marie Bonaparte) rather than a super injunction. The ultimate survival of the letters, owing to the princess/patient's refusal of her analyst's wish that she destroy them, helps Cohen depict Freud's ambitious, and sometimes disastrous, experiments with cocaine during a time of more general European enthusiasm for this drug (Merck's European import increased from 58 000 leaves in 1881 to 18 396 000 in 1885). Despite his energetic pursuit of success, Freud overlooked the significance of cocaine's anaesthetic properties and while his colleague, Karl Koller, blazed a trail for ophthalmic and

dental surgery with the use of cocaine-anaesthetic across two continents, Freud pursued the ultimately less rewarding path of 'naso-sexual neuroses'. The Fleiss letters provide testimony of the dreadful injury inflicted on Freud's 'neurotic' patient Emma Eckstein along with Freud's continued heavy cocaine use during his eventual breakthrough with the published, edited analysis of his dreams.

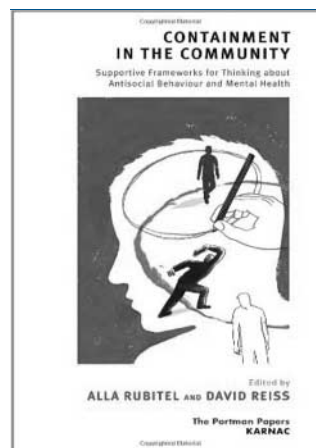
But Cohen also shows us Freud as part of an important tradition of serious, introspective experiment in psychotropic drugs, continued here through Albert Hofmann (the bicycling, Swiss discoverer of lysergic acid diethylamide) and Aldous Huxley's wonderful account of his Californian mescaline experience. Within late capitalism this tradition of exploration has lapsed and the search for transcendence through psychedelics has given way to a search for the firmer, clearer ego boundaries of a growing range of 'neuro-enhancers' that promise to help us work harder rather than enabling us to 'open the doors of experience'.

Although Cohen often finds his target, there is a good deal of collateral damage, particularly when examining professional involvement in psychotropic drugs. Psychiatrists challenging the very debatable findings of an Irving Kirsch meta-analysis are dismissed as a 'pro-pharma shrink duo' (the biographer E. M. Thornton fares little better as an 'outraged spinstre-librarian'). These *ad hominem* attacks appear as shorthand in Cohen's polemic but do not help establish its credibility, which is further undermined by a poor understanding of basic medical science – as when we are told that a Glasgow Coma Scale of 15 indicates 'at least minor brain damage'.

An engaging history – as long as you tread carefully between the landmines.

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Containment in the Community: Supportive Frameworks for Thinking about Antisocial Behaviour and Mental Health

Edited by Alla Rubitel
& David Reiss.
Karnac Books. 2011.
£22.99 (pb). 296pp.
ISBN: 9781855758483

For some, psychiatry has wilted in recent years, under the converging pressures of evidence-based medicine, managerialist politics and the political emphasis on public protection. The individual has been subordinated to the group, the validity of narrative and understanding to the reliability of outcome data, and therapeutic continuity to functionalised crisis management. In this stark environment for clinical practice the patient represents risk to the clinician, leading to anxiety, defensive practice, and a dichotomised clinical position of denial of risk or responsibility on the one hand and an overly interventionist approach on the other.

On reading *Containment in the Community*, one is immediately struck by the juxtaposition of forewords by a psychoanalyst whose writing is familiar to most psychiatrists (Professor R. D. Hinshelwood) and a civil servant with responsibility for