

His co-author is Ann Westmore, a medical journalist whose claim to fame is apparently a best-selling birth control book on *The Billings Method*. The book first tackles the process of conception and answers basic questions about infertility. Then there is a chapter about the development of the test-tube baby programme in Melbourne. The next few chapters describe the sort of patients who can be helped and go into the minutiae of the treatment and the stresses and practical problems, written very much with the patient in mind. For the few successful patients there is a reassuring chapter on the outcome of pregnancy, but this is put into perspective by a subsequent chapter on the limited current success of the procedure. Following this there is an ethical, social and religious justification of the procedure, written in the question and answer style. Although this chapter, on initial reading, comes across as rather complacent and glib, it has to be kept in mind that the book is aimed at neither the informed physician nor the moral philosopher. The final chapter on future prospects launches bravely into cloning and sperm microinjection as well as some of the other biological scenarios that have been perpetrated in Melbourne such as embryo donation, and makes rather too little of the less sensational, but more relevant advances in knowledge that can be achieved with continuing embryo research.

All in all, this is a book that has been written for the lay person rather than the professional, and I shall certainly be recommending it to my patients. Possibly I should have asked one of them to review it.

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A Guide to Symptom Relief in Advanced Cancer

Regnard CFB, Davies A, Randall F. 44 pages, Manchester, £2.95, Haigh and Hochland, 1983.

The aim of this short book is to provide basic guidelines for the control of symptoms of patients dying of cancer. It is primarily concerned with therapeutics and ethical issues are not considered. Pain control dominates the first part. The common reasons for

failure to control pain are considered: fear of analgesics, failure to diagnose, lack of pharmacological knowledge, poor use of adjuvant medication and inadequate reassessment. These common fears are allayed as the use of oral medication for pain control is discussed. The very limited need for injections is clearly stressed. Adjuvant medication to opiate analgesia is explained, but the relevant table appears too early in the chapter and anticonvulsants are not mentioned.

Diagnosis of the cause of the pain is not sufficiently emphasised. Correct treatment depends upon accurate diagnosis and most patients have several pains, each of which needs to be assessed. Some pains may be unrelated to the cancer and require different treatment.

A clear methodical approach of diagnosis leading to treatment is introduced when the control of nausea and vomiting is considered and there is a useful table of anti-emetic drugs. However, this approach is not always maintained with other symptoms and the need to diagnose is neglected in the enthusiasm to discuss treatment. Certain important and distressing symptoms, such as dyspnoea, are rather scantily covered. There is a very useful table of drug interactions and a full list of references.

However, the information is often lost in a complete jumble of headings and sub-headings, leaving the reader easily confused. Although this book could be helpful to many doctors, the presentation may in fact limit its usefulness.

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Freud and Human Nature

Dilman I. 207 pages, Oxford, £15, Blackwell, 1983

Freud and the Mind

Dilman I. 204 pages, Oxford, £15, Blackwell, 1983.

These clearly written and extensive investigations into the philosophical underpinnings of Freud's psychology are part of a larger research programme in which Dilman attempts a reconstruction, rather than an exegesis, of Freudian

theory. *Freud and Human Nature* differs from most other studies on Freud in its criticism of his hedonistic conception of sexuality, of his account of the relationship between love and sexuality and of his polarisation of human nature and culture and of instinct and morality. It might be expected that when these theories have been removed there is little else of interest in Freud's programme. For Dilman, however, it is a necessary step towards seeing what is of lasting importance in Freud.

In the first two chapters of *Freud and Human Nature* Dilman argues that even on Freud's terms a purely hedonistic sexuality is really an infantile sexuality. Although the lifting of sexual repression was important to Freud, it should not, insists Dilman, be seen as either an advocacy of 'giving way to impulse' or as a means of removing guilt in order to take an easy way out of moral obligations. In the following chapters Dilman's critique is expanded into a reappraisal of Freud's negativistic account of morality and his view of culture as an external restraint on instinct and human nature. In the course of his rejection of the quasi-mechanistic polarities which dominate Freud's writings Dilman argues that Freud is only acceptable as a psychologist if purged from his philosophical presuppositions. But this raises more problems than Dilman appears to recognise. It may be the case that bad philosophy distorts a scientific programme, but the remedy lies in its replacement with a better and more rigorous philosophical content. Yet Dilman conveys the impression that it is the very contact with philosophy – rather than bad philosophy – which distorts Freud's psychology. Thus Freud encounters 'certain philosophical difficulties' and suffers from 'philosophical confusions' whilst 'philosophical froth' and 'philosophical presuppositions' tend to 'get in the way' and 'distort his insight'. In this respect Dilman shares an assumption – apparently held by Wittgenstein and Rhees – that the shedding of any philosophical content is essential to scientific progress. This kind of philosophic aversion therapy may be a useful prophylactic against the wilder speculations of philosophers but it can lead to a narrow and distortive interpretation of the sciences and their requirement for a sound appraisal of their conceptual apparatus, which is particularly crucial in the work of revolutionary innovators such as Freud.

There is little doubt that Dilman has great respect for Freud and there is considerable value in this reconstruction