
Mr Chris Adams is a senior neurosurgeon and this book is a distillation of his notebook which he has maintained for thirty years. This compilation of his pearls of wisdom is primarily meant for the doctor considering a career in neurosurgery or for the neurosurgical resident. It may also be useful for neurosurgeons as it covers areas that cause difficulty for trainees and qualified neurosurgeons alike.

The author starts with a chapter on anatomy, with particular emphasis on the anatomy of the skull base and the cavernous sinus regions. He has developed some grid diagrams to help memorize various foramina and lines of the skull base. While these might be useful for an undergraduate student, a neurosurgeon (or even a trainee) needs to have a far deeper understanding of the 3-dimensional relationship of various structures than that offered by these diagrams. A unique feature of the book is the presence of 2-coloured origami (instructions to fold labelled paper diagrams to reproduce a 3-D structure) for describing the anatomy of the cavernous sinus and the middle ear cavity. We did not try these out as it entailed cutting up the book!

The next three chapters are devoted to tips on taking history and examining patients, making a diagnosis and some general surgical principles. While the chapters are written in an engaging style and contain useful tips, on the whole the material presented is a bit superfluous and disjointed.

The second half of the book deals with surgical judgement and some operative tips are given. This is where the author’s vast experience shines through. To our minds this section is the most useful to the reader. When a new resident starts his training in neurosurgery the first few years are spent in mastering the anatomy and manipulative skills associated with surgery. While most trainees eventually manage to reach a reasonable level of manual dexterity, it is surgical judgement which is most difficult to teach and learn. When to operate, when not to operate and when to terminate a surgical procedure are extremely difficult decisions need more than just medical knowledge. Making these decisions needs a lot of wisdom and one has to take into account a number of factors including the patient’s age, the nature of pathology and the precise objectives that the surgeon hopes to achieve. Every patient is different and there are no fixed textbook answers to different situations that are presented to a surgeon.

Intraoperative judgement is even more crucial and, as the author states, the surgeon may have to battle his or her own psyche in having to admit defeat against an imposing pathology. Nevertheless, that is better than causing harm to the patient. The author concludes with a statement: ‘Surgical judgement both before and during the operation represents the most sublime development of the surgeon. Lay people dwell upon the surgeon’s manipulative skill but it is judgement that is the major demand imposed on the surgeon and that is what, in the end, we are paid for and upon which our reputations stand or fall.’ Wise words indeed! A trainee should miss no opportunity to learn how his teachers have come to a particular decision.

A refreshing feature of this book is the author’s willingness to discuss the complications faced by him. This is extremely important to give a correct perspective to a young neurosurgeon. In fact, no effort should be spared in learning about other people’s problems and how they dealt with them, because some day that knowledge may come in handy and may save a patient’s life.

On the whole, this small ‘notebook’ contains some tricks of the trade that may help a trainee or young neurosurgeon. Written in a lucid style and well illustrated, this book has an inherent appeal that makes it interesting reading.

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Writing a research paper is the culmination of hours of planning, conducting experiments and collecting data, analysing these and preparing a manuscript based on the results. Once a manuscript is ready, it has to meet the approval of the editor of a journal and of peer reviewers, before it can see the light of day. There are several books that aim at guiding a prospective research worker through this arduous journey. This book is another attempt in this direction and is aimed at medical students, residents, physicians and biostatisticians. Though its title suggests that the book relates only to manuscript writing, it covers several other areas that should be of interest to its readers.

The book is divided into five sections. The first two sections deal with the processes of planning a study and collecting data. The remaining three sections relate to manuscript writing, editing and revising. In addition, the book has several appendices, including the Uniform Requirements for Manuscripts Submitted to Biomedical Journals, the World Medical Association Declaration of Helsinki, and some miscellaneous material used by the author to collect data for this book.

The book provides useful tips on various aspects of research planning, study design, randomization of study subjects, statistical analysis, manuscript writing and submission, etc. Based on information obtained from journal editors and peer reviewers, the author has tried to draw the reader’s attention to mistakes frequently made by researchers. This gives the book a realistic touch. (I had a sense of déjà vu, having seen the mistakes in print which were pointed out to authors in the papers that I have had a chance to review.)

Its paperback format, a serif typeface and simple language make this book easy reading. I read the entire book during a 6-hour train journey.

The book has its share of shortcomings. In an attempt to be comprehensive, the book fails to go deep into any of the areas covered. Second, the writing style closely resembles that of computer books for beginners. It relies heavily on text boxes containing tips, vital points, warnings for potential pitfalls, and references for further information. These boxes interrupt the flow of text and affect its readability.

Overall, I will not recommend this book for a researcher who
wants to buy his first book on medical writing since other available books serve the purpose better. The same will be true for experts in the fields of research methodology and medical writing; for them, it is too elementary. However, it is likely to be useful for a person who has been introduced to the basic elements of medical writing and is trying to improve his knowledge in the field. Also, this book will be a useful addition to an institutional library.

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This is a highly readable book, especially for mental health professionals, and for policy-makers dealing with issues concerning other chronic or disabling conditions. Such a book is all the more timely and important in view of the ongoing discussions on health sector reforms.

Mental health policy is placed in the context of overall social policy which in its own right opens important new perspectives, e.g. the implications of social welfare policies on mental health policy. The analysis of the often disastrous consequences of a radical separation of treatment and care services as overly simplistic is carefully documented: ‘the assumption that medical and social needs can be dealt with separately, which is built into the present administrative structure, will have to be modified’; the mistaken belief that treatment and care can be separated, that medical and social needs can be dealt with separately.

Examples analysed are limited to those from western Europe and northern America. But the results of the analysis are fully relevant to developing countries, and also to services dealing with other chronic or disabling conditions (although this is not spelled out in the book): ‘an increase in accessibility of treatment facilities in order to address the newly defined and expanded range of mental health problems, and specialization of service provision as a means of shifting resources from the problems of psychiatric service users to a more specific focus upon the problem of mental illness.’ One could substitute mental health problems with diabetes, asthma, arthritis, incurable cancer, etc. and face the same problems. This shift from custodial mental hospital care to acute and effective (in the short term) treatment in general hospital units has led to a skewing of state mental health expenditure towards investments where cures (‘quick fixes’) can be achieved, and away from long term care needs, i.e. two-tier (mental) health services: ‘Overall, however, it remains the case that it is the long-term mentally ill who have tended to lose out in the shift from institutional to community care.’ A question we have to ask ourselves here: ‘To what extent is this true of all sorts of disabilities, including, for example, mental retardation?’

Cost-effectiveness is another serious concern which the author discusses. While there is limited evidence that community care is cheaper, let alone more effective in terms of quality of life of the chronically mentally ill, community care allows the possibility of greater neglect of service users. This leads to greater cost-saving policies inviting neglect or even abuse under the disuse of community care.

Another issue discussed lucidly is the issue of resistance of various stakeholders against a shift towards de-institutionalization. The main sources of resistance are identified as psychiatrists, defending their empire of sole specialization. Of course, one could add the battles against integration by cardiologists, epidemiologists, oncologists, etc. against similar trends, especially where their economic interests are concerned. The author raises well founded concerns about ‘the assumption underlying the movement toward de-institutionalization that patients would receive support in the community and would thereby benefit from being discharged’. This assumption, he shows, has been ‘proved overly simplistic and sometimes erroneous’.

Amongst policy-makers, informal care is often referred to as a relatively uniform activity, involving a process of general support and tending. In reality, the range of needs presented by people with chronic mental and physical health problems are considerable. The personal hygiene needs of an elderly person with Alzheimer’s, the need for acceptance of bizarre behaviour by a person with schizophrenia, and the need to understand the heightened state of emotions experienced by a person with a neurotic disorder, all call upon a very different range of skills—amongst informal carers such concerns have barely been acknowledged.

Certainly for people who can pay, it seems clear that the community is often perceived as an inadequate substitute for such institutional care.

Perhaps not enough room is given to the growth of self-help/mutual aid groups and service consumers’ groups worldwide. The National Association of Parents with a mentally retarded child in India seems to me an outstanding example, as is AMEND, an association in Bangalore of families with a chronically psychotic member. With only little delay compared to industrialized countries, such movements are gaining momentum in developing countries also.

It is interesting to note the convergence of data from industrialized to developing countries: California where non-forensic psychiatric beds have decreased to 8.3 per 100 000 is in line with the World Health Organization’s estimate of 1 per 10 000; and an average length of stay in mental hospital of 27.7 days, compares well with the three weeks in some psychiatric inpatient facilities in India.

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Extensive and profound changes have overtaken behavioural sciences in the last few years. Increasing recognition of the role of psychological factors in the causation of disease is an important outcome of these changes. This has given rise to the emerging specialty of Behavioural Medicine. Concepts evolved by psychologists are of fundamental importance in psychiatry which, in
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The course of the psychosomatic movement (now subsumed known pathophysiological process (e.g. migraine or vomiting). demonstrable organic pathology (e.g. rheumatoid arthritis), or a initiation or exacerbation of a physical condition that has either surmises expansion in psychological and social information. Certainly, psychology continues to be the more elusive area.

As a child psychiatrist, I wish more material on child psychology had been included. That apart, the book satisfies its stated aim as a basic text on psychology and its presentation makes for easy and interesting reading.

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The health sector, with its strong biomedical bias, has traditionally been inclined to look for 'quick fixes', conceptually similar to the magic bullet of antibiotics. This may account for the tendency that may be found in many textbooks on methods, to perceive qualitative research as a tool that could be readily appropriated, independently from the conceptual and theoretical orientations within the social and cultural sciences. This tendency may have been accentuated by the fact that many textbooks on qualitative methods were intended for students of disciplines such as anthropology and presuppose a strong theoretical foundation among the readers. However, when the audience has no or little prior exposition to the social sciences, the attempt to impart methodological skills may be of limited value since the audience would be left with no tools to analyse the collected data.

This book may be seen as an attempt to address this problem. Grbich seeks to provide 'a broad but comprehensive overview of current debates and issues as well as the practicalities of conducting qualitative research' and aims at presenting 'a comprehensive selection of the major methodologies and techniques of qualitative data collection, interpretation, and presentation'. The book is divided into four parts—‘theory and design’, ‘techniques of data collection’, ‘methodological approaches’ and ‘interpretation, analysis and presentation of data’.

turn, are significant in some processes involved in organic diseases. Psychosomatic medicine is, thus, a meeting point between psychology, psychiatry and medicine. Here, psychologically meaningful environmental stimuli are temporally related to the initiation or exacerbation of a physical condition that has either demonstrable organic pathology (e.g. rheumatoid arthritis), or a known pathophysiological process (e.g. migraine or vomiting). The course of the psychosomatic movement (now subsumed under the term behavioural medicine) has been uneven. While the movement emphasizes the biopsychosocial approach to disease, explosion of biological knowledge during this time period far surpasses expansion in psychological and social information. Certainly, psychology continues to be the more elusive area.

It was with this background that I read this interestingly titled book. I found the task even more exciting as the book is written by an Indian psychologist working in Canada. In his preface, the author says that he has attempted to make the basic material more palatable by lacing it with examples, stories and theories of Indian origin where appropriate. The book is intended to be a basic, introductory text meant for the lay public, as a first course in psychology and a refresher for graduate teachers.

Indeed, the book is satisfactory on all these counts. It is written in simple language which is free from technical jargon. The author has drawn on many ‘Indian’ examples, often from his personal experience to highlight the topic in question, making the subject far more comprehensible. But this, in fact, is also a problem with the book. It is too simple and basic and, as the author himself points out, can be aimed at the lay public or graduate students. The organization of the book—with model questions at the end of each chapter—reminded me of several books in medical school written by ‘experienced teachers’. The book has many figures and tables. Some of these are interesting, especially as they give a glimpse of possible clinical implications to the reader. However, the inclusion of some figures is questionable. For example, the figure of the developmental sequence of the human brain (p. 29) or chromosomes of a child with Down syndrome (p. 211) do not convey any message. The author’s intention of adding an international cultural flavour is not in keeping with the great advances that have occurred in cultural formulations in psychology and psychiatry.

The organization of the book is similar to that of basic texts on psychology. It has eleven chapters. The first three chapters cover basic issues and methods in psychology, and the physiological basis of behaviour. The remaining eight chapters cover fundamental topics in psychology such as perception, learning, memory, thought and language, emotion and motivation, intelligence, personality and the process of learning languages. Each chapter has short sections expanding on the major theme, followed by a summary. These summaries have been thoughtfully written and convey the essence very well.

The subjects covered in the book are consistent with the concern of psychology with elementary phenomena (perception, memory, learning, etc.). The author has included more complex phenomena such as personality and emotions but the descriptions are drawn from traditional theories. This is due to inadequacy of academic psychology. It is true that psychologists have turned their attention to psychometric techniques, psychological defects in brain lesions, and dimensions of personality, thereby exploring the boundaries between psychology and neurology. But the primary concern of medicine is with morbidity states. However much we know about the psychology of the ‘normal’ individual, in the area of morbidity, new laws will be found to operate. It is here that this book is a cut above similar basic texts. The author has managed to give a flavour of both everyday life and clinical phenomena in each area.

As this review is for a medical journal, I have attempted to evaluate the book from the point of its relevance to the practice of medicine. The biopsychosocial approach encounters problems of mind and body. Theoretical handling of these problems by psychological investigators have been on the rise. For example, behaviourally-oriented students of obesity have recognized the complex physiological basis of weight regulation and its influence on appetite. Conversely, psychologically-oriented students of allergic and immunological disorders have become aware of the factors that predispose, initiate and sustain such conditions. These developments offer a promising ground for research on interventional approaches. It is here that the book is a little disappointing as it offers too small a window to look at practical applications in medicine.

As a child psychiatrist, I wish more material on child psychology had been included. That apart, the book satisfies its stated aim as a basic text on psychology and its presentation makes for easy and interesting reading.

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The book is introductory in nature, and the style of presentation includes three elements, namely presentation of the issue, presentation of a debate and critique, and suggestions for further reading. However, the book suffers from an ambitious attempt to cover everything, ending up with a text that does not cover any topic in sufficient depth. For example, in Part I, Grbich introduces a number of theoretical perspectives and has included major sociological theorists such as Marx, Durkheim, Parsons and Foucault, focusing on social control, and G. H. Mead, Goffman, Weber and Habermas, focusing on autonomous action. These theoreticians have contributed hundreds of thousands of pages to sociological theory, and it is not easy to do justice to these contributions in less than 20 pages, as Grbich attempts. Add to that two short sections on feminist and post-modern research, and the confusion is complete. Grbich fails to show convincingly how this selection of theories is related to health issues, while important contributions directly relevant to the health field have been left out. To mention a few examples, medical anthropologist Arthur Kleinman on doctor–patient interaction; or contributions from the vast knowledge on the sociology of the body; or theoretical, ethical and practical issues related to applied health research in developing countries.

Grbich matches ‘qualitative research in health’ with ‘social science theories’ in order to be comprehensive; but social science is not one discipline. It is a range of different disciplines with different theoretical traditions. Therefore, the result is a mismatch, and does not clarify for example, how, why and when J. Habermas’ ‘theories of “rationalization”, “communication” and “emancipation” have become key references in the health area’—it is simply stated that they have (p. 47).

One may justify Grbich’s approach by saying that the book is merely an introduction, that it should provide a broad overview, and that the reader may make good use of the suggestions for further reading to pursue topics of interest. This is not entirely untrue. However, the balance between the number of topics and depth of discussion is tilted in favour of number of topics. It may also be difficult for the novice to judge what may be relevant to pursue further, and what not.

Part II on ‘techniques of data collection’ (dealing with interviewing and observation) and Part III on ‘methodological approaches’ (dealing with library-based, field-based and action-based research) present, for the larger part, traditional methodological wisdom. However, the reader finds some surprising and unconventional viewpoints. One, which is very difficult to agree with, is that ‘interviewing tends to be chosen as the most appropriate technique when the researcher cannot gain access to information any other way’ (p. 85). The implicit hierarchy of methods in this passage, rendering interviewing the least desirable option, is difficult to understand, since interviewing is a major method in qualitative research. On focus groups, Grbich tells us that ‘a mixed group is usual with regard to age and friendship’ (p. 109), and gender is also added to this list (p. 110). However, conventional wisdom has it that groups should be relatively homogeneous socially and participants should preferably be strangers. This usually helps participants to provide information freely and the interviewer to understand what is going on.

It is perhaps even more important in terms of the overall project of the book that the initial theoretical presentations are not or very rarely linked to the methodological issues. Phenomenology (which broadly perhaps could be understood as the theory of interpretation of experience), introduced in Part III under field-based methods, and semiotics (the science of signs) in Part IV (Interpretation, Analysis and Presentation of Data) are big and important theoretical areas. It seems inconsistent that they are not introduced properly in Part I of the book.

The best chapter in the book is the one dealing with computer-assisted analysis. Here, the critical discussion is stronger than that in the rest of the book, and many important questions are raised concerning the relevance and usefulness of computerized qualitative analysis. While this section will be the first to be factually outdated due to new software developments, the critical questions will remain relevant for much longer, such as the questions on the impact of the software on the analytical process and of the dominance of coding as the main purpose of the programme (p. 225).

Finally, a word on political correctness. It is the first time that I have come across a serious list of politically correct word substitutions intended to help the researcher present his/her data in a non-offending manner. According to this list, one should not construct a sentence like ‘I was harassed by a nasty, short, stupid macho guy’ to relate an unpleasant event of this nature. The phrase ‘my personal space was invaded by a kindness-impaired, vertically-challenged, cerebrally-constrained, testosterone-heavy person’ should be preferred to avoid offending the culprit! Grbich assumes that ‘researchers can manage to write about others in a respectful manner without seeming ridiculous to some readers’ (p. 275).

Grbich’s contribution to current texts on qualitative research methods is too ambitious in trying to include everything, resulting in a superficial and fragmented text where one part does not link readily with the other. A more focused attempt based on health-related social science disciplines rather than a huge and heterogeneous mass of ‘social science’ as such is likely to be more helpful to both the novice and the experienced reader.

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