practitioners in this area, Dr. Guex recognized that a significant gap existed in the field; the human side of this very painful and tragic disease had been ignored.

One of the best things about this book is that the author has captured all of the relevant subject areas to help professionals and students working with cancer patients and their families. Each chapter deals with a specific topic and details the author's views of the then current literature supporting those views. The unfortunate downside of this is that the material presented is not the most current and not the most up-to-date.

The book begins with the review of the psychosomatic aspects of cancer. This is followed by a chapter outlining the ways cancer patients adapt to the knowledge of cancer and their possible defense mechanisms. The next section discusses the important physical and psychological symptoms that patients can experience and also discusses the use of psychotropic drugs and pain control. There are then a series of chapters dedicated to the role of various health care professionals and the effects of both conventional and complementary types of therapy for the treatment of cancer. The final part of the book discusses psychosocial interventions and palliative care and it is in this area that case studies from the author's experience are brought to bear on the material. The case studies are valuable from several perspectives. One is that it will assist the reader to understand the value of listening and support to patients suffering from this difficult disease. Secondly, the case histories established the author as being a very credible and experienced teacher/clinician with much to offer.

Though this book is easy to read and contains considerable valuable information, I cannot give this work anything better than a mixed review. Some parts are wholly relevant, and some material falls short of the mark of providing all the necessary and relevant data.

Szasz, T. (1994). Cruel Compassion: Psychiatric Control of Society's Unwanted. Toronto: John Wiley & Sons, Inc.

Reviewed by: Kieron Downton, University of Alberta.

Writing about the history of war correspondents, Philip Knightly (1974) said that in any war the first casualty was truth. Thomas Szasz (1994), using a different metaphor, comes to the same conclusion, albeit regarding psychiatric practices and the "war" on mental illness. According to Szasz, the macro business of psychiatry (i.e. mental health professionals) is ultimately concerned with distributing poor relief to adult dependents.

Szasz's book views involuntary hospitalization as a problem of dependency and unwantedness. It is seen as a politico-economic issue involving power relationships between stigmatizers and stigmatized. For Szasz, the stigmatized is the mental patient whom he views as being unwanted by society. These unwanted have been seen throughout human history and have included the indigent, the debtor, the epileptic, the child, and the homeless.

In Part One Szasz looks at some of these unwanted and reviews the practices used to segregate such people. Szasz shows how indigence is a relative term which continually changes in definition, depending on the society one is viewing. In a similar vein he shows how the definition of insanity is relative such that, "the technologically most advanced countries have the greatest number of persons officially classified as mentally ill" (p. 23).

In the case of debtors, it was seen by the mid-nineteenth century that nothing was to be gained for creditors from imprisonment. Thus debtors' prisons eventually disappeared and were replaced by bankruptcy laws. In the case of involuntary commitment, the only change which has come about has been that more people are able (by civil law) to commit others.

In the somewhat poignant history of epilepsy, Szasz shows how its treatment moved from one of religious to psychiatric stigmatization. As Szasz says, "Believing is indeed seeing. The disease we call epilepsy is the same today as it was in 1890" (p. 59). However, as Szasz notes, when treatment was non-existent or rudimentary, psychiatrists used the need for treatment as a pretext for confinement. He shows how the same pretext is being employed today by psychiatrists for treating mental illness.

Szasz admonishes child psychiatry as a form of child abuse. He points out how the psychopathologizing of child misbehaviour is a corruption which only serves the mental health professional. He also shows how child psychiatry tends to diagnose metaphorical diseases and not literal ones. Szasz calls for the abolition of child psychiatry, which he sees as psychiatric slavery acting as an enemy of both children and liberty.

Homelessness is seen by Szasz as a cultural concept. It is also seen as a business wherein experts, with vested interest in the numbers, inflate both the amount of homelessness and their ability to relieve such a condition. Foremost among these experts are mental health professionals, while others making claims on the homeless include drug abuse specialists, veterans groups, hospital administrators, the medical profession as a whole, and the clergy.

Part Two of Szasz's book shows how primary weight is given to society, while successively less weight is given to relationships, caring, and dignity.

Szasz traces the history of insanity to show how asylums became bastions of power for what he called "mad-doctors," i.e. the early name for psychiatrists. Much later, when the economics of caring proved to be advantageous, poor people, as opposed to rich people, were incarcerated in insane asylums.

To understand the issue of chronic mental patients, Szasz says that one needs to consider the connections between disease, disability, dependency, and productivity. One is not able to distinguish mental health from mental illness, says Szasz. He says psychiatrists' preeminent way of accomplishing this is to determine diagnosis by domicile. In essence, he says psychiatrists do everything except treat patients as responsible persons or eschew coercion. Because civil rather than criminal law is used to incarcerate patients, Szasz says that deinstitutionalization is a myth much on a par with the myth that the American Civil War was about liberating the slaves.

Szasz concludes that for psychiatrists to resemble regular physicians treating voluntary patients, they need to get rid of civil commitment and, if a law is broken, deal with it under criminal law and leave out the civil and psychiatric systems. The gist of Szasz's book is quite clear. Involuntary hospitalization for those deemed insane is a form of slavery. As he notes, "all history teaches us to beware of benefactors who deprive their beneficiaries of liberty" (p. 205).

## Reference

Knightly, P. (1974). The first casualty; From the Crimea to Vietnam: The war correspondent as hero propagandist, and myth maker. New York: Harcourt Brace Jovanovich.