

BOOK REVIEW

Advances in Psychosomatic Medicine, Vol. 8: Psychosocial Aspects of Physical Illness, edited by Z. J. LIPOWSKI, Hanover, N. H. S. Karger, Basle, Switzerland, 1972, 275 pp. \$18.00.

THE AREA of psychosomatic medicine combines elements of medical sociology, health care administration, institutional design and general psychiatry. Current interest in this interdisciplinary region has resulted in a wealth of information that may have much practical significance in attaining the ultimate goal of medicine: prevention of disease. *Psychosocial Aspects of Physical Illness*, Vol. 8. In: *Advances in Psychosomatic Medicine*, makes available to the reader a representative sample of contributions to this theme. Manageable control over the topic is achieved by an approach on three levels: psychosocial determinants of illness onset, modes and determinants of psychosocial responses to illness and consideration of the relationship between patient and environment.

Two studies comprise the section devoted to illness onset; the first of which, by R. H. Rahe, correlates subjects' recent life changes and their near-future illness susceptibility through the use of the Schedule of Recent Experiences Questionnaire. This device quantifies experiences by assigning them relative life change units (LCU). For example, the death of a spouse has a mean value of 100 while a change in residence has 20 LCU. A second study, by A. H. Schmale, develops the concept of the giving up-given up complex. These studies furnish a link between precipitous psychosocial factors and the predictability of organic illness.

Clarification of psychosocial responses to illness is facilitated through the use of a model introduced by F. C. Shontz. Here, the force field diagram simplifies one's view of the factors which push patients to accept treatment and those which push him/her away. Symptoms, though repugnant to the patient, push him/her in the direction of treatment, as does the expectation of a return to health. The individual's loss of his/her healthy image directs him/her away from treatment in the same manner as anticipation of illness and concern over the cost and discomfort of diagnosis and treatment. Shontz's discussion of the effects contrived by the enhancement and reduction of the factors makes understandable and interesting reading.

R. J. Kahana, in Chap. 3, explores the complicated region of personality diagnoses as it relates to illness response and is perhaps most helpful as a guide to related literature. Along the same lines, N. A. Cassel, using a modified Rorschach test demonstrates wide variability in patients' communications of illness due to individual differences in somatic perception. W. F. Kiley in his report examines various coping strategies showing how they reflect life setting, hospital environment and intrapersonal as well as disease-related determinants.

Many of the salient concepts of illness are tied together by the final two chapters in this section devoted to illness response. A Verboerdt provides a more integrated view of the complexity of reaction to illness in his consideration of sociocultural differences. He mentions, for example, that disabling diseases cause more anxiety in men while disfiguring diseases do so in women. Many previously mentioned concepts, such as effects of family relationships and use of coping mechanisms, are tied together to provide a useful overview. J. B. Imboden discusses the psychosocial determinants of recovery in the final chapter. Here, the illness period is described in terms of the following transitions: from the onset period involving establishment into the sick role, through a middle period of adjustment to dependency, to convalescence, in which independence is regained and cooperation maintained.

Increasing attention is being paid to the patient's environment and how it influences his/her reaction to family and other health care attendants. A. C. Twaddle opens the section devoted to this aspect with a detailed review of the sick role concept and illness behavior. The work of Parsons is reviewed, defended and related to a third concept: health status. Illness behavior is presented as an entity determined by both normative and situational constraints.

In their article on the communication of information about illness, H. Waitzkin and J. D. Stoeckle focus on eliminating three deficiencies in previous work: they use an analytic rather than descriptive technique, they attempt to assess in detail the variability of the doctor-patient relationship and they suggest directions in which the study of this process may be extended into the social sciences. The authors define information as that which removes or reduces uncertainty and examine the plight of the patient whose physician withholds information in order to maintain power in the patient-doctor relationship. One contribution to the communication gap may be the difference in linguistic codes between middle-class doctors and working-class patients. These problems, as well as the various criteria by which doctors decide how much information to share with patients are reviewed as they relate to the informative process.

In Chap. 10, I. K. Zola attempts to view the decision to see a doctor in a novel way by presenting data not only on those patients who eventually do see a doctor, but also on those who do not. The distribution of illness in population samples is examined through the use of such measures as field studies, hospital and doctor records, paramedical contacts, social activities withdrawal and self-medication. C. G. Livesay discusses the processes of description and restoration of equilibrium in her consideration of physical illness and family dynamics. Again, coping mechanisms are examined, pertinent literature is reviewed and suggestions for management are made. The

final article by P. S. Kornfeld concerns itself with the hospital environment and its impact on the patient. Observations of patient reactions to specific areas are exposed and suggestions for improvements that may reduce patient anxiety are made. The article may be of significant interest to clinical hospital staff, especially those involved in health care teams.

In conclusion, this volume offers the reader a look at a wide range of materials available in the area of psychosomatic medicine, serving as a valuable resource to those

involved in developing practical but sophisticated models of health care. Hopefully, research using these psychosocial constructs will lead to a more holistic, patient-oriented pattern of medical care.

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