The Mouth, the Face, and the Mind
Edited by Charlotte Feinmann.
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The relationship between the mind and disorders of the mouth and face is not merely a matter for philosophical analysis. The lack of a common clinical language shared by all concerned in patient management remains a significant barrier to the development of liaison psychiatric services. The implicit ‘category error’ in the title of this book thus provides an important reminder of one of the significant blocking factors which continue to hinder improvement in the psychiatric care of patients who present their psychological and emotional distress through physical symptoms. A further category problem arises from the nature of chronic idiopathic facial pain, which has many similarities and overlaps with other somatoform disorders, in that patients may present to different medical or surgical specialties and receive diverse treatments, from antidepressants to surgery.

The main focus of this excellent book is the multi-disciplinary assessment and management of patients with chronic oro-facial pain, together with the presentation of psychosocial morbidity in dental practice and disorders of facial appearance. Although the authors are writing primarily for non-consultants (the book is aimed at dental practitioners and clinicians in related specialities), the text provides a useful synopsis of current opinion about causation and treatment of functional somatic disorders, here with emphasis on presentations with chronic facial pain. The authors take substantial steps towards creating a common vision of management, demystifying the psychiatric approach to this difficult-to-manage group of patients.

Dental practitioners reading this text will, one hopes, recognise their particular opportunity to improve the mental health of their patients. With this in mind, I would have liked to have seen greater discussion of the dental health needs of patients with severe mental illness and conversely of coping with the stresses involved in dental practice. Each chapter is well referenced and there are useful appendices on information for patients and practitioners involved in the treatment of facial pain.

This is a relatively expensive book, but it is recommended for anyone involved in the management of patients with somatic symptoms, whether or not facial pain.

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Psychiatry and the Cinema
By Glen O. Gabbard & Krin Gabbard.

Perplexed by the ‘hermeneutics of suspicion’? Not sure what it means to dream of Michael Caine? Disturbed by the Oedipal content of Casablanca? Then this is the book for you. The brothers Gabbard, academics in psychoanalysis and media studies, respectively, provide an account of two interactions between psychiatry and the cinema: first, how psychiatrists are portrayed in American films; second, how psychoanalytic ideas may inform an interpretation of key films by certain directors. Their book is evenly divided between a data-led account of all American films since 1904 depicting psychiatrists and a more relaxed exposition of psychodynamic themes emerging in the films of Alfred Hitchcock, Woody Allen, Ridley Scott, Robert Altman and others (some of them European, but their films were made in America).

It must be stated that ‘psychiatry’ here translates as psychotherapy, for as the authors demonstrate conclusively, Hollywood has no concept of biological psychiatry. In over 450 films containing screen psychiatrists, the vast majority have depicted analysts, or some version of the ‘talking cure’. In most cases, very little work is done, but the therapist is on hand to provide what is usually a stereotypical plot device: the ficelle, when a therapeutic session fades into a patient monologue serving to update the audience. Occasionally, cathartic cures arise, but they seldom cohere. Biological interventions emerge as punishments, most notably in the form of electroconvulsive therapy or lobotomy.

Psychiatrists have received little sympathy from film makers, their only respite coming in a Golden Era, which the authors place between 1957 and 1963. Prior to that the psychiatrist was usually a European with an exotic air and a vaguely deranged persona; after that she became the functionary of the oppressive state, doing terrible things to non-conformists.

Female psychiatrists have had a particularly bad time of it; rarely do they see the end of the film without falling in love with their patients, ignoring the countertransference and being saved by ‘the right man’—who is often psychotic. The contrast with reality is obvious: when studies have examined psychotherapeutic misdeemours, it is the males who are more likely to err. The Gabbbards argue that Hollywood cannot accept the strong female figure, particularly if she is ‘healing’ a man; the audience’s presumed anxiety is only assuaged if the woman is shown to be vulnerable and ultimately saved by reciprocal male intervention.

The more interpretative chapters may provoke disagreement, but are intellectually stimulating accounts of the medium, infused with the vocabularies of psychoanalysis and semiotics. Sigmund Freud and Melanie Klein receive more attention than does Jacques Lacan (whose relevance to Hitchcock is elegantly explored elsewhere, by Slavoj Zizec (1991)). For trainees in psychiatry who enjoy the cinema, this is an enjoyable and informative text, discussing complex ideas in ways that can be understood by reference to the films. The more adventurous academic programmes may wish to debate whether Melanie Klein’s theories assist in an understanding of the horror and science fiction genres; and whether Humphrey Bogart resolved an Oedipal dilemma in Casablanca, when he gave up Ingrid Bergman. So, here’s looking at you, Id.


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