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Edinburgh University Press). Pp. xi + 144. £9.99.
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Book Reviews

Gavin Miller (2004) *R. D. Laing* (Edinburgh: Edinburgh Review in Association with the Edinburgh University Press). Pp. xi + 144. £9.99. ISBN 1-85933270-6.

Over the course of the 1960s R. D. Laing published a series of books and articles on the clinical, moral and political issues surrounding psychiatrists' diagnosis of schizophrenia and the methods of treatment for the disorder. Laing regarded theories and research into underlying biological mechanisms for schizophrenia as inconclusive and unconvincing. He thus considered physical methods of treatment – insulin coma therapy, electroshock, psychosurgery and the major tranquillizers – to be questionable on clinical and moral grounds. In his own research on schizophrenia, Laing argued that the main symptoms, such as major disturbances of thought and communication, were intelligible as the individual's response to his or her life experience and social environment. Social and psychological factors rather than biological processes were, for him, the basis for understanding schizophrenia.

The secondary literature on Laing is already extensive and in its scale and scope presents a challenge to clinicians and historians as to how to contribute an account that is substantially new and distinctive. Since his death in 1989 a number of biographies have examined his intellectual development, particularly the influence of continental philosophy on his ideas. For those already familiar with Laing and his association with the anti-psychiatry movement, this book examines his work on schizophrenia and criticisms of psychiatry in a different light. Although the focus is primarily on Laing, Gavin Miller also brings culture into the foreground in staking a claim for a Scottish intellectual tradition of personalist philosophy as a major influence on Laing's work. In examining this relatively neglected aspect, the author comes from the perspective of the history of ideas. The value of Miller's account is the attempt to reposition Laing within Scottish intellectual history and thus challenge the weight that previous commentators give to the influence of continental philosophers on Laing's work.

Of the six chapters, the first three are taken up with a summary of Laing's life and career, a survey of the key figures associated with the so-called anti-psychiatry movement, including Erving Goffman and Thomas Szasz,

and a review of Laing's major publications that traces the development of his ideas on schizophrenia. The biographical chapter recounts Laing's education and early experience of clinical psychiatry in Glasgow in the 1950s, and his move to the Tavistock Clinic and training as a psychoanalyst. He was later instrumental in setting up the Philadelphia Association and the therapeutic community based at Kingsley Hall in London. In the discussion of anti-psychiatry Miller concurs with previous commentators in arguing that anti-psychiatrists held a comparatively naïve conception of biological illness in that they understated the extent to which it is also normative and related to cultural values. The review of Laing's published work builds from the existential and phenomenological concerns of his major text, *The Divided Self*, and goes on to the alienating effects of modern capitalism outlined in *The Politics of Experience*, the collection of essays that was to earn Laing his counter-culture status, as well as the disdain of many in the psychiatric profession. Throughout this discussion, Miller emphasizes the consistent line taken by Laing on the intelligibility of schizoid positions and his attempts to understand the experience of schizophrenia.

For those unfamiliar with the main texts, Miller provides an informed summary of the key concepts and evolving themes in Laing's prolific output. At times, however, the extensive use of quotes and references distracts the reader from the narrative flow. Moreover, in drawing attention to the undoubted influence of continental philosophy on Laing, including the ideas of Marx and Sartre, it might be suggested that the author comes close to undermining his own argument for the strength of the Scottish philosophical influence on Laing's work.

The second half of the book is largely taken up with an exploration of the tradition of Scottish personalist philosophy, with its resistance to scientific explanations of personal thought and action, and its emphasis on the understanding of individual experience and human relations. Miller first maps out the continuities between Laing and the Scottish philosopher John Macmurray, and then outlines the clinical viewpoint he shared with Iain Suttie and W. R. D. Fairbairn, leading figures in Scottish psychoanalysis. In the final chapter, the author draws these lines together with a review of the main developments associated with critical psychiatry and the continuing challenge to the dominance of the biological model of psychiatry. The conclusion drawn is that Laing's work was a major force in directing and shaping this resistance to the medicalization of human experience, but that he is also someone whose ideas are largely neglected within Scottish academic and intellectual life.

In terms of sustaining his overall argument for a distinctive intellectual tradition, Miller again encounters potential difficulties in the chapters on Macmurray and Scottish psychoanalysis. Despite sharing a broadly personalist understanding of the individual and human relations, Laing diverged from Macmurray in one crucial aspect. Whereas Macmurray held mental illness to be an abnormal condition which was essentially unintelligible, Laing based

his life's work on making the case for the intelligibility of schizophrenia in psychological and social terms. Arguably, such a difference amounts to a fundamental point rather than a minor detail for authors working in the history of ideas. As regards the discussion of Fairbairn, the problems and limitations of taking a history-of-ideas approach become more apparent. Miller presents Fairbairn to some degree as an isolated figure largely ignored by a monolithic London psychoanalytic establishment. The fact that Fairbairn's professional career was based in Edinburgh does not mean that he was marginalized – far from it. Indeed, Fairbairn was actively involved in the British Psychoanalytical Society, a body characterized by factionalism and theoretical-clinical controversies from the early 1940s onwards. Within this society a split emerged between those from the Freudian tradition, aligned with Anna Freud, and followers of Melanie Klein, whose theory of the paranoid-schizoid and depressive positions in the first year of life challenged Freudian orthodoxy. Although Fairbairn's emphasis on the development of the ego went on to reject Freud's instinctual model of human motivation based on the id, he was in large part influenced by Klein as a transitional figure in the emergence of a fully realized object relations theory of personality and psychopathology. To consider Fairbairn as a leading light of the Scottish personalist tradition is a fair representation of his philosophical outlook, but one that is also partial in terms of his clinical theory and practice.

For clinicians with an interest in the philosophical framework of practice and its implications, there is much to be found in Miller's analysis of the Scottish personalist tradition. Likewise, the book will be of special interest to those working in the field of Scottish cultural history and philosophy. As an introduction to Laing, anti-psychiatry and critical psychiatry, the book provides a reliable and informed guide to the concepts and issues that continue to drive the debate on the dominance of the biological model in the treatment of mental disorder.

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Martin Priwitzer (2007) *Ernst Kretschmer und das Wahnproblem* (Stuttgart: Franz Steiner). Pp. xiv + 314. €49.00. ISBN 978-3-515-08562-5.

To the extent that he is remembered at all, Ernst Kretschmer is certainly best known for his monograph *Körperbau und Charakter* (1921) and his attempt to map athletic, asthenic and pyknic body types onto their respective personality traits and psychopathologies. By the time Kretschmer died in 1964, his book had gone through more than twenty editions and had shaped the attitudes of an entire generation of German psychiatrists. It is surprising, therefore, that instead of focusing upon this book, Martin Priwitzer has