

career terminated when he refused to release a prisoner's confidential file ordered by the warden when he was investigating the murder of a prison official and suspected the prisoner-patient. He was relieved of the file by forcible means.

Ms. Mitford discusses the Patuxent system of "graded tiers" in which the patient must earn his way from the bottom or first tier to the fourth highest tier. Here the basic flaw is felt to be the compulsory nature of the treatment. A rather stalwart patient named Edward Lee McNeil refused to talk to any of the examining psychiatric personnel because his conviction on assault and rape, attained without a jury trial, was up on appeal and the Patuxent people naturally wanted to talk about his crime and any other antisocial acts he had committed. He sat in the bottom tier stubbornly for six years while his case inched its way to the United States Supreme Court. That court, Justice Douglas speaking, felt he had every constitutional right not to be forced to say anything that might endanger his case. Obviously the tools of psychiatry are dulled into uselessness without communication with the patient. The dilemma is how can the patient be protected and the psychiatrist do his work? It would seem nobody has solved this problem to date.

The authoress' indignation really gets going when she tackles the subject of new drug, or other medical experimentation, with prisoners as guinea pigs. She has accumulated facts concerning all sorts of financial arrangements with drug companies and grant getters and the prisoners. In fairness she states the \$1 per day most prisoners earn in these programs is actually a high source of income for them because they appear to earn about 2 cents an hour from the state for their work. Also it seems they get some "good points" on their records for this work and many of them avidly seek such assignments and the wardens use it as a sort of "reward" for the cooperative ones. She discusses the use of sweeping consent forms the prisoners sign to depress law suits. It is true experimentation can be dangerous but I suspect the prisoners fully know that. I also believe that new drug testing is not usually done so carelessly as to be a serious danger assuming the animal work has been completed, as it must by law, and the investigators increase their dosages very cautiously, as any good ones would. I think this area is more shocking to a lay person than to any doctor familiar with the history of medical growth.

The book contains long discussions on questions like the validity of the utilization of the indeterminate sentence, the parole system, prison budgeting, prison riots, statistics, and the like. In most instances she presents a reasonably balanced picture before expressing her personal attitude or taking any positions. It was, perhaps, a wise decision on my part to review this book, because out of the entire membership of the American Academy of Psychiatry and the Law, there probably are few members with so little first hand knowledge of prisons as myself. I read this book with the same inchoate naivety I assume the American public will read it and that might have value.

In concluding Ms. Mitford cannot bring herself to advocate total abolition of prisons although the temptations are strong. The alternatives are too staggering, too mind boggling to consider what might ensue if there were literally no place to put the "bad guys." What then, if we see the limitations on criminal deterrence prisons have? Here finally she weakens as I suspect many who have worked substantial years of their lives in this field have weakened. What's left then if present prisons are so ineffectual? Ms. Mitford tends to dribble away into talking about prison unions, and loosening drug abuse laws to reduce sentences, revising criminal codes, and the like. I minimize these suggestions because they have a *deja vu* element about them that her book does not possess and despite her rational containment; one hoped for more. Maybe there is no more and that would be a sad day indeed.

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The Malpractice of Psychiatry. By DONALD J. DAWIDOFF. Springfield, Ill. (American Lecture Series No. 874), C. C. Thomas, 1973. Pp. xiii, 164. Price \$9.75.

Criticizing this book would be like attacking Hillary if he failed to scale Mt. Everest. The

author's primary objective — to make the case for malpractice actions in relation to the actual manner in which the verbal psychotherapy is conducted — was almost a superhuman one. God knows he struggles valiantly with the legal elements involved in malpractice actions. The task is beyond him. He fails.

Basic malpractice actions (please note there are exceptions) require a fundamental deviation from the accepted standard of medical care. So in preparing such an action the attorney should have as clear a concept as is attainable of what that standard of care should be. It is immediately obvious that no such standard can be honestly set, in most instances, of verbal psychotherapy today. Not only do accepted schools of therapy range over a vast sea of possible principles but also the manner, the chronology, the priorities, the judgments, etc., that go into any individual case are literally endless and quite often purely personal. Often these may be predicted upon the therapist's personal experience or feelings and still be quite proper although they may appear a bit odd to outsiders, or even other therapists.

After correctly allowing for the fact that our law puts no duty on a citizen "to speak skillfully, carefully, or even accurately," he places the doctor-patient relationship in a fiduciary capacity, which it does maintain, and tells us doctors can be held for what they say to patients. Correct. But when it boils down to specifics we get no enlightenment.

Another element of malpractice actions is proximate cause. Simply stated this means the improper act, or deviation from the medical standard involved in the particular case, must be proved to have caused the patient's injury. The law holds that an improper or negligent act standing alone, without proof of having done damage, accrues no action in the plaintiff. So add the burden of proving the connection between specific therapeutic acts to resulting patient damage and you find yourself back in the Herculean stables. Another tough area the author tackles deals with damage dollar evaluation. Courts have some experience here but, as indicated, it is a sticky wicket and I believe judges would be happier men without the problem.

In fairness to the author, Attorney Dawidoff, it should be stated that the implication this book would warn or teach psychiatrists of their vulnerability in the ever-mounting pyre of medical malpractice suits was not put forth by him but by his *Forward* writer, Mr. Ralph Slovenko. Mr. Dawidoff maintains throughout a full and open mind beladen with accurate legal citations and other material as well as his own personal observations. He discusses some interesting cases of physical patient beating by the therapist and sexual contact, or should I say sexual beating, by the therapist. While these outer perimeters of practice are intriguing, they are naturally of limited value to the run of the mill practitioner.

So summing up I would say this is an excellent book for beginners in the area of psychiatry and the law. The writing style is clean and readily understandable. The manner of presentation is logical and uncluttered. It advances little or no new theories or concepts of law that have not been heard before.

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Hustling: Prostitution in our Wide-Open Society. By GAIL SHEEHY. New York, Delacorte Press, 1973. Pp. 273. Price \$7.95.

Among the dozen or so recent books dealing with prostitution, Ms. Sheehy's will probably be the most popular of that subset which stands in the borderland between scholarly endeavor and commercial narrative. Based on two years of circulation in the bloodstream of prostitution, *Hustling* is a compilation of journalistic vignettes which, collectively, portray the anatomy and physiology of that industry. The industry, according to Sheehy, is of considerable magnitude: an estimated 250,000 prostitutes in the United States, at six contacts a day, each netting \$20 or more, produce a gross income in the range of nine billion dollars annually.

Much of the book is in the form of descriptive case histories or short stories, told sometimes in the first person, sometimes from the vantage point of an invisible observer. The material thus presented is replete with metaphor, novelistic imagery, and quotations, but is sparse on