

Welcome to Silkworth.net

Alcoholics Anonymous . . . experience the history . . .

WWW.SILKWORTH.NET

. . . lest we forget!

Site Map | Silkworth | History | Biographies | Big Book | Search | Contact

[GO BACK](#)

email this | print this

Printed Book Reviews of The First Printing of The Book, Alcoholics Anonymous

A COLLECTION OF TWENTY-FIVE REVIEWS OF THE 1ST EDITION
OF ALCOHOLICS ANONYMOUS

Thanks to Jim B. of Canada who put together this presentation of articles. Jim originally had these articles on the web site of historyofaa.com which is no longer online and placed here for historical & research purposes.

Table of Contents

- 01-001 **NEW YORK TIMES**, June 25, 1939
- 01-002 **JOURNAL-LANCET**, Vol.46, July, 1939
- 01-003 **DR. HARRY EMERSON FOSDICK**
- 01-004 **THE CHRISTIAN SCIENCE MONITOR**, Boston, August 17, 1939
- 01-005 **JOURNAL OF THE AMERICAN OSTEOPATHIC ASSOCIATION**, September 1939
- 01-006 **NEW ENGLAND JOURNAL OF MEDICINE**, Vol. 221(15), October 12, 1939
- 01-007 **JOURNAL OF THE AMERICAN MEDICAL ASSOCIATION**, Vol. 113(16), October 14, 1939
- 01-008 **ILLINOIS MEDICAL JOURNAL**, January 20, 1940
- 01-009 **CHRISTIAN HERALD**, August 1940
- 01-010 **JOURNAL OF NERVOUS AND MENTAL DISEASE**, Vol. 42(3), September 1940
- 01-011 **AMERICAN ASSOCIATION OP PSYCHIATRIC SOCIAL WORKERS**, Fall, 1940
- 01-012 **CHURCH SCHOOL MAGAZINE**, December 1940
- 01-013 **SOCIAL PROGRESS**, March 1941
- 01-014 **MENTAL HYGIENE**, Vol. 25(2), April 1941
- 01-015 **WORLD CALL**, June 1941
- 01-016 **THE A.A. GRAPEVINE**, July 1955 - *"Some Facts About The Big Book"*
- 01-017 **BEST SELLERS**, Vol. 15: 96, August 15, 1955

01-018 **SATURDAY REVIEW**, Vol. 38, August 27, 1955

01-019 **MENTAL HYGIENE**, Vol. 41(1), January 1957

01-020 **QUARTERLY JOURNAL OF STUDIES ON ALCOHOL**, Vol. 20 (1), March 1959*

01-021 **THE A.A. GRAPEVINE**, July 1955 - *"The New Big Book"*

01-022 **THE A.A. GRAPEVINE**, August 1976 - *"Third Edition of Big Book Is Now In Print"*

01-023 **EMPLOYEE ASSISTANCE QUARTERLY**, Vol. 1(1), Fall 1985

01-024 **PERCEPTUAL AND MOTOR SKILLS**, Vol. 69,258, 1989

01-025 **THE AUTHORITATIVE GUIDE TO SELF-HELP BOOKS**, The Guilford Press, N.Y., N.Y., 1994

**Posted with permission from Alcohol Research Documentation, Inc., publisher of the Quarterly Journal of Studies on Alcohol (now the Journal of Studies on Alcohol and Drugs [www.jsad.com])*

[GO BACK](#)

[top of page](#) | [Sitemap](#) | [Search](#)

:: Copyright © 2018 Silkworth.net | [Disclaimer](#) | [Privacy](#) | 1 User Online
designed for cross browser support Doteasy.com

Welcome to Silkworth.net

Alcoholics Anonymous . . . experience the history . . .

WWW.SILKWORTH.NET

. . . lest we forget!

Site Map | Silkworth | History | Biographies | Big Book | Search | Contact

GO BACK

email this | print this

BOOK REVIEW

THE NEWS-LETTER

AMERICAN ASSOCIATION OF PSYCHIATRIC SOCIAL WORKERS Fall, 1940

ALCOHOLIC ANONYMOUS

(The story of how more than one hundred men have recovered from alcoholism.)

Publishing Company; 400 pages

This review covers the book, a discussion with the authors, and attendance at the meetings of the New York City group of Alcoholics Anonymous. Contact with this group increases one's respect for their work. To the layman, the book is very clear. To the professional person it is at first a bit misleading in that the spiritual aspect gives the impression that this is another revival movement. The book is simply and clearly written. It gives a vivid picture of the emotional predicament of the person suffering from serious alcoholism. It presents the disorder as a disease; a fatal disease in the social and physical sense. People who have benefitted from the treatment tell their story in simple, compelling language. There are excellent descriptions of what happens to the family of an alcoholic. There is a sincerity and enthusiasm about the writing of this work that commands attention.

ALCOHOLICS ANONYMOUS seems to have succeeded in cases where the physician, the clergyman, the psychiatrist, or the social worker have failed. The method works only with the patient who really wants to get well; who is willing to face the truth about himself - his prejudices, his infantilism, his evasions. It effects its most phenomenal results with the patient who has gone so far that unless he does something drastic he will either become insane, kill himself in drink, or commit suicide. The patient must be willing to admit that he has failed, that he has no power over his drinking, that the "wet-nursing" of his family only makes him worse, that he must do this thing alone. In this frame of mind he selects someone to listen to his story but for the first time in his life he is being really honest with himself and admitting that he is responsible for the mess he has made of his life. When he must prove that he is willing to face reality by trying to patch up some of the antagonisms he has created around him. Then he is ready for some deeper reorganization of patterns. It is a sink or swim psychology; there is no pampering by the group and no protection. The group accepts the new-comer as an adult who really wants to get well; they will show him how but they won't do it for him. Having admitted he has no power over his drinking, he must be willing to allow a higher power to help him. This is no ready made spiritual formula; it is not a church religion. It is a spiritual experience that somehow even extreme atheists seem to have been able to achieve. (One can watch the process of this change at the meetings of the group). The last step in the cure, the part that keeps the patient from slipping back into drink, is that he devotes himself to helping other alcoholics. The movement is kept alive by this type of work.

It is more impressive to the professional person to watch the technique in action than to read the book. The New York City group is made up of intelligent people, many college

graduates, many professional people. There is no holier-than-thou spirit prevailing, there is good fellowship, gaiety, fun, and a real desire to stay sober.

The work is organized under an Alcoholic Foundation, which prevents and alcoholic from obtaining a salary for doing the work. One or two of the group tried using the approach on a fee basis, but the spiritual aspect which keeps these people sober seemed to have died when the patient tried earning money this way; these few people found themselves drinking again and so returned to the volunteer relationship.

This new resource is developing groups all over the country. Social workers will find them of great help with the extreme cases of alcoholism. The book describes the method in detail - it is a layman's approach, a layman's book. It needs no explanation for the patient and should certainly be read by every alcoholic.

Lee R Stainer

New York City

[GO BACK](#)

[top of page](#) | [Sitemap](#) | [Search](#)

:: Copyright © 2018 Silkworth.net | [Disclaimer](#) | [Privacy](#) | 1 User Online
designed for cross browser support Doteasy.com

Welcome to Silkworth.net

Alcoholics Anonymous . . . experience the history . . .

WWW.SILKWORTH.NET

. . . lest we forget!

Site Map | Silkworth | History | Biographies | Big Book | Search | Contact

[GO BACK](#)

email this | print this

BOOK REVIEW

NEW ENGLAND JOURNAL OF MEDICINE, Vol. 221(15), October 12, 1939

ALCOHOLICS ANONYMOUS: The story of how more than one hundred men have recovered from alcoholism. 400 pp. New York Works Publishing Co., 1939, \$3.50.

The psychological aspect of alcoholism taxes the entire skill and intuition of the therapist, and the authors of this book claim that in the long run the ex-alcoholic patient who is properly trained in psychological method is an extremely effective person to bring about the cure of the neurotic alcoholic individual.

The first part of the book discusses methods, with particular stress on twelve steps in the recovery program. This program includes the general principles of psychotherapy found in such books as those by Durfee and Peabody. There is, however, an essentially new note, namely, that the alcoholic individual should be helped to admit to God, to himself and to another human being (preferably an ex-alcoholic patient) the exact nature of his personality deficit. Some will perhaps shy from the emphasis on God and religion until it is realized that the alcoholic patient is asked in this relation to believe sincerely in a power greater than himself. He then sees that his life is really unmanageable without this power.

The second part contains the stories of twenty-nine individuals who were cured by the method of working out their character problems in relation to God, themselves and another human being. All these individuals were "convinced by an ex-alcoholic therapist." Those who at some time must deal with the problem of alcoholism are urged to read this stimulating account.

The authors have presented their case well, in fact, in such good style that it may be of considerable influence when read by alcoholic patients.

[GO BACK](#)

top of page | Sitemap | Search

:: Copyright © 2018 Silkworth.net | Disclaimer | Privacy | 1 User Online
designed for cross browser support Doteasy.com

Welcome to Silkworth.net

WWW.SILKWORTH.NET

Alcoholics Anonymous . . . experience the history . . .

. . . lest we forget!

Site Map | Silkworth | History | Biographies | Big Book | Search | Contact

GO BACK

email this | print this

BOOK REVIEW

NEW YORK TIMES

June 25, 1939

ALCOHOLIC EXPERIENCE

by Percy Hutchison

Alcoholics Anonymous. 400 pp. New York: Works Publishing Company. \$3.50

Lest this title should arouse the risibles in any reader 1st me state that the general thesis of "Alcoholics Anonymous" is more soundly based psychologically than any other treatment of the subject I have ever come upon. And it is a subject not to be neglected, for, irrespective of whether we live under repeal or prohibition, there will be alcohol addicts, precisely as there are drug addicts. It is useless to argue that under one legal condition or another the number will be less or more. When populations are to be reckoned in the million, fractions cease to count. Under prohibition alcohol will be manufactured and bootlegged, as it was during our late "noble experiment," precisely as narcotics are today smuggled and bootlegged. It is, consequently, the individual only who has to be considered, not the problem of supply and dissemination. Alcoholics Anonymous is unlike any other book ever before published. No reviewer can say how many have contributed to its pages. But the list of writers should include addicts and doctors, psychiatrists and clergymen. Yet it is not a book of personal experience, except in a limited sense, any more than it is a book of rules and precepts. Whether the author of a given chapter can be physician or addict, the argument comes hack to a single fundamental; and that is that the patient is unable to master the situation solely through what is termed "will power," or volition. One contributor, who thought he had "got by" on a diet of milk, one day said to himself that he could safely add a little whiskey to his lacteal nourishment. He did. And then a little more, and then a little more. In the end, he was back to the Sanitarium. His "will" was operating one-hundred Per cent; Yet there was a fallacy somewhere. It is to root out this fallacy and supplant it that this book has been compiled. The present reviewer, since this is no ordinary publication, believes it only fair that he should state that at one time he advanced fairly deeply into the field of psychology and he is free to state that the entire superstructure of "Alcoholics Anonymous" is based on a psychology of volition that he himself once advanced but which was never universally acceded to. And that is what we glibly call "will," and usefully so in general practice, should for scientific accuracy be reduced to more elemental terms. And, such an effort made, what results? Just this. That volition, "will power," tracked to its source, is the automatic and irrefutable working of a dominating idea. Consider Napoleon, the man of indomitable will. What does it, in this final psychological analysis, come down to? It comes down to the fact that so exclusively did Napoleon's mind contain the idea that he was the man of destiny that there was no room for any other idea, so that every act, every "willed" action, was the unconscious result of, flowed from, that idea. Here, then, is the key to "Alcoholics Anonymous," the great and indisputable lesson this extraordinary book would convey. The alcoholic addict, and why not change, should it seem we have become too intense, to "the drug addict," cannot, by any effort of what he calls his "will," insure himself against taking his "first dose." We saw how the chap with his whiskey in milk missed out. There is one way for our authors, and but one way. The utter suffusion of the mind by an idea which shall exclude any idea of alcohol or of drugs. Better, let us say the usurpation of the entire ideational tract by this idea. The idea itself may be, perhaps, fairly

trivial. Such as: I do not like alcoholic drinks. In fact, my stomach revolts at their mention. Those who appear to dominate these pages apparently would not subscribe to so simple a formula as I have proposed. But my point is that it might be sufficient; and I base this on the book itself, provided only that their thesis flood, so to speak, the entire ideational tract. Yet would that be possible? Or possible for long? That is the question. And, as a matter of fact, those several authors give it short shrift. I have advanced it solely to exhibit the stark psychological trail on which we have walked. The thesis of the book is, as we read it aright, that his all-embracing and all-commanding idea must be religious. Yet here again should the reader pause, for the writers are talking of what William James called "Varieties of Religious Experience" rather than matters of individual faith. There is no suggestion advanced in the book that an addict should embrace one faith rather than another. He may fall back upon an "absolute," or "A Power which makes for righteousness" if he chooses. The point of the book is that he is unlikely to win through unless he floods his mind with the idea of a force outside himself. So doing, his individual problem resolves into thin air. In last analysis, it is the resigning word: Not my will, but Thine, he done, said in the full knowledge of the fact that the decision will be against further addiction. Most readers will pass this book by. Yet of such a majority many might not be amiss in turning its pages. There but for the grace of God, goes_____. A few will reach for it furtively. It is a strange book. The argument, as we have said, has a deep psychological foundation.

[GO BACK](#)

[top of page](#) | [Sitemap](#) | [Search](#)

:: Copyright © 2018 Silkworth.net | [Disclaimer](#) | [Privacy](#) | **1** User Online
designed for cross browser support Doteasy.com

Home (<https://Silkworth.Net>) / Alcoholics Anonymous (<https://Silkworth.Net/>) / Other Articles (<https://Silkworth.Net/Aa/Other-Articles/>) / Printed Book Reviews (<https://Silkworth.Net/Aa/Other-Articles/Printed-Book-Reviews/>)



Journal – Lancet, Vol.46, July, 1939

158 views 0 aa

BOOK REVIEW

JOURNAL-LANCET
Vol.46, July, 1939

A NEW APPROACH TO PSYCHOTHERAPY IN CHRONIC ALCOHOLISM

by W.D. Silkworth, M.D. New York, New York

The beginning and subsequent development of a new approach to the problem of permanent recovery for the chronic alcoholic has already produced remarkable results and promises much for the future this statement is based upon four years of close observation. As this development is one which has sprung up among alcoholic patients themselves and has been largely conceived and promoted by them, it is felt that this new treatment can be reported freely and objectively.

The central idea is that of a fellowship of ex-alcoholic men and women banded together for mutual help. Each member feels duty bound to assist alcoholic newcomers to get upon their feet. These in turn work with still others, in an endless chain. Hence there is a large growth possibility. In one locality, for example, the fellowship had but three members in September, 1935, eighteen months later the three had succeeded with seven more. These ten have since expanded to ninety.

It is much more than a sense of duty, however, which provides the requisite driving power and harmony so necessary for success. One powerful factor is that of self-preservation. These ex-alcoholics frequently find that unless they spend time helping others to health they cannot stay sober themselves. Strenuous, almost sacrificial work for other sufferers is often imperative in the early days of their recovery. This effort proceeds entirely on a good will basis. It is an avocation. There are no fees or dues of any kind, nor do these people organize in the ordinary sense of the word.

These ex-alcoholic men and women number about one hundred and fifty. One group is scattered along the Atlantic seaboard with New York as a center. Another, and somewhat larger body, is located in the Middle West. Many walks of life are represented, though business and professional types predominate. The unselfishness, the extremes to which these men and women go to help each other, the spirit of democracy, tolerance and sanity which prevails, are astonishing to those who know something of the alcoholic personality. But these observations do not adequately explain why so many gravely involved people are able to remain sober and face life again.

The principle answer is each ex-alcoholic has had, and is able to maintain, a vital spiritual or "religious" experience. This so-called "experience" is accompanied, by marked changes in personality. There is always, in a successful case, a radical change in outlook, attitude and habits of thought, which sometimes occur with amazing rapidity, and in nearly all cases these changes are evident within a few months, often less.

That the chronic alcoholic has sometimes recovered by religious means is a fact centuries old. But these recoveries have been sporadic, insufficient in numbers or impressiveness to make headway with the alcoholic problem as a whole.

The conscious search of these ex-alcoholics for the right answer has enabled them to find an approach which has been effectual in something like half of all the cases upon which it has been tried. This is a truly remarkable record when it is remembered that most of them were undoubtedly beyond the reach of other remedial measures.

The essential features of this new approach, without psychological embellishment are:

1. The ex-alcoholics capitalize upon a fact which they have so well demonstrated, namely: that one alcoholic can secure the confidence of another in a way and to a degree almost impossible of attainment by a non-alcoholic outsider.

2. After having fully identified themselves with their "prospect" by a recital of symptoms, behaviour, anecdotes, etc., these men allow the patient to draw the inference that if he is seriously alcoholic, there may be no hope for him save a spiritual experience. They cite their own cases and quote medical opinion to prove their point. If the patient insists he is not alcoholic to that degree, they recommend he try to stay sober in his own way. Usually, however, the patient agrees at once. If he does not, a few more painful relapses often convince him.

3. Once the patient agrees that he is powerless, he finds himself in a serious dilemma. He sees clearly that he must have a spiritual experience or be destroyed by alcohol.

4. This dilemma brings about a crisis in the patient's life. He finds himself in a position which, he believes, cannot be untangled by human means. He has been placed in this position by another alcoholic who has recovered through a spiritual experience. This peculiar ability, which an alcoholic who has recovered exercises upon one who has not recovered, is the main secret of the unprecedented success which these men and women are having. They can penetrate and carry conviction where the physician or the clergyman cannot. Under these conditions, the patient turns to religion with an entire willingness and readily accepts, without reservation, a simple religious proposal. He is then able to acquire much more than a set of religious beliefs; he undergoes the profound mental and emotional change common to religious "experience" (See William James' Varieties of Religious Experience). Then too, the patient's hope is renewed and his imagination is fired by the idea of membership in a group of ex-alcoholics where he will be enabled to save the lives and homes of those who have suffered as he has suffered.

5. The fellowship is entirely indifferent concerning the individual manner of spiritual approach so long as the patient is willing to turn his life and his problems over to the care and direction of his Creator. The patient may picture the Deity in any way he likes. No effort whatever is made to convert him to some particular faith or creed. Many creeds are represented among the group and the greatest harmony prevails. It is emphasized that the fellowship is non-sectarian and that the patient is entirely free to follow his own inclination. Not a trace of aggressive evangelism is exhibited.

6. If the patient indicates a willingness to go on, a suggestion is made that he do certain things which are obviously good psychology, good morals and good religion, regardless of creed.

a. That he make a moral appraisal of himself, and confidentially discuss his findings with a competent person whom he trusts.

b. That he try to adjust bad personal relationships, setting right, so far as possible, such wrongs as he may have done in the past.

c. That he recommit himself daily, or hourly if need be, to God's care and direction, asking for strength.

d. That, if possible, he attend weekly meetings of the fellowship and actively lend a hand with alcoholic newcomers.

This is the procedure in brief. The manner of presentation may vary considerably, depending upon the individual approached, but the essential ingredients of the process are always much the same. When presented by an ex-alcoholic, the power of this approach is remarkable. For a full appreciation one must have known these patients before and after their change.

Considering the presence of the religious factor, one might expect to find unhealthy emotionalism and prejudice. This is not the case however, on the contrary, there is an instant readiness to discard old methods for new ones which produce better results. For instance, it was early found that usually the weakest approach to an alcoholic is directly through his family or friends, especially if the patient is drinking heavily at the time. The ex-alcoholics frequently insist, therefore, that a physician first take the patient in hand, placing him in a hospital whenever possible. If proper hospitalization and medical care is not carried out, this patient faces the danger of delirium tremens, "wet brain" or other complications. After a few days' stay, during which time the patient has been thoroughly detoxicated, the physician brings up the question of permanent sobriety and, if the patient is interested, tactfully introduces a member of the ex-alcoholics group. By this time the prospect has self-control, can think straight, and the approach to him can be made casually, with no intervention by family or friends. More than half of this fellowship have been so treated. The group is unanimous in its belief that hospitalization is desirable, even imperative, in most cases.

What has happened to these men and women? For years, physicians have pursued methods which bear same similarity to those outlined above. An effort is being made to procure a frank discussion with the patient, leading to self-understanding. It is indicated that he must make the necessary re-adjustment to his environment. His cooperation and confidence must be secured. The objectives are to bring about extraversion and to provide someone to whom the alcoholic can transfer his dilemma.

In a large number of cases, this alcoholic group is now attaining these very objectives because their simple but powerful devices appear to cut deeper than do other methods of treatment because of the following reasons:

1. Because of their alcoholic experiences and successful recoveries they secure a high degree of confidence from the prospects.
2. Because of this initial confidence, identical experience, and the fact that the discussion is pitched on moral and religious grounds, the patient tells his story and makes his self-appraisal with extreme thoroughness and honesty. He stops living alone and finds himself within reach of a fellowship with whom he can discuss his problems as they arise.

3. Because of the ex-alcoholic brotherhood, the patient, too, is able to save other alcoholics from destruction. At one and the same time, the patient acquires an ideal, a hobby, a strenuous avocation, and a social life which he enjoys among other ex-alcoholics and their families. These factors make powerfully for his extraversion.

4. Because of objects aplenty in whom to vest his confidence, the patient can turn to the individuals to whom he first gave his confidence, the ex-alcoholic group as a whole, or the Deity. It is paramount to note that the religious factor is all important even from the beginning. Newcomers have been unable to stay sober when they have tried the program minus the Deity.

The mental attitude of the people toward alcohol is interesting. Most of them report that they are seldom tempted to drink. If tempted, their defense against the first drink is emphatic and adequate. To quote from one of their number, once a serious case at this hospital, but who has had no relapse since his "experience" four and one-half years ago: "Soon after I had my experience, I realized I had the answer to my problem. For about three years prior to December 1934 I had been taking two and sometimes three bottles of gin a day. Even in my brief periods of sobriety, my mind was much on liquor, especially if my thoughts turned toward home, where I had bottles hidden on every floor of the house. Soon after leaving the hospital, I commenced to work with other alcoholics. With reference to them, I thought much about alcohol, even to the point of carrying a bottle in my pocket to help them through the severe hangovers. But from the first moment of my experience, the thought of taking a drink myself hardly ever occurred. I had the feeling of being in a position of neutrality. I was not fighting to stay on the water wagon. The problem was removed; it simply ceased to exist for me. This new state of mind came about in my case at once and automatically. About six weeks after leaving the hospital my wife asked me to fetch a small utensil which stood on a shelf in our kitchen. As I fumbled for it, my hand grasped a bottle, still partly full. With a start of surprise and gratitude, it flashed upon my that not once during the past weeks had the thought of liquor being in my home occurred to me. Considering the extent to which alcohol had dominated my thinking, I call this no less than a miracle. During the past year of sobriety I have seriously considered drinking only a few times. On each occasion, my reaction was one of fear, followed by the reassurance which came with my new found ability to think the matter through, to work with another alcoholic, or to enter upon a brief period of prayer and meditation. I now have a defense against alcoholism which is positive so long as I keep myself spiritually fit and active, which I am only too glad to do."

Another interesting example of reaction to temptation comes from a former patient, now sober three and one-half years. Like most of these people, he was beyond the reach of psychiatric methods. He relates the following incident:

"Though sober now for several years, I am still bothered by periods of deep depression and resentment. I live on a farm, and weeks sometimes pass in which I have no contact with the ex-alcoholic group. During one of my spells I became violently angry over a trifling domestic matter. I deliberately decided to get drunk, going so far as to stock my guest house with food, thinking to lock

myself in when I had returned from town with a case of liquor. I got in my car and started down the drive, still furious. As I reached the gate I stopped the car, suddenly feeling unable to carry out my plan. I said to myself, at least I have to be honest with my wife. I returned to the house and announced I was on my way to town to get drunk. She looked at me calmly, never saying a word. The absurdity of the whole thing burst upon me and I laughed and so the matter passed. Yes, I now have a defense that works. Prior to my spiritual experience I would never have reacted that way."

The testimony of the membership as a whole sums up to this: For the most part, these men and women are now indifferent to alcohol, but when the thought of taking a drink does come, they react sanely and vigorously.

This alcoholic fellowship hopes to extend its work to all parts of the country and to make its methods and answers known to every alcoholic who wishes to recover as a first step, they have prepared a book called *Alcoholics Anonymous**. A large volume of 400 pages, it sets forth their methods and experience exhaustively, and with much clarity and force. The first half of the book is a text aimed to show an alcoholic the attitude he ought to take and precisely the steps he may follow to effect his own recovery. He then finds full directions for approaching and working with other alcoholics. Two chapters are devoted to working with family relations and one to employers for the guidance of those who surround the sick man. There is a powerful chapter addressed to the agnostic, as the majority of the present members were of that description. Of particular interest to the physician is the chapter on alcoholism dealing mostly with its mental phenomena, as these men see it.

By contacting personally those who are getting results from the book, these ex-alcoholics expect to establish new centers. Experience has shown that as soon as any community contains three or four active members, growth is inevitable, for the good reason that each member feels he must work with other alcoholics or perhaps perish himself.

Will the movement spread? Will all of these recoveries be permanent? No one can say. Yet, we at this hospital, from our observation of many cases, are willing to record our present opinion as a strong "Yes" to both questions.

*EDITOR'S NOTE. The book, *Alcoholics Anonymous* (\$3.50) may be secured from The Alcoholic foundation, Post Box 658, Church Street Annex, New York City.

BOOK REVIEW:

JOURNAL OF THE **AMERICAN MEDICAL ASSOCIATION**

Vol. 113(16), October 14, 1939

ALCOHOLICS ANONYMOUS. *The story of how more than one hundred men have recovered from alcoholism.* Cloth. Price: \$3.50, 400 pp., New York: Works Publishing Company. 1939.

Those who generally underestimate the seriousness of a psychiatric and social problem, represented by addiction to alcohol, are not immediately familiar with the tragedies in the families of victims, or the resistance addicts offer to any effective treatment. Many psychiatrists regard addiction to alcohol as having a more pessimistic prognosis than schizophrenia.

For many years, the public was beguiled into believing that short courses of enforced abstinence and catharsis in "institutes" and "rest homes" would do the trick, and now that the failure of such temporizing has become common knowledge, a considerable number of other forms of quack treatment have sprung up. The book under review is a curious combination of organizing propaganda and religious exhortation. It is in no sense a scientific book, although a letter introduces it from a physician who claims to know some of the anonymous contributors who have been "cured" of addiction to alcohol and have joined together in an organization, which would save other addicts by a kind of religious conversion.

The book contains instructions as to how to intrigue the alcoholic addict into the acceptance of divine guidance in place of alcohol in terms strongly reminiscent of Dale Carnegie and the adherents of the Buchman ("Oxford") movement. The one valid thing in the book is the recognition of the seriousness of addiction to alcohol. Other than this, the book has no scientific merit or interest.