

## Book Reviews

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Editor: Sidney Crown

**Seasonal Affective Disorder.** Edited by C. THOMPSON and T. SILVERSTONE. London: CNS Publishers. 1989. 278 pp. £19.80.

This is a stimulating and topical book. Here are groups of patients, predominantly women, who each spring or autumn become depressed, gain weight or have a craving for sweet things. In these latter respects they differ from classical endogenous depressives who also have a spring peak incidence. Nosologically, seasonal affective disorder (SAD) does not conform to existing classifications – endogenous/reactive, psychotic/neurotic, unipolar/bipolar, etc.

Among others, there are chapters on the seasonality of depression, seasonal variations in mania, and prospective studies in infradian mood rhythms and SAD. There are contributions from Switzerland, New York and the National Institute of Mental Health (NIMH). Much of the book is devoted to phototherapy and its affect on melatonin, serotonin and noradrenalin.

Although this book marshals an impressive body of evidence for the existence of SAD, this is mainly anecdotal and is mostly confined to the USA. There is as yet no large-scale study comparing SAD with non-SAD depressives. Since SAD is so dependent on the physical environment, questions arise concerning its correlation with latitude. It is surprising therefore to read (p. 119) that as yet only one study – that of Potkin *et al* – has on the basis of a newspaper advertisement, attempted to address this problem. The point is made that it would be worthwhile to design a more scientific study to assess the seasonal incidence of symptoms in different parts of the world – advice which should be followed by some of the investigators. A group of workers at the NIMH found that overnight production of melatonin and prolactin was reduced in 15 SAD patients. Other researchers, however, find that these changes are not confined to SAD patients.

Is all this anything new? A seasonal incidence of psychiatric disorders has been recognised since Kraepelin. Why then is it only now that SAD is described? If the incidence of SAD is maximal at latitude 40°N (i.e. approximately Washington, New York and California) why is it not more often described in Europe? What happens in the Southern hemisphere – Australia, South Africa and South America? If SAD is to do with bad weather conditions or lack of sunlight, why is it not

more often found in the British Isles and Scandinavia – not to mention in the perpetual darkness of north Norway, Spitzbergen or on polar expeditions. Why were there then no cases during the British Antarctic expedition? In a sizeable proportion of the British SAD patients described, depression was not so much seasonal as related to bad weather and cloud cover.

This is not to knock gratuitously the concept. Some contributions to this volume were particularly interesting and informative. In a series of elegant experiments Checkley concluded that the antidepressant affects of bright light are more than a placebo. Thompson, comparing three different forms of light, concluded that augmented bright light in the middle of the day is the most efficacious.

Obviously a formal placebo-controlled double-blind trial is not feasible as light has to strike the retina to work. Indeed, we do not know how bright light is antidepressant. The suggestion that phototherapy is as effective as more traditional therapies is pure conjecture.

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**Exiles from Eden: Psychotherapy from an Evolutionary Perspective.** By KALMAN GLANTZ and JOHN K. PEARCE. London: W. W. Norton. 1989. 319 pp. £25.00.

This book describes a form of psychotherapy in which the premise is that basic human attitudes and behaviours evolved in the context of primate hunter-gatherer bands. Human beings are therefore essentially adapted for this lifestyle and not having (yet?) evolved further to be adapted to agricultural society, let alone a modern industrial one, they will obviously have problems with the modern world. This mismatch is regarded as the basis of many mental health problems.

The hunter-gatherer groups are referred to as “the natural environment” (the ‘Eden’ of the title) and a number of attitudes adapted to this environment are described in the first part of the book. For example, the authors are in agreement with the views of others that characteristics such as reciprocity are inherited, having been selected by the reproductive success of groups