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Chapter three forms the core of the treatment manual. This section is clearly written and well structured and provides the clinician with a detailed step-by-step guide to the assessment, formulation and treatment of command hallucinations. The assessment section includes an extensive list of questionnaires and rating scales specifically developed to identify beliefs about voices, as well as more general measures of symptoms and distress. Some of the more specific measures are included in the appendices, which are useful for the busy clinician. The intervention stage is mainly concerned with challenging the dysfunctional beliefs about voices. It has several sub-sections on questioning the client's evidence, developing a line of logical reasoning that exposes inconsistencies in the person's beliefs, reality testing of beliefs, normalizing the voices and responding more assertively to them. A case study is presented at the end of the chapter, which helps to illustrate the application of the manual.

Chapters four to ten describe in detail seven case studies of participants in the CBT for command hallucinations trial. They all follow the same structure, beginning with some brief background information about the individual, followed by the main sections of assessment and treatment as outlined in chapter three. They conclude with a descriptive summary of the outcome, a comparison of pre- and post-therapy measures, and recommendations for continuing care. Whilst giving a good flavour of therapy, I found them slightly repetitive and perhaps more useful for novice therapists rather than experienced practitioners. I would have welcomed a brief introduction at the beginning of each case study to make it clearer what particular problem or challenge the case study is dealing with.

The final chapter presents the findings from the randomized controlled trial comparing the efficacy of CBT for command hallucinations versus treatment as usual. A total of 38 people participated in the trial. They found that CBT was effective in reducing compliance and distress when undertaken according to the protocol described in this book.

I found this to be an interesting and clinically relevant text, which I imagine will be of use to experienced and novice practitioners alike, working with people with psychosis in community, inpatient and forensic settings.

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Gilbert, P. (1992). Depression: the evolution of powerlessness. Hove, UK: Lawrence Erlbaum Associates.

Handbook of Brief Cognitive Behaviour Therapy

Frank W. Bond and Windy Dryden (Eds.) Chichester: John Wiley & Sons, 2002. pp. 318. £105.00 (hb). ISBN: 0-471-49107-1. doi:10.1017/S1352465806003456

This book is well-written and well-edited, with clear chapters on several useful practical and theoretical aspects of brief cognitive behavioural therapy (CBT). The emphasis is on usability, and the book is a valuable resource for brief CBT practitioners.

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The first couple of chapters of this book give useful background to brief CBT: a definition, review of the scientific foundations, and attempt to address specific assessment issues. The bulk of the chapters then concentrate on treatment of specific disorders using brief CBT. Chapters cover treatment of depression, panic disorder with agoraphobia, anger, generalized anxiety disorder, social phobia, and substance abuse. These chapters are thoughtfully laid out and very useful as a reference point for therapists wanting to carry out brief CBT with a client suffering from any of these problems. The chapters provide brief background and summary of the model, and go on to suggest formulations and treatment approaches in detail. There are also chapters focusing on brief CBT with couples, and with children and adolescents, the less well-known acceptance and commitment therapy (ACT) approaches, and more general chapters on evaluation strain and therapist burn out.

Contributions come from several different authors, giving expert perspectives on each subject, including some from such respected veterans as Albert Ellis and Adrian Wells. The chapters form a cohesive whole, with a shared clarity and sense of focus. One criticism might be that it is a shame that there are not a few more chapters, encompassing treatment ideas for OCD, low self-esteem and other phobias.

This book is very useful to have at hand when planning treatment or looking for background knowledge of the brief CBT approach. Its title of 'handbook' perhaps implies that it is more comprehensive than it is, and hopefully future editions will include more disorders. Still, it is a very useful reference book for any therapist working within the brief CBT framework, and for students of the approach. It is readable enough to be read straight through, as well as to dip into.

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Cognitive Therapy Across the Lifespan: Evidence and Practice

Mark A. Reinecke and David A. Clark (Eds.)

Cambridge: Cambridge University Press, 2004. pp. 548. £40.00 (pb). ISBN: 0-52153-377-5. doi:10.1017/S1352465806003559

The book is composed of 20 chapters plus what seems to be the obligatory "stamp of approval" for a cognitive therapy (CT) text – a foreword by Aaron T. Beck. The majority of the chapters are dedicated to adult psychopathology and feature the "usual suspects" found in books of the same ilk: depression, panic, social phobia, obsessive compulsive disorder (one chapter covering theory and another covering treatment), generalized anxiety disorder, post-traumatic stress disorder, and alcohol abuse. In addition, there are also chapters on bipolar disorder, schizophrenia, bulimia nervosa, and narcissistic personality disorder. Four chapters are dedicated to child psychopathology, focusing on both internalizing disorders (anxiety and depression) and externalizing disorders (Attention Deficit/Hyperactivity Disorder and conduct problems). Additional chapters consider CT and the self, as well as addressing processes of change in CT. These are sandwiched between a conceptual introduction to CT across the lifespan and a concluding chapter on the current status and future directions of CT, both of which are written by the editors.

If one is looking for a "How to..." (e.g. Assessment, Formulation, Intervention, Evaluation), then this is probably not the book for you. A notable exception, however, is the excellent chapter