

## Book reviews

*Psychological Medicine*, **34** (2004).  
DOI: 10.1017/S0033291704212521

*Theory and Practice of Psychiatry*. By B. J. Cohen. (Pp. 558; \$89.50.) Oxford University Press: New York. 2003.

*Theory and Practice of Psychiatry* by Bruce J. Cohen is an outstanding contribution to our literature, well-suited for medical students and others interested in a general introduction of psychiatry. I found it to be readable from front to back or one chapter at a time depending on one's needs. The text is unique, as it represents the work of a single author, who cogently articulates a systematic approach to psychiatry.

The introductory chapter offers the reader an understanding of the challenges of psychiatry to: (1) establish reliability in our descriptions of phenomenology; (2) establish validity of our hypotheses; and (3) understand the form and function of behaviour. These baseline principles stand as a challenge to a student, resident, or practitioner of psychiatry.

The author has produced an intelligent and well-written chapter on the clinical assessment and mental status examination in clinical practice. The section on depiction of neurological signs and symptoms is very useful for the practicing psychiatrist.

The reader is introduced next to the organizing principles of the text. Following the approach of McHugh and Slavney, Dr Cohen urges the student to understand the patient from four clinical perspectives: (1) disease; (2) dimension; (3) behaviour; and (4) life-story. The author effectively uses clinical examples to highlight these different, but complementary perspectives.

As a final introductory chapter, the author introduces a current and concise overview of the prevailing neurobiological theories that underlie psychiatric practice. This understanding provides a necessary background to modern psychiatric practice and provides the student with an organized summary of the neurophysiological processes that inform our understanding of brain adaptation and plasticity.

Next, the author, a consultation psychiatrist, introduces a comprehensive overview of the major cognitive disorders seen in general medical practice, specifically delirium and dementia. His systematic approach to diagnosis and treatment intervention is extremely well articulated, giving the reader an up-to-date understanding of this critical area of psychiatry.

As an author myself for textbook chapters on depression, I found Dr Cohen's chapter on mood disorder to be clear, coherent and compelling. The author clearly highlights the relevant psychological (psychodynamic, cognitive and interpersonal) therapies for depression as well as the range of biological therapies.

The chapter on schizophrenia and other psychotic disorders offers the reader a broad historic, nosologic and empirical view of schizophrenia and related disorders. The overall public health burden is appropriately emphasized as is our new understanding of biology and treatment.

The chapter on anxiety disorders thoroughly addresses the DSM-IV anxiety-related disorders. The author carefully summarizes the prevailing psychodynamic, cognitive-behavioural, genetic and neurobiological hypotheses that address these disorders. In particular, Dr Cohen provides an effective discussion of post-traumatic stress disorder, understandable to students and practicing clinicians.

A comprehensive discussion of personality traits as well as personality disorders follows in a chapter devoted to this area of psychiatry. The chapter is neither overly dynamic nor descriptive, but offers the reader an appropriate balanced understanding of character as it is currently conceptualized by the field.

In an excellent overview of the history, neurobiology, and psychobiology of eating disorders, the author emphasizes both behavioural and disease perspectives. The thoughtful discussion of prognosis follows from an organized treatment approach to eating disorders.

Subsequent chapters on substance-related, somatoform and dissociative disorders give

excellent attention to important and under-appreciated areas in the medical psychiatry interface as well as the medical costs associated with these conditions. Relevant genetic and environmental aspects of these conditions are carefully explicated. Dr Cohen conscientiously addresses the controversies about dissociation and dissociative disorders and appropriately discusses the link between early abuse and later psychological and physiological sequelae.

A chapter devoted to sexual and gender identity disorders provides the reader with an informative summary of sexual response and associated disorders in both sexual functioning as well as gender identity.

There are separate chapters on suicidal behaviour and violent behaviour. The author describes a comprehensive approach to assessing suicidal risk and managing suicidal behaviour. The background data on suicide and review of relevant studies represents a succinct, but thorough understanding of this critical topic. While violence is sometimes overlooked in other texts, the author carefully delineates risk factors associated with violent behaviour. In addition, the legal obligations of the clinician are fully discussed.

In a chapter addressing psychotherapy, Dr Cohen offers an elegant introduction to an individual's inner reality, emphasizing 'underlying genetic endowments, intelligence, temperament, and personality'. He emphasizes the important cost-offset associated with providing psychotherapy in both the general medical as well as psychiatric setting. The overall clarity in the description of psychotherapeutic approaches is remarkable.

The chapter on childhood disorders offers insight into the differences in presentation between childhood and adult psychiatric disorders. The author appropriately emphasizes the early manifestations of bipolar disorder and risks associated with treating pre-pubertal and adolescent depression, when these episodes are an early manifestation of bipolar disease. The significant morbidity and mortality associated with childhood mood disorders is described. In addition, the epidemiology, diagnosis and treatment of childhood ADHD is discussed extensively.

In the concluding chapter on forensic psychiatry, the author clarifies the differences

between clinical examination and forensic evaluation. The chapter stands alone as an outstanding contribution to a sometimes controversial area in psychiatry. The reference list for this chapter is quite helpful.

In summary, *Theory and Practice of Psychiatry*, as a single author book introducing the student or resident to current psychiatric practice, is modern in its approach, up to date, and very readable. I intend to recommend it highly to directors of medical student education and residency training. As a psychiatrist in full-time clinical practice, I found it highly useful and thoughtful. Dr Cohen's writing is characterized by clarity, compassion and coherence.

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*Psychological Medicine*, 34 (2004).

DOI: 10.1017/S0033291704222528

*Early Prevention of Adult Antisocial Behaviour.*

Edited by D. P. Farrington and J. W. Coid. (Pp. 379; £47.50, ISBN 0-521-65194-8.) Cambridge University Press: Cambridge. 2003.

General psychiatrists, assessing and treating neurotic and psychotic disorders in adults, are often puzzled by the emphasis put on the importance of a child psychiatry background in the training of psychiatrists. It is unusual, they say, for them to come across adults who have attended a child psychiatrist earlier in their lives. This is, however, not the case for those whose work is in the adult forensic field. The contrast is striking. Nearly all the adults seen by forensic psychiatrists have shown disturbed behaviour in childhood. Most have been seen in specialist child and adolescent services at some time or other.

The roots of antisocial behaviour are now well described. Following Lee Robins' classic 1966 text 'Deviant Children Grown Up', a large number of longitudinal studies have identified patterns of continuity as well as risk and protective factors. While effective treatments for conduct disorder in childhood, let alone adult antisocial personality disorder have been slow to appear, so, appropriately, interest in the possibilities of prevention have grown.

This multi-authored book is edited by a criminologist and a forensic psychiatrist, both with a strong interest in lessons for effective

prevention that can be learned from longitudinal and intervention studies. They have succeeded in producing a comprehensive and up-to-date account of relevant work. The first three chapters provide an overview of the field from slightly different perspectives. Farrington first reviews the field generally and Coid focuses on whether the evidence supports a population or targeted approach to prevention, coming down in favour of the former, but with the proviso that preventive measures are unlikely to be effective without careful monitoring of their effects. Loeber and his colleagues then consider risk factors with a particular emphasis on the controversial area of links between Attention Deficit Hyperactivity Disorder (ADHD) and later antisocial behaviour. They conclude that ADHD by itself is not a risk factor for conduct disorder and later antisocial personality disorder (APD), but that it *is* associated with an earlier onset of conduct disorder and is therefore an indirect risk factor for APD.

Moffitt and Caspi, drawing on the remarkable data now emerging from their longitudinal study based in Dunedin, New Zealand, discuss partner violence, an often neglected area in the field of antisocial behaviour. They point first to the degree young children's antisocial behaviour is promoted by witnessing violence between their parents. (Although they do not quote it, Skuse's demonstration of the significance of witnessing parental violence in the genesis of later sexual abuse by adolescents and young men is supportive of their thesis.) They then point to the evidence that adult partners who are violent towards each other are also at increased risk of abusing their children. Finally they discuss the prevalence of partner violence in the early intimate relationships of adolescents.

After a comprehensive discussion of protective factors and resilience by Losel and Bender, subsequent chapters describe the evidence for the effectiveness of interventions in early childhood and the school years and, specifically, in females. It is generally concluded that there is reasonably good evidence that well-supported preventive programmes can work, but that attrition or non-compliance are major problems. The lack of parenting programmes for adolescents and their parents is also noted. After a useful chapter on the economic costs and benefits of preventive programmes that

contains a helpful summary table, Farrington and Coid provide a concluding chapter proposing, amongst other measures, a national agency with the primary function of fostering and funding the prevention of crime and antisocial behaviour. In fact, it would not be difficult to extend the range of the activities of the Youth Justice Board for England and Wales to achieve the organization they seem to have in mind.

I thought the chapters in this book covered the topic comprehensively and at a uniformly high level. The book would be indispensable to anyone working in research in this field and most helpful to clinicians interested in prevention.

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*Psychological Medicine*, 34 (2004).

DOI: 10.1017/S0033291704232524

*The Treatment of Drinking Problems: A Guide for the Helping Professions, 4th edn.* By G. Edwards, E. J. Marshall and C. C. H. Cook. (Pp. 412; £34.95/\$50.00, ISBN 0-521-01714-9 pb.) Cambridge University Press: Cambridge, 2003.

*The Treatment of Drinking Problems* has become the foremost text in this field since its first publication and has been translated into six languages. This, the fourth edition, has been thoroughly revised and updated. It provides a comprehensive overview of the subject and combines theory with practice. The chapters are full of references embedded in succinct eloquent prose accessible to all professionals.

The book is divided into two parts: Part I 'Background to Understanding' and Part II 'Screening, Assessment and Treatment'. Whilst Part II would probably be where readers might be tempted to start, Part I should certainly not be skimmed over.

Part I is fundamental to providing comprehensive treatment and not only within the alcohol treatment services but also other services where alcohol problems are encountered. Throughout the text one is assisted in reflecting on one's own clinical practice by case scenarios and well-considered questions. This not only makes the text more interesting but also places theory within its relevant clinical context.

The book opens with a new chapter 'The History of treatment for drinking problems'; this puts current treatment in context by explaining its evolution and also emphasizing the importance of learning lessons from the past. The following chapter on the causes of drinking problems touches on political and economic factors and incorporates discussion on prevention and treatment.

The authors have explained, to a large degree, the terminology used, however two chapters 'Alcohol as a drug' and 'Physical complications of excessive drinking' might require a medical dictionary. The reader with a social work background or experience outside the health profession may encounter some difficulty. Nevertheless the biochemical and metabolic features of alcohol, including the neurotransmitters and brain receptors are explained clearly and simply and in the most accessible form that I know of. Furthermore it is applied clinically by explaining the development of some physical complications and the rationale for some treatments.

The chapter on alcohol dependence syndrome not only explains the symptoms but also covers the importance of a full assessment so that an accurate understanding of the degree of dependence can be made. The authors emphasize that this is not for the purpose of a diagnostic label but rather to help clarify the problem for the patient and plan appropriate treatment.

Reflecting the importance of increased multi-disciplinary awareness of alcohol problems and its close liaison with psychiatry this edition contains a new chapter on 'Alcohol problems and psychiatric co-morbidity'. The chapter provides prevalence data and clearly explains the main psychiatric illnesses associated with alcohol problems and gives sensible advice on management. Similarly, the chapter on 'Alcohol and other drug problems' emphasizes the importance of integrating alcohol and drug treatment. It also deals with the issue of misusing substances in general rather than focusing on a primary drug of abuse. It details specific combinations of drugs and alcohol and discusses the reasons for combining, prevalence rates and associated risks. It especially gives clear sensible advice on benzodiazepine misuse.

The second part 'Screening, Assessment and Treatment' is thorough with a logical

progression. Assessment is approached in an empathic but probing manner and this is described by giving example questions rather than simply a list of topics that should be enquired of. The whole assessment is then summarized in table format and classification of substance dependence for both ICD-10 and DSM-IV is included. Treatments of withdrawal states are discussed with respect to the setting, monitoring and the use of various medications. The authors remain focused on the importance of competency in identifying and tailoring the treatment to the needs of the patient. The chapter on 'The basic work of treatment' discusses the core principles for all helping professionals, including those not working directly in the alcohol-treatment arena. For example, the part on therapeutic relationships and patterns that can be counter-therapeutic is particularly insightful. Not only are the main therapies explained and their evidence critically reviewed but also less common treatments have been included such as ondansetron and dopamine antagonists.

The final chapters cover the everyday practical and managerial issues that are often omitted from textbooks. The chapter 'When things go wrong and putting them right' provides solutions to commonly encountered situations, which are illustrated with case scenarios. The final chapter 'Treatment settings, professional roles and the organization of treatment services' explains the roles of different professionals, organizations, and how they contribute to treatment and work efficiently together. This largely addresses the British system but also includes countries where programmes have been pioneered, primarily the USA. Therefore it is of much interest to the international readership as a source of information and also to stimulate debate.

In this fourth edition one would find it difficult to uncover something missing. Perhaps one item that would make this book even more complete is if examples of research tools and withdrawal scales were included, with their guidelines.

In summary this book has been written in a style that is easily accessible to all professionals, salient points are highlighted in boxes, case scenarios are appropriately used and medical terminology is clearly explained. It fulfils its subtitle as 'A Guide for the Helping Professions'

and undoubtedly will remain the leading authoritative text for the treatment of drinking problems.

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*Psychological Medicine*, 34 (2004).  
DOI: 10.1017/S0033291704242520

*Terrorism and Disaster. Individual and Community Mental Health Interventions.* Edited by R. J. Ursano, C. S. Fullerton and A. E. Norwood. (Pp. 349; £39.95/\$55.00, ISBN 0-521-53345-7 pb; £110.00/\$150.00, ISBN 0-521-82606-3 hb.) Cambridge University Press: Cambridge. 2003.

Terrorism is a hot topic. With the number of terrorist attacks and disasters seemingly endless it is timely to release a book aimed at providing mental health professionals with an overview. It follows on from Ursano *et al.*'s previous book *Trauma and Disaster: The Structure of Human Chaos* with the preface declaring it to 'broaden the scope' of this previous book. In effect chapter two of the earlier book becomes the focus for this new volume with a detailed look at the effects of terrorism apposite given recent events. Indeed, September 11th looms large in the chapter titles and opening text of the book.

Readers familiar with the previous book will be interested to know which chapters survived, albeit in altered form; six to my reckoning with one additional topic retained but covered by a different author which lends for an interesting comparison. The 18 chapters are split into four sections of variable length with part one comprising only the introduction.

The strength of this text is the breadth of its coverage. Excellent chapters discuss the pros and cons of screening, intervention for survivors of prolonged adversity and relocation stress. I struggled to excuse my own failure to undergo an ATLS1<sup>R</sup> (Advanced Trauma Life Support) training course in the face of such challenging and structured an argument from James Rundell who discusses the liaison psychiatry approach to disaster/terrorism. The book manages to cover childhood exposure to war and terrorism, the important lessons of September 11th and its aftermath, individual and organizational interventions after terrorism, population-based health care, screening, debriefing, approaches

to early intervention, aspects of contamination, and the effects of traumatic death. Whilst it does not dwell upon media or legal issues both are mentioned. Chapter 3 was most welcome with its insights into the role of leadership after a terrorist attack, in this case the American Embassy bombing in Nairobi. By inviting Ambassador Prudence Bushnell to write this chapter on leadership during a terrorist attack the editors allow us a glimpse of leadership from a different and all-to-welcome perspective.

The weaknesses of this book are threefold. Firstly, it is heavily dominated by American and Israeli authors and their experience. Whilst much outstanding research is presented it is to be hoped that the absence of European researchers and authors (amongst others) does not lessen its readership in Europe. The lessons of events such as September 11th attacks are at least as applicable in Europe with its lengthy history of terrorism. Secondly, in parts it is not well ordered with the overview in section three highlighting the lack of a similar chapter in other sections. In addition, whilst the chapters in section three sit easily together those elsewhere do not and some fail to match the section heading. For example in the second section two chapters focus upon children's response and experience in the midst of chapters on leadership and the impact of the September 11th terrorist attacks. Thirdly, the early concentration upon the terrorist attacks of September 11th serves to throw the reader into believing the book will be dominated by these events and their sequelae. In fact the book manages to provide a comprehensive overview of all aspects of terrorism and disasters.

The textbook is accompanied by a CD-ROM entitled 'Disaster Psychiatry – Individual and Community Interventions'. The disk has sections on psychiatric response to disaster, debriefing and working within federal disasters with each formatted as an introduction and a Powerpoint presentation. Though derived from a conference the disk complements the textbook well and avoids major contradiction with it.

In summary, this is a comprehensive and authoritative text packed with challenging observations and up-to-date experience, facts and opinions. The editors have brought together many key opinion leaders in the field amongst over 40 contributors and despite the subject

matter the authors are eloquent witnesses for humanity and compassion. There are extensive references at the end of most chapters. The layout of the text is easy to negotiate with liberal use of diagrams and summary tables. A text-book such as this is well timed and will provide a useful source of information for any mental health professional involved in the response to traumatic situations.

ALASTAIR HULL

*Psychological Medicine*, 34 (2004).  
DOI: 10.1017/S0033291704252527

*Unipolar Depression – A Lifespan Perspective*.  
Edited by I. M. Goodyer. (Pp. 211; £24.95;  
ISBN 0-19-851095-0.) Oxford University  
Press: Oxford. 2003.

In these days of increasing specialization in psychiatry, where every service is developing crisis resolution teams, early intervention teams and assertive outreach teams, it can feel as if patients themselves need to be pigeon-holed and labelled according to their current needs and diagnosis. Once labelled they will be passed on to the appropriate team, only to be passed on again if their needs change. This has always seemed the case with age, so that child and adolescent psychiatrists tend to have separate services, separate training programmes and separate educational events from general adult and old-age psychiatrists. It can feel as if young people are catapulted into the adult service overnight on their seventeenth birthday and suddenly no one is interested in seeing their family any more. There are very few people who can rise above these divides and try to convey the bigger picture of the longitudinal development of health and disorder across the lifespan. Ian Goodyer is one of those people and this

book is based on an excellent idea. It takes the phenomenon of unipolar depression and invites experts to describe the clinical features, aetiology, management and outcome in various age groups. There are chapters on intergenerational transmission (the impact of postnatal depression in the mother on the infant), the school-age child, adolescence, early adult life, midlife and later life. Sadly there is no chapter on postnatal depression itself, which I think would have fitted in nicely with the overall theme.

Unfortunately, although I think the book is a great idea, and it is full of fascinating facts, it did not really grab me or hold my attention. Even though I am interested in the subject some of the chapters felt quite a chore to read. Some are so stuffed with references that it is like reading a telephone directory, there is no story to hang on to, none of the bigger picture which seemed to be promised by the title. There are a couple of excellent chapters which do live up to this promise, notably the ones on adolescence and on later life. These are well written and summarize the latest research findings without going into detail about every study and losing the reader along the way. Perhaps more vigorous editing or a more standardized style for each chapter would have helped maintain the focus of the book on the longitudinal perspective.

The book seems quite expensive for its size but in terms of factual content it is a bargain. I would recommend this book for anyone interested in the latest developments in the field of unipolar depression, and certainly for anyone who is about to give a talk on it! I think it would be appropriate for any psychiatrist, whatever their level of training, and certainly worth having in any library where psychiatrists are at work. Just don't expect it to be a pleasure to read.

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