

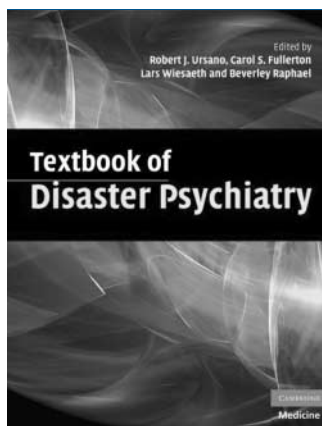
of mean QTc increase following administration of intramuscular ziprasidone.

The editors state that the chapters are 'tutorials' and it is quite clear that they are not reviews of the area. The authors seem to have been asked to produce 20-page articles with case examples and a list of 'key points' at the end. The case examples work very well, but the key points are let down by a tendency towards banality. For example, a 'key point' in the chapter on the elderly is that 'Violence resulting from dementia and delirium with resultant confusion is more common in the elderly'. Furthermore, the differences in approach between authors are illustrated by the length of their reference lists, the chapter on mood disorders giving more than 140 references and the one on schizophrenia and delusional disorder listing 24.

The question arises as to who exactly this book is written for. Clearly, it is a US product and a number of chapters are of no direct relevance to those working outside the USA. Individual chapters may appeal to others, but this is not a textbook for the specialist: it is an introductory tome which will be of interest to the intern, to non-medical members of psychiatric teams and to the lone clinician working in private practice in the USA. Perhaps its strength is that it is a book written for general psychiatrists in an area where specialist forensic treatises tend to dominate. But those clinicians in the UK wishing a direct and practical approach to an issue which besets them in everyday practice might better be advised to turn to Maden's *Treating Violence: A Guide to Risk Management in Mental Health* (Oxford University Press, 2007).

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### Textbook of Disaster Psychiatry

Edited by Robert J. Ursano, Carol S. Fullerton, Lars Wiesaeht & Beverley Raphael. 2007. 354pp. £55.00 (hb) ISBN: 9780521852357

In the past 40 years the number of major global disasters which have inflicted extensive human suffering has increased threefold, an increase which highlights the need within the burgeoning literature on major trauma for quality texts in the field of disaster psychiatry. Professor Ursano and his editorial colleagues, each with a distinguished pedigree in the trauma field, have produced a well-written and well-presented contemporary textbook, which should appeal to clinical practitioners (and their students), researchers and policy makers.

The book is proclaimed to be the first dedicated to disaster psychiatry. However, if we accept that psychiatry is the study and treatment of mental illness and emotional disturbance (Oxford English Dictionary, 2005), then the title belies the breadth of the book's coverage. It comprises five sections including

foundations of disaster psychiatry, clinical care and interventions, and public health and psychiatry. Incorporated within these sections are chapters covering the predictable gamut of topics, such as the epidemiology of post-traumatic conditions, traumatic death, acute stress and post-traumatic stress disorders, children and disasters, and early interventions. However, an attractive feature of the book is its inclusion of less familiar, but equally important topics, such as disaster ecology, public health and disaster mental health, non-governmental organisations and mental health professionals, and the assessment and management of medical and surgical disaster casualties.

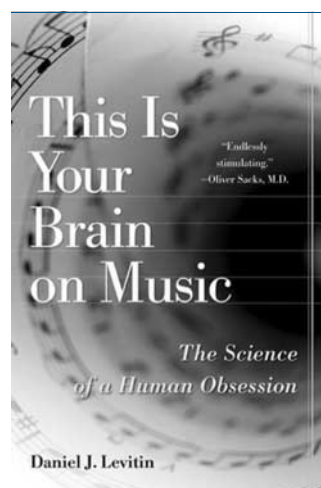
Perhaps, since only three of the authors come from outside of the USA, there is a leaning towards the North American literature and trauma. Reference has not been made to valuable European references such as the National Institute for Health and Clinical Excellence guidelines. There is, however, an abundance of well-selected references. These have guaranteed the editors' aims of producing a text which is largely evidence-based. Inevitably, and appropriately, in view of the distinguished panel of 23 authors, some assertions and observations are more 'eminence-based'.

No textbook can be expected to be of manageable proportions and yet be exhaustive in its coverage. Thus, for certain topics, such as the ethics of disaster work, research issues in the disaster field and the role of the media before, during and after a major catastrophe, the reader will need to consult other texts.

In conclusion, by virtue of its comprehensive content, lucid and attractive style of presentation, and its contemporary evidence base, the *Textbook of Disaster Psychiatry* represents an excellent purchase for a wide range of interested professionals.

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### This Is Your Brain on Music: The Science of a Human Obsession

By Daniel J. Levitin. Atlantic Books. 2007. 322pp. £18.99 (hb); £8.99 (pb). ISBN: 9781843547150; 9781843547167

Music is integral to our lives and, from Elgar to Elvis, provides familiarity and pleasure. The healing properties of music, particularly for mental illness, have been recognised for centuries and music therapy is now established as a psychotherapeutic method to aid communication and expression. Many doctors have studied music and continue to play, as enthusiastic amateurs or in a professional capacity, alongside their medical practice. This book is an engaging investigation of the interface of psychiatry

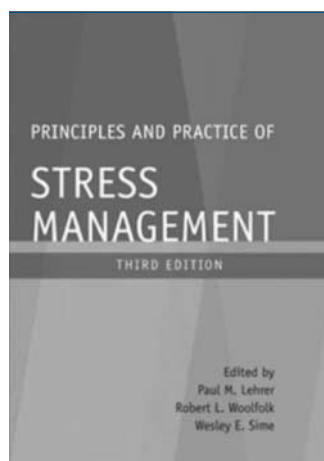
and music, unearthing harmony in the dissonant worlds of art and science. As a musician, I found it a satisfying response to the Keatsian concern that refracting arts through the sciences risks ‘unweaving the rainbow’.

Levitin, a musician and record producer turned neuroscientist, offers an explanation of the science and experience of music with a multitude of classical and popular examples. A lesson in pitch, rhythm, tempo and harmony sets the scene for understanding the cascade of brain region activation which is triggered by listening to music. He unceremoniously links the auditory cortex, frontal regions and mesolimbic system, including the nucleus accumbens, likening the addictive nature of music to the dependence of a drug addict. The rise in dopamine levels and association with positive mood and affect observed when listening to music is used to explain why many of the newer antidepressants act on the dopaminergic system, and he shares his exploration of the cerebellum not only as a crucial element to maintaining tempo in music, but as intrinsic to emotion.

In addition, he examines music over the life cycle; from the seeds of musical preference sown in the womb and brain myelination in teen years, to the nostalgia of those with Alzheimer’s disease when they hear songs from their youth. He suggests we are more musically equipped than we think and teases out the unique qualities of music which enhance communication, cognitive development and well-being. This is a fascinating read, accessible to non-musicians and musicians alike, which will set your foot tapping and propel you to dig out those dusty records all in the name of neuroscience.

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### Principles and Practice of Stress Management (3rd edn)

Edited by Paul M. Lehrer, Robert L. Woolfolk and Wesley E. Sime. Guilford Press. 2007. 721pp. US\$85.00 (hb). ISBN: 9781593850005

Something strange happened when I opened the parcel containing this book for review: lifting 1.5 kg of a whopper, I felt my heart sinking, sweat dripped off my front and I became shaky. I now know: I was stressed.

Struggling with the conceptual haziness of stress (was it more anxiety about not completing this review before the London Olympics or depression over the thought of being a failure in not being able to read 800 pages?) I felt reassured after reading chapter 1: ‘Stress is an umbrella concept allowing a layperson to describe the perturbations of life without needing to face potentially undesirable terms like “anxiety” and “depression”’. If the concept is so loosely defined, how can we really advocate very

specific solutions and management plans? The book provides a wise answer to this question: the broader concept of stress allows for a whole variety of interventions, ranging from muscle relaxation, hypnotic methods, breathing retraining and Eastern disciplines like Yoga and Qigong to cognitive methods and others.

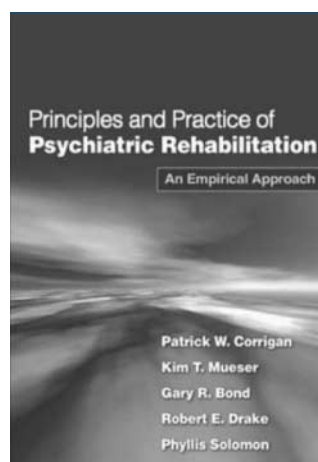
In the introduction, Jonathan Smith writes somewhat vaguely about the psychology of relaxation. Vagueness seems to fluctuate throughout; in the presentation of randomised controlled trial data and effect sizes *v.* case studies, the different treatment approaches reflect the underlying differences in conceptual and epistemological thinking of the contributing authors.

The usual suspects, cognitive and behavioural interventions including Meichenbaums’s stress inoculation therapy and Kabat-Zinn’s mindfulness-based stress reduction, seem to provide the most solid research base for efficacy in stress management, as does exercise therapy. Other less well-known interventions also seem to have a role. Drawing on the knowledge of traditional Chinese medicine, Qigong provides anecdotal relief for the symptoms of stress through ‘emptying your mind and drawing energy from planets’. Neurofeedback helps you learn how to modulate your own electroencephalogram patterns and electrodermal responses as biological markers of stress. Music therapy seems to have an effect only if the music listened to ‘corresponds to the patient’s taste’. No wonder my blood pressure remained high while listening to Wagner’s *Ring* for relaxation.

In summary, this reference book gives us a remarkable insight into the huge variety of interventions available for the universal ailment of stress. Even though the majority of the interventions listed do not have a strong evidence base for their efficacy, this book teaches us to be cautious and to keep an open mind about somewhat New Age interventions. Who, after all, would have predicted 20 years ago that mindfulness-based interventions would be endorsed by the National Institute for Health and Clinical Excellence for relapse prevention in depression?

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### Principles and Practice of Psychiatric Rehabilitation: An Empirical Approach

By Patrick W. Corrigan, Kim T. Mueser, Gary R. Bond, Robert E. Drake & Phyllis Solomon. Guilford Press. 2008. 536pp. US\$75.00 (hb). ISBN: 9781593854898

This is an exceptionally good book, and one of the few that can genuinely be recommended to all psychiatric trainees and every library.

The authors have pooled their considerable knowledge and experience to produce a cautious and comprehensive review of how best to work with ‘consumers’ with ‘psychiatric disabilities’