Book Reviews

Edited by Sidney Crown and Alan Lee

The Psychiatric Mental State Examination. By PAULA T. TRZEPACZ and ROBERT W. BAKER. Oxford: Oxford University Press. 1993. 202 pp. £30.00 (hb).

The ability to conduct an acurate and sensitive mental state examination is central to all psychiatric practice. It is difficult to overemphasise the importance of this skill. While most basic psychiatric texts include a chapter on the mental state examination, I believe this subject is of sufficient importance to warrant a book devoted exclusively to it. Phenomenology and psychopathology are complex subjects which can be offputting to trainees. This book, however, manages to live up to the description in the preface of being 'user friendly'. It is written in a very clinically relevant way, by authors who appear to be experienced clinicians and teachers. Although not specifically a text on interview skills, it is liberally sprinkled with sensible, practical comments on eliciting information and conducting interviews. A chapter is devoted to each major section of the mental state examination, and at the end of each chapter is a list of relevant definitions. The book is comprehensive without being too long or excessively detailed.

In my opinion this book is the best to date on the subject, and will be of enormous value to trainees sitting Part I of the MRCPsych as well as more experienced practitioners, tutors and examiners. Although the authors are from the US, the book will be equally valuable to readers in the UK and elsewhere. Unfortunately, this excellent text is only available in hardback and this may put off some potential purchasers. I would therefore urge the publishers to produce an appropriately priced paperback edition which could potentially become a recommended basic text for all psychiatric trainees.

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Marketing Mental Health Services to Managed Care. By NORMAN WINEGAR and JOHN L. BISTLINE. New York: Haworth. 1994. 199 pp. US \$28.95 (pb), \$37.95 (hb).

This book concerns the marketing of mental health services to purchasing agents. Its key audience is the membership of mental health service providers in the US. Here, the main purchasers are Health Maintenance Organisations or Preferred Provider Organisations, which have been established to apply management processes to the health care benefits employers have established to cover the treatment of illnesses affecting their workers and families. However, the principles of marketing mental health services to such organisations are likely to be equally as relevant to UK as to US service providers, thanks to the new NHS internal market.

The strengths of the book lie in the authors' abilities to give basic lessons on marketing mental health services to clinicians and other professionals who have had no experience of this brave new world of competition in mental health care. The book is intended as a resource or reference point and assumes little or no previous knowledge of marketing or contracting for services. The messages conveyed will be anticipated by those who have become accustomed to the commercially-oriented languages of health care markets. Service provision has to be shown to be sensitive to users' needs, has to be of proved effectiveness and provided at the lowest feasible cost.

If you are new to these current developments of managed markets for mental health care, you will find that this book will help you to make a start and understand the environment in which you are working. However, if you are now in your second or third round of contract negotiations with purchasers it is doubtful that you will find much that you did not already know.

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Handbook of Dementing Illnesses (Neurological Disease and Therapy Series 22). Edited by JOHN C. MORRIS. New York: Marcel Dekker. 1993. 657 pp. US \$175.00 (hb).

Our understanding of the dementias has progressed so rapidly in recent years, and on so many fronts, that most clinicians and researchers now have considerable difficulty in keeping up. This is particularly true in the neurosciences, where new and important findings now appear at such a rate and in such quantities that only those most closely involved with this area can hope to

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keep fully abreast of events. Even in the 'slower' fields, such as epidemiology and therapeutics, there is now a wealth of information, and readers need expert guidance and opinion as to what it all means. To meet this need, a number of hefty handbooks on the dementias have recently been published, and they must be judged on the extent to which they provide a useful, comprehensive and up-to-date digest of the literature.

To British readers, the most striking aspect of this American volume will be its neurological perspective, with the editor and over half of its 43 authors being neurologists. In the US, dementia is 'owned' by neurology to a much greater extent than it is in the UK, and consequently the psychiatric, social and servicerelated aspects of this disorder receive less attention in this book than we would expect on our side of the Atlantic. The emphasis is strictly clinical, and apart from a few chapters on topics such as disturbed behaviour, sexuality and driving, there is little on the practicalities of the long-term care and management of demented patients. In particular, the enormous issue of the institutional care of demented people is scarcely touched upon.

Given these limitations, however, there is much about this book that is good. It is well-organised and easy to read, and its emphasis on broad issues and the implications for diagnosis and management rather than on narrow academic detail will make it attractive to a general clinical readership. Some of the individual contributions are particularly fine. The review of the epidemiology of dementia by Graves & Kukull is one of the best I have read on this subject, and there are interesting and thought-provoking chapters on specific conditions such as alcohol-associated dementia (does it exist?), Parkinson's disease, and metabolic and nutritional disorders associated with dementia. I was also impressed by the decision to open this volume with a consideration of the ethical issues encountered in the care and study of demented patients.

Surprisingly, the weakest parts of this book are those that deal with the most prevalent conditions: Alzheimer's disease and vascular dementia. The chapter on Alzheimer's is very short, and the section on molecular pathology unacceptably out-of-date; the most recent references cited are from as long ago as 1991. Inevitably, the delays inherent in book production mean that it is not possible to be entirely up to the minute with the latest developments in such a rapidly developing area of research, but for a volume published in 1993 this will not do. The inadequacies of the chapter on the vascular dementias are more a reflection of the relative lack of research interest that these conditions have received compared with Alzheimer's; however, I would have liked to see a more critical approach to our current classificatory and diagnostic thinking on this subject.

In summary, then, this book has much to commend it, but there are significant limitations and deficiencies that will lessen its appeal to a British psychiatric readership. If money is no object it is certainly worth purchasing for the departmental library, but for those who can only afford one handbook on dementia, the recent volume edited by Burns & Levy is probably the one to go for.

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Insomnia – Psychological Assessment and Management. By CHARLES M. MORIN. New York: Guilford Press. 1993. 238 pp. US \$24.25.

A good book, I thought. The writing is based on the author's practical experience of patients. It is recognised that complaints about sleep accompany most psychiatric and many physical disorders, but that for some patients the complaint of insomnia has evolved into a central issue. There will have been predisposing traits and precipitating stresses, but then perpetuating factors have developed such that the complaint has gained autonomy.

The author outlines a treatment programme of ten one-hour sessions, chiefly to guide clinical psychologists working within the US health care system, in which a general medical practitioner does not seem to figure. Two sessions are for assessment, with lavish employment of questionnaires. Treatment is categorised as behavioural, with cognitive therapy. Patients have often developed unrewarding strategies, such as spending excessive time in bed, sleeping late in the morning, and napping by day. They must therefore agree to a contract of discipline. An alarm clock must be obeyed to ensure regular time of getting up, and strengthening of the biological rhythm. Time lying in bed is to be strictly limited, and at first so shortened as to cause deprivation of sleep (shortage of sleep and early rising are most potent in ensuring ease of falling asleep).

Patients who complain of insomnia harbour unrealistic expectations about sleep and "tend to catastrophize over temporary sleep loss and amplify its negative impact on daytime functioning". These habits of mind are to be corrected and any drugs to be tapered and stopped.

The book includes an outline of research into insomnia. The use of jargon is within tolerable limits. The author concludes that psychotherapy and biofeedback have not been found useful in treatment. He reviews research that has attempted to measure outcome after the treatment approach to which he gives a step-bystep guide, and finds that in subjective and objective terms the treatment is effective.

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