

sense of time, and the shifted balance between familiarity and novelty, for persons under the influence of cannabis.

There are some areas where I hold back my assent, for instance, on occasion, where the author makes causal attributions (although generally he does so somewhat diffidently). I part company when we get to quantum physics (and the inference that, since events are not 'real' until there is an observer, this is telling us something deep about the mind). I hold back from accepting his tentative suggestion that the astonishing sensitivity to coincidence experienced by people in psychotic states may be an indication of sensitivity to real influences beyond normal perception. I would prefer the aphorism of Francis Bacon, applying it to both normal and abnormal situations:

It is a false assertion that the sense of man is the measure of things. On the contrary, all perceptions as well of the sense as of the mind are according to the measure of the individual and not according to the measure of the universe. And human understanding is like a false mirror.

I do, however, recognize that, among my acquaintances, those with the sharpest psychological insights about other humans often *do* attribute these insights to intuitions verging on the paranormal. All these matters no doubt reflect my own formative influences in physiology, a discipline much closer to classical physics than is psychology.

On the stigmatizing nature of the word 'schizophrenia', and the issue of *name-change* (which the author supports), dare I suggest that this is a particularly English problem, fundamentally about local media portrayal of major mental illness, rather than an issue to be exported around the world?

One of the deepest questions pervading this book is: 'What is pathology, especially in psychiatry?' Pathology started off as anatomical pathology, then became microscopic and chemical pathology; but the jump to *psychopathology* is vast. In schizophrenia, I see no hard evidence of categorically abnormal brain pathology, such as would have convinced Rudolph Virchow (although there is much evidence for 'statistical deviance' in brain measures). In *one* sense psychopathology can be defined as 'impaired information processing'. So auditory hallucinations represent pathology, in the sense that it is generally a good thing if one can distinguish between internal verbal thoughts and external voices, a distinction that may breakdown in schizophrenia. However, from a different cultural perspective, this experience is not clearly pathological. For the Maori of New Zealand (from where I write) 'hearing voices' from ancestors is a perfectly normal accepted part of their culture.

Clearly there is not just one viable world view. 'Scientific psychiatry' should not presume to have access to the sole true metaphysical perspective. I know this on logical grounds, from reading in the history of science, and from knowledge of the diverse people I call my friends. Inevitably I have strong allegiance to a perspective which works for me in science. It is not adopted by much orthodox psychiatry, nor by most of the people described in Peter Chadwick's book (whose perspectives are also quite varied); nor would I say that it was categorically true. Good psychotherapists should be more at home than I, swimming strongly, and sometimes saving lives, albeit 'way out of their depth' in this deep ocean. Trainee psychiatrists will regularly meet people with perspectives as diverse as those described herein. As a way into the inner world of such people, I believe this book to be of greater educational value than much standard description found in psychopathology or psychiatry textbooks.

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*Clinical Handbook of Schizophrenia*. Edited by K. T. Muesser and D. V. Jeste. (Pp. 650; \$75.00; ISBN 978-1-59385-652-6.) Guilford Publications: New York. 2008.

This handbook is an exhaustive summary of the state-of-the-art in the field of schizophrenia. Muesser and Jeste present us a comprehensive text with 63 chapters that cover a wide array of topics. Each chapter is formatted creatively to meet multiple purposes and have a wide appeal, including key points that provide distilled take-home messages. Best of all, it has an easy reading style.

The book is organized into eight parts, starting with overviews on history, epidemiology, biology, psychosocial factors, psychopathology and course. Next, we are presented with chapters on assessments and treatments. Then the focus shifts to systems of care, and special populations. Finally, policy and social issues, and a set of special topics are highlighted. Succinct tables supplement the narrative throughout. Particularly educational are the tables on treatment planning, family intervention, coping strategies and quality-of-life scales, just to name a few. Many topics typically not covered in previous books are introduced such as spirituality and religion, parenting, sexuality, etc. The chapters on treatment provide much practical

information highlighting what is evidence-based and what is not, and thorough guidelines and algorithms. Part III and IV are devoted to specific treatments and include many tips. For example, the STEPS mnemonic to choose an antipsychotic and the pill box with alarms for compliance. It is heartening to see a chapter devoted to clozapine. However, long-acting injections, an essential tool in managing compliance, find only brief mention, and injections available in Europe are not mentioned. The overuse of valproate without supportive evidence and the under-use of family interventions despite overwhelming evidence are exhaustively covered, highlighting the continuing divergence between practice and evidence.

A major strength of the book is in the chapters devoted to various psychosocial therapies. Evidence for supported employment from controlled trials is thoroughly reviewed under Vocational Rehabilitation. The Housing First model, a bold new approach that has yielded rich dividends is extensively discussed. The chapter on housing and homelessness describes the various interventions to address this most basic need of people with schizophrenia. Noteworthy are recommendations like 'take a life history before asking for the psychiatric history', preference of harm reduction methods over zero tolerance for substance abusers, and advocacy of a compassionate approach by clinicians over a strict professional approach. Part V presents the various systems of care. Case management has become the foundation of successful community care for schizophrenia and the various forms of case management are discussed in detail. The sad fact that currently over 16% of jail inmates have active mental illness makes the chapter on Treatment in Jails timely. Part VI on special populations and problems is rather comprehensive in covering so many different subgroups. Prodromal, first episode, violent, homeless, dual diagnoses, elderly, etc. are all covered providing the latest information and techniques to meet their special needs. The chapter on parenting is a unique feature of this book. Persons with

schizophrenia do become parents and are some of the most caring individuals, yet they need specific assistance in developing an adequate skill set. Rather than take away their child, the treatment team would do well to impart parenting skills to them. Likewise the chapter on sexuality is a welcome addition, but it is disappointing to see no discussion on how a person with schizophrenia should express this sexuality in long-term care and shared residential settings. Although pregnancy is addressed in several chapters, a separate chapter on pregnancy/lactation could have been included under special populations.

A few chapters could have done better. The chapter on psychopathology does not discuss depressive symptoms. The recommendation that all schizophrenia patients have neuropsychological testing may not be practical or affordable in most public clinics. For first-episode patients, the authors recommend the 'start low and go slow' approach which makes perfect sense except that managed care reviewers are always pressuring clinicians to do the opposite. These challenges in practice are not dealt with. A good argument is made for more international studies by highlighting the better prognosis for schizophrenia in developing countries and the innovative methods employed to treat large numbers of patients such as barefoot doctors and multipurpose health workers. Two succinct and short chapters on Remission and Recovery are a must read. Clinicians in particular will benefit from knowing that the tenets of recovery are considered civil rights by many of its proponents. However, a discussion of societal and family safety concerns in this context would have made the chapter more complete.

The book is highly recommended to all levels of clinicians and trainees, and those who wish to get a substantive overview of the realities, hopes and challenges of schizophrenia.

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