

current times except to dismiss them as an old-fashioned blame of the schizophrenogenic mother. In a fascinating chapter Van Eecke argues, among other ideas, for an increased emphasis on the role of the father. This is about as far removed from the neurobiological basis of psychosis as it is possible to be. Yet, if you persevere, there is considerable sense in what is presented here. Most contributors argue for an increase in the psychological and psychodynamic as a way of understanding our patients and enabling clinicians to engage individuals with treatments in addition to medication. Ideas such as 'the therapeutic work to be undertaken is to help and support the patient' will receive universal agreement but are not always easy to use in practice when balancing our combined roles of risk managers and treatment providers.

There are further controversial ideas in the final chapter. Most people within the early intervention field will be familiar with the debate on the emphasis and frequency of childhood trauma and abuse as risk factors for psychosis, and the arguments are dissected in detail here. However, on closer reading there is also balance. Read & Hammerley agree that 'it is not just child sexual abuse' but also poverty, urbanicity, belonging to a minority ethnic group, etc. that clearly play a causal role in the development of schizophrenia.

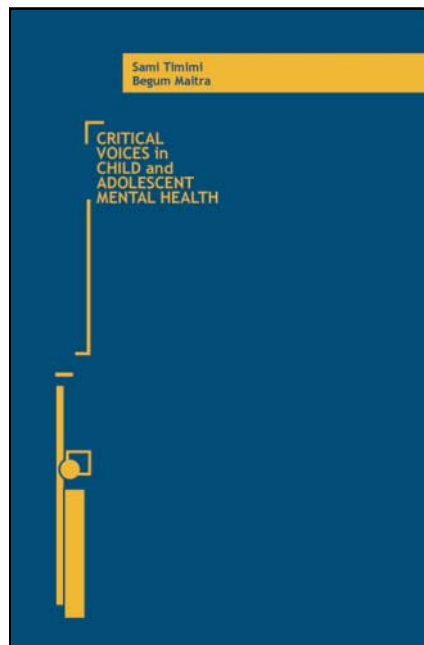
So perhaps this text is not as controversial as it is reported to be, but it will provoke thought and debate and I think that is the underlying aim. We should, perhaps, all break away from taught, firmly held views and at times dare to think about schizophrenia from another angle, as a way to balance, hold and integrate ideas as we reach for the prescription pad. The nature *v.* nurture debate has moved on considerably in recent years but perhaps still has some way to go.

This book challenges the reader to think again about preconceptions of psychotic illness and as such would appeal to those working with such patients. Indeed, the first step in both psychological and biological treatments is to establish a relationship through which effective treatment can be delivered, and ideas presented here can aid this by increasing our understanding.

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### Critical Voices in Child and Adolescent Mental Health

By Sami Timimi & Begum Maitra.  
Free Association Books. 2005. 228pp. £18.95.  
ISBN 1853439436



Child psychiatry should be challenged and this worthwhile, though occasionally uneven, book edited by Sami Timimi and Begum Maitra aims to start a critical debate. In medicine we are too often taught that there is only one right answer, but in psychiatry looking at the development of the formal classification systems should at least cause some doubt.

The authors criticise the increasing dominance in child psychiatry of a biomedical model which implies linear causation of 'disorder' on an individual basis and ignores the historical and cultural context. They are especially well able to take a sideways glance at this phenomenon because of non-European backgrounds and, therefore, observe that although immaturity is a necessary stage, its construction in terms of childhood is culturally determined.

The 19th century was the great age of institutions in Britain. Children were no longer allowed to work and then were required to attend school, thus becoming available for observation, measurement and classification. Many were removed from home and placed in residential schools and children's homes, a practice which continued until the 1980s. As with adult psychiatry, deinstitutionalisation occurred for a variety of reasons, some well-intended,

some scientific and others purely economic. Although the development of psychotropic drugs contributed to the emptying of asylums, this could hardly be said for children's homes and special educational boarding schools. A value shift had occurred.

Nevertheless, the identification of child psychiatric disorders went hand-in-hand with the development of drugs to treat them – especially attention-deficit hyperactivity disorder and childhood depression. This book addresses these topics in some detail. Although a critique of the marketing of stimulants and antidepressants for children is not new, Timimi & Maitra, rather than blame the drug companies, set the issue within a Western cultural system of individualisation for consumption.

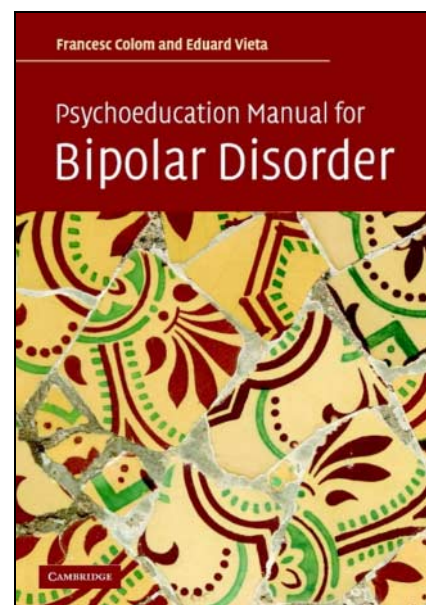
Overall, despite the presence of 'straw men' I would recommend this book for provoking thought about the role of our profession.

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doi: 10.1192/bjp.191.4.368

### Psychoeducation Manual for Bipolar Disorder

By Francesc Colom & Eduard Vieta.  
Cambridge University Press. 2006. 236pp.  
£24.99 (pb). ISBN 0521683688

This is a clearly written and user-friendly psychological treatment manual for patients with bipolar disorder. Part one



and two give a brief background about the disorder and introduce the concepts and methodology of psychoeducation. Part three gives details of the Barcelona Psychoeducation Program, which is one of the few evidence-based psychological treatment models for bipolar disorders.

This is mainly a 'how to' book giving clear, practical guidance about when to introduce psychoeducation. The Barcelona Program consists of 21 sessions each lasting one and a half hours. The sessions are clearly described with goals, procedures, useful tips and patient material. Francesc's personal commitment to the treatment of patients with bipolar illness also comes through. They are given explicit encouragement and permission to ring if they are worried about possible relapses and provided with information about how and when to contact him. Such patients are not easy to treat. Therapists need to be committed clinicians who are familiar with the disorder. It is made clear in the book that this is an intensive and complex psychoeducation programme. Furthermore, the authors advise that 8 patients will be the optimal number for the group, but that it is sensible to start with 12 to 14, allowing for drop-outs. Moreover, patients have to be stable for 6 months with a Young Mania Rating Scale score <6 (Hamilton Depression Rating Scale score <8).

The authors are also appropriately realistic about the objectives of working with individuals with bipolar disorder. Some goals such as awareness of disorder, early detection of warning symptoms and adherence to treatment are aimed at every patient in the group. Others such as controlling stress, avoiding substance use and misuse, and achieving regularity in lifestyle are described as 'desirable and not exclusively the responsibility of the psychoeducation program' whereas improving social and interpersonal activity between episodes

and confronting residual sub-syndromic symptoms and impairment are described as part of an 'excellent scenario' of treatment outcome.

To sum up, the authors have done a brilliant job in developing such a thorough psychoeducation programme. I would recommend anyone interested in working with patients with bipolar illness to buy this book.

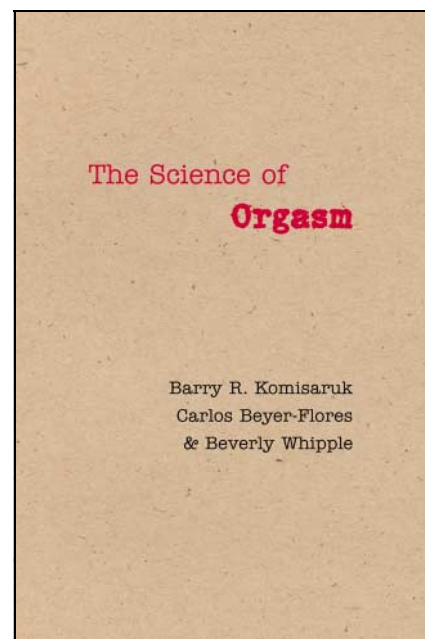
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### The Science of Orgasm

By Barry R. Komisaruk, Carlos Beyer-Flores & Beverly Whipple. Johns Hopkins University Press. 2006. 376pp. US\$25.00 (hb). ISBN 0801808490X

Sex fascinates us all and now it seems that everyone has a view. The media abounds with advice about sex from doctors, psychologists and therapists who jostle for recognition. But despite the surfeit of advice there is little science. The problems of taboo and censorship have been replaced by one of validity. This book provides information from the best available evidence. Talk of sex being as strenuous as walking up stairs or walking a mile does not pack the same punch as how many patients have a heart attack 'in the saddle'. Even in the priapic, post-Viagra age the figure seems low: 1.5% of 1700 cited in the chapter titled 'are orgasms good for your health'.

The authors are a professor of psychology, of nursing, and the head of a laboratory. They have proceeded from definition to physiology and pathophysiology, and the effect of prescribed and elicit drugs. They review the research into the endocrinology and the neurology of sex in both



the intact and damaged brain. The information from imaging is assessed. All the while the authors have not strayed beyond what is in the literature.

The instruction does not crowd out the entertainment. They have an eye for the intimate when a researcher's erection, induced by a self-administered alpha blockade, 'is entirely undiminished by concentration on exacting intellectual tasks . . . I took an urgent and worrying telephone call without losing the erection'. One presumes the caller was unaware.

The authors should be congratulated on taking the trouble to produce a readable comprehensive account of the literature on orgasm. All psychosexual clinics will need to have a copy as well as anyone who advises others about psychosexual problems.

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