

In addition, other conditions that can co-exist with BDD are touched upon, such as depression, which is often seen in sufferers of BDD. Indeed, one chapter describes using behavioural activation and specific cognitive strategies adapted to the BDD point of reference. Furthermore, there is a useful chapter describing psychogenic excoriation (a skin-picking disorder) which can be seen in sufferers of BDD but also manifests as a separate condition. Useful CBT techniques for treating this disorder, such as habit reversal, are also highlighted, some in point form, which can be useful if clinicians want to develop a template of strategies for treating patients with this particular condition.

Overall my impression of this book is that it is a very useful resource to add to any clinician's catalogue of materials to use when treating patients with BDD.

ANUSHA GOVENDER

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South West London and St George's Mental Health NHS Trust

Post Traumatic Stress Disorder: Cognitive Therapy for Children and Young People

Patrick Smith, Sean Perrin, William Yule and David M. Clark

Hove: Routledge, 2009. pp. 224, £20.95 (pb). ISBN: 978-0-415-39164-1.

doi:10.1017/S1352465812000604

This excellent guide to treating children with post traumatic stress disorder (PTSD) incorporates the principles of CBT within its content, style and structure. For example, it is evidence-based; the book has been developed from the therapist's manual used in a recent trial, which demonstrated good treatment outcomes. This basis for the book also means that the theory-practice links are solid and the text has practical applications in mind, with plenty of suggested questions, clear instructions for applying techniques, and a section on "real-world hurdles". The structure allows for flexibility in the application of the model rather than reading as a prescriptive manual, making it more usable with a clinic population.

The theoretical basis of the book lies firmly with the Ehlers and Clark (2000) cognitive model of PTSD, and clinicians familiar with this model will see little difference between the terminology and techniques described by Ehlers and Clark for adults with PTSD and those explained in this book. However, Smith and colleagues use the benefit of their clinical experience to describe in detail how the model can be adapted and put into practice with children and young people. For example, there are useful sections on working with parents and families of children with PTSD, especially where parents may also have mental health issues, and tips for adapting treatment techniques to use with children of various ages, which give this book such high clinical value.

The structure of the book is easy to follow and in keeping with its practical focus, with sections on assessment and diagnosis, formulation and treatment. Later chapters focus on adapting the treatment for younger children and for adolescents with case examples to demonstrate how to put the model into practice, and a trouble-shooting section designed to pre-empt common problems encountered in practice. Measures and example handouts are included in the appendices.

This book would be extremely useful to clinicians treating PTSD as part of their clinical practice. In particular, therapists with some experience of using CBT with children and young people but little specialist training or experience with PTSD will find this book invaluable,

as it explains the disorder-specific model and describes practical tools to apply trauma-focused CBT in an easy to use format. The authors are clear that the focus of the book, and the treatment trial that preceded it, are on single-incident trauma. Although there are brief sections on using the treatment with children affected by multiple traumas, clinicians working predominantly with children affected by longer-term or multiple traumatic events, such as abuse, will find less detail on working with the more wide-ranging effects of such trauma. However, even in these cases, where PTSD is part of the clinical picture, this book will provide a useful reference point for working with all traumatized children.

Reference

Ehlers, A. and Clark, D. M. (2000). A cognitive model of posttraumatic stress disorder. *Behaviour Research and Therapy*, 38, 319–345.

HANNAH MURRAY

Traumatic Stress Service

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Handbook of Cognitive Behavioural Therapies (3rd edn.)

Edited by Keith S. Dobson

New York: Guilford Press, 2010. pp. 482, £41.00 (hb). ISBN: 978-1-60623-437-2.

doi:10.1017/S1352465812000616

This is the third edition of the *Handbook of Cognitive Behavioural Therapies*. Since the first edition was published in 1988, Keith Dobson perhaps does not realise how much it has been used as a mainstay in the cognitive behavioural field in the USA. This edition has been comprehensively revised to reflect the latest findings and clinical advances that seem to have snowballed in our field the last few years.

The book is divided into four areas with 38 contributors that are well known to many of us and are often the experts in their particular field. The four areas are:

- Historical, philosophical and scientific foundations
- Assessment considerations
- The therapies
- Applications to specific populations

Part one introduces us to the history, basic principles and empirical base of CBT including outcome literature and efficacy findings for 20 different clinical disorders. All the anxiety disorders, eating disorders and psychoses are covered as well as anger and violent offending, sexual offending, marital distress, chronic pain, substance misuse disorders, somatoform disorders, personality disorders and sleep difficulties. There is also an interesting chapter on cognitive science and the conceptual foundations of CBT. The authors then go on to discuss the limitations of CBT and issues for future research, and the development of so called “third wave” therapies including the emergence of eclectic and integrationist views.

The second part casts an empirical eye over CBT assessment; not only describing the process and methods, but also examining the validity, advantages and limitations of self-report methods with particular focus on the different assessment processes for anxiety and