

further suggest that a more satisfactory diagnostic system would be broad and relatively constant at the uppermost levels while allowing for a wide variety of diverse and shifting forms at lower levels.

*Philosophical Issues in Psychiatry* brings together some of the foremost thinkers on the subject of what psychiatric disorders are. The book is not as comprehensive as the recently published *Oxford Textbook of Philosophy and Psychiatry*<sup>1</sup>, but gives a broader and deeper view of the key areas of explanation, phenomenology and nosology.

Psychiatrists need to have some awareness of these arguments if they are to guard against overly doctrinaire approaches to their work. All psychiatrists have philosophical frameworks that inform their work and this book will force a re-examination of these. As a clinical psychiatrist with a casual interest in the philosophy of psychiatry I found that this book gave me a deeper understanding of modern philosophical thought as it relates to many of the key questions that I encounter in my work. Psychiatrists need to regularly question their assumptions. I recommend this book to anyone interested in psychiatry.

**Larkin Feeney,**

Consultant Psychiatrist

Cluain Mhuire Community Mental Health Services

Blackrock, Co. Dublin.

Reference

1. Fulford KWM, Thornton T, Graham G (eds). *Oxford Textbook of Philosophy and Psychiatry*, Oxford university Press, 2006.

## Resident's guide to clinical psychiatry

**Marangell LB, MD. American Psychiatric Publishing, Inc: Washington DC, 2009. ISBN 978-1-58562-324-2**

This book aims to present "an evidence-based, clinically-oriented guide that could fit in the lab coat of a psychiatric resident or medical student... that they could consult frequently and conveniently". So, notwithstanding the absence of white coats in Irish psychiatry, a white coat was dug out, dusted off and with a bit of a squeeze a pocket was found to hold the book; first box ticked.

Before evaluating the evidence base or clinical application of the book, its convenience is demonstrated in a very straightforward, clear lay-out, broken roughly into four

sections. The initial chapter on history taking and examination, with advice and guidance for the day-to-day job, was a very helpful section, especially for students and those starting off in psychiatry. It addresses most of the questions of the first few months working in psychiatry.

The second section is a solid introduction to the main groups of diseases in each category, presenting the DSM IV criteria for these. Marangell's guide also discusses the epidemiology and basic treatment approaches of each of the diseases. These chapters present the facts simply and coherently, they do however at times lack detail.

The next three chapters cover two specialities (child and adolescent psychiatry and liaison psychiatry) and psychiatric emergencies. The information given on the specialties is basic yet helpful. The chapter on psychiatric emergencies is one of the strengths of this book, laying out the presentation and treatment of most of the common psychiatric emergencies. This chapter is well worth a read. It includes a number of useful tables and algorithms that are clear enough to be of use at three in the morning.

The final three chapters concern clinical management, and present a relatively thorough discussion of pharmacotherapy which, in its clarity and usefulness, is another highlight of the book. The chapter on psychotherapy is however both overcomplicated and confusing, leaving one with a number of fundamental unanswered questions. The final chapter on ECT and other device-based treatments is well compiled and practical.

While on the whole this book is clear and useful, certain changes would be welcome in any future editions. For example, although the book is clearly written for users of the DSM IV, it would be very helpful to acknowledge European use of the ICD 10 and explore some of the areas in which these diagnostic criteria differ. From a point of learning style, the book is strongly factual, presenting information using clear tables, and there is a lack of descriptive anecdotal information.

In summary, *Clinical Psychiatry* achieves what it sets out to do. It is a concise, useful guide to the basics; highly referenced with up-to-date research. And for what it's worth, this book does fit in the pocket of your white coat, albeit with some coercion.

**Richard Duffy,**

Registrar in psychiatry

Mater University Hospital,

62/63 Eccles Street,

Dublin 7, Ireland.