contribution of a disease is shared with individuals and families.'

The book has an excellent preface where the author succinctly informs the reader what to expect. This makes it a very useful work to 'dip into' as required. The overview of genetic counselling is thoughtfully constructed and manages to accurately describe the many components of the job. A clear picture is given to the reader of the various aspects of a genetic consultation. The possible motivation for the request for a consultation is discussed and how counsellors might elicit the patient's understanding of the disorder in the family. A typical interview is made up of many parts where communication, science and general medicine meet. Dr Evans stresses the far-reaching effect on individuals and their families of having an inherited disease. Genetic counselling differs from other medical consultations since it is about 'knowledge and its key elements are decision-making and coping with a result'. The author stresses the psychological processes which underpin genetic counselling. She feels that individuals manage anxiety, grief and frustration differently and fall into one of three groups: mature, defensive or symptomatic.

To further the reader's understanding of individual difference in genetic counselling Dr Evans uses the model of attachment theory. The chapter contains a comprehensive and thoughtful explanation of Bowlby's theory together with associated research. This approach to counselling is innovative and exciting and will resonate with many current practitioners. This theory gives a framework for the counsellor to understand how people behave differently in their response to genetic counselling and 'that the differences relate to the management of anxiety and grief and early attachment patterns'. The author uses her experience as a psychotherapist to further explore the role and skills of the counsellor. The importance of empathy, communication, listening skills and the use of the metaphor are discussed. Throughout the book examples and extracts from actual consultations are used to illustrate the point under discussion. This adds a richness and clarity to the text. These extracts are used in a warm yet unsentimental way which practitioners will find most thought provoking.

There are useful chapters looking at the variety of family-centred scenarios that confront the genetic counsellor. These include a helpful insight into the challenges of working with parents and children. Dr Evans looks at the influence of the nature of the disorder on the consultation and uses four specialities to illustrate this. Prenatal work forms a large part of a clinical geneticist's workload and several strategies are discussed to facilitate effective working with this client group. Huntington's disease is a condition that often challenges the counsellor to call upon all their experience in family dynamics. The author uses examples to illustrate some of the personal struggles which come into the genetic encounter. Other examples are used to explore the skills required in the fields of dysmorphology and cancer genetics. Space is also given to discuss the effect that genetic counselling has on the practitioner. Transference and counter-transference issues are explored and Evans acknowledges that this work can be both stressful and upsetting. She sees psychological supervision as 'a central and essential part of training and on-going practice'.

This book succeeds in finding the language to describe and understand what genetic counselling is. All health professionals in the field and others wishing to learn more about effective communication with patients and their families will find reading this book a thought-provoking and stimulating experience.

> ANN KERSHAW (Email: ann.kershaw@addenbrookes.nhs.uk)

Psychological Medicine, **38** (2008). doi:10.1017/S0033291707001985 First published online 8 November 2007

Psychiatric and Behavioural Disorders in Intellectual and Developmental Disabilities. Edited by N. Bouras and G. Holt. (Pp. 424; £48.00; ISBN 0-521-60825-2.)
Cambridge University Press: Cambridge, UK. 2007.

The methods of assessment and management of psychiatric and behavioural disorders in people with intellectual disabilities have evolved enormously over the last 20 years. The average life expectancy for men with intellectual disabilities in the 1930s was 15 years. Since then, focused research has served to increase not only our understanding of the aetiology of intellectual disabilities themselves, but also associated psychiatric and behavioural disorders, resulting in increased longevity and improved quality of life. Furthermore, the concept of behavioural phenotypes, the elucidation of neuroanatomical abnormalities, and the recognition that physical disorders may contribute to the unique presentation of psychopathology in people with intellectual disabilities, have led to improvements in the way in which we manage and treat people with intellectual disabilities. The role of psychosocial interventions and the increasing acknowledgement that people with intellectual disabilities have rights, can make their own choices and are able to live independent lives as far as possible, have also been highlighted in recent years.

This book captures the importance of these elements in a structured manner, with chapters contributed by a number of international experts in the field. This is the second edition of the book *Psychiatric and Behavioural Disorders in Developmental Disabilities and Mental Retardation*: even the term 'mental retardation' has been replaced by the more accepted, less stigmatizing, term 'intellectual disabilities'. The book is divided into four parts covering assessment and diagnosis, psychopathology and special topics, treatment and therapeutic interventions, and policy and service systems.

The first part deals with assessment and diagnosis. This includes a detailed chapter discussing and critiquing classification of psychiatric illness in people with intellectual disabilities, and a second chapter looking specifically and comprehensively at the use of assessment and monitoring tools. An important addition, not present in the first edition, is a chapter on the interface between medical and psychiatric disorders. This is an important area in intellectual disabilities, and the association between the two is easily overlooked.

Part II which covers psychopathology, has separate chapters on depression, anxiety and adjustment disorders; schizophrenia spectrum disorders; personality disorder; and dementia. Unfortunately, there is little on bipolar disorder, mania or affective psychoses in general, which do occur with greater frequency in people with intellectual disabilities; this is included in a single paragraph in the chapter on schizophrenia spectrum disorders. Also in this section is a diverse range of other 'special topics' including mental ill-health in people with autism, psychopathology in children, people with intellectual disabilities who are at risk of offending, behavioural phenotypes, self-injurious behaviour and the association between epilepsy and mental health.

Part III describes treatment and therapeutic interventions. Here again are important additions of chapters on psychosocial interventions and psychodynamic approaches which give a balanced view between advocating the use of these techniques and the lack of current research in these areas.

Finally, Part IV looks at policy and service systems. A first thought is that chapters such as these might not allow for variations in services in different countries and therefore not be generalizable. However, the contributors have strived to keep their perspective broad and global. The first chapter in this section describes the development of services and includes an interesting discussion on the historical development of humane forms of care for people with intellectual disabilities and the rise of institutions. The second chapter on clinical services is illustrated with several innovative model programmes from around the world. This is followed by a thoughtful chapter on how to support staff who care for people with intellectual disabilities, and a final chapter on the professional training of psychiatrists, psychologists and primary-care physicians.

In summary, this book is comprehensive, wellstructured and clear. Often the chapters include very basic explanations allowing readers of all backgrounds to get to grips with the content. An overwhelming strength is that the information provided is based on relevant, recent research and is presented from a bio-psycho-social perspective. This book is an excellent reference suitable for all members of the multi-agency teams that support people with intellectual disabilities.

> SARITA SONI (Email: ss507@medschl.cam.ac.uk)