This book will find its way to the libraries of many universities in Western Europe and North America. It will interest many mental health professionals and policy makers. As they skim through the book, they may ask one question, ‘What’s new?’

Suicide prevention is a major public health problem and the three editors have compiled an authoritative book with a team of contributors mainly from Western Europe and North America. The book covers every aspect of suicidology, including theory, neurobiology, clinical practice, research and policy. It is a tour de force to encompass such a broad scope from such a distinguished parade of specialists. The authors have emphasised the important point that suicide prevention is not just a medical or psychiatric problem but involves a whole spectrum of professionals including psychologists, sociologists, emergency medicine doctors, ethicists, lawyers and public health administrators.

The editors have organised the contents into three sections from theory to practice and policy. Because there is more psychosocial research on suicide, the first section on theory and epidemiology has more chapters than the second section on interventional strategies and the third section on actual policy.

What will be most challenging to the reader is how to translate the policy into practical tips for people on the shop-floor level. This has not been adequately discussed in the book. The section on intervention strategies describes services and human resources not available in many countries outside of Western Europe and North America. It must be emphasised that although there are complaints about the inadequacies of the National Health Service in the UK, not many countries in the world have as comprehensive a mental health service.

Finally, one would expect an international handbook to have more contributors from outside Western Europe and North America. The editors correctly note that 60% of suicides are in Asia and in recent years there are increasing publications from Asian researchers that ought to be cited. Hopefully, the next edition will reflect this.

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Richard Dadd: The Artist and the Asylum
By Nicholas Tromans.
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The story of Richard Dadd is well known to historians of art and madness. He was the promising young Victorian artist who, believing his father was Satan, murdered him and subsequently spent the rest of his life in the criminal lunatic departments of Bethlem and Broadmoor, where he continued to paint and to produce works that were arguably more compelling than those he completed before he developed psychosis. In this new and splendidly illustrated book, Nicholas Tromans, an art historian at Kingston University, London, provides a thoughtful and balanced commentary on the Dadd story, which draws on the past three decades of research in the history of psychiatry to create a nuanced and in-depth picture of the 19th-century parricide. Tromans looks at the relationship between madness and creativity, the nature of Dadd’s mental disturbance and his time in the asylum.

Some artists stop being creative when they develop psychosis; some, like the ‘schizophrenic masters’ in the Prinzhorn collection, only start painting after they go mad. Dadd’s case is rather different. His remarkable technical skills were unaffected by his descent into mental illness and, indeed, in The Fairy Feller’s Master-Stroke and Contradiction: Oberon and Titania, he made pictures of more complexity than those of his pre-asylum days. What, if any, was the impact of psychosis on his art? Tromans is rightly sceptical of previous attempts to identify stylistic characteristics of ‘psychotic art’, such as obsessive pattern-making, which, in any case, Dadd’s work does not display. Instead, he suggests that Dadd lacked a capacity to see the world from other people’s point of view. Certainly, the few surviving transcriptions of Dadd conversations reveal that he saw himself as a superior individual who inhabited a higher, spiritual domain, unbound by the rules of ordinary humanity. Ironically, before he became mentally ill, Dadd affected the then-fashionable pose of the artist as Byronic ‘madman’. As Tromans observes, such a pose offered an artist the opportunity to parade his supposedly unconventional and ‘interesting’ persona without actually suffering the blight of insanity.

So what was wrong with Richard Dadd? As the former Bethlem archivist Patricia Alderidge has previously shown, the asylum case note record of Dadd is disappointingly sparse. We know that on 28 August 1843, Dadd stabbed his father to death. Having obtained a passport before the murder, he fled by boat to France with the intention, he later claimed, of assassinating Ferdinand I, the Emperor of Austria. Instead, while travelling in a coach near the Forest of Fontainebleau, he attacked a fellow passenger with a razor, stating that he had received a ‘message’ from the stars instructing him to do so. Dadd believed that his true father was the Egyptian god Osiris and that the man who brought him up was an impostor and most probably the Devil.