

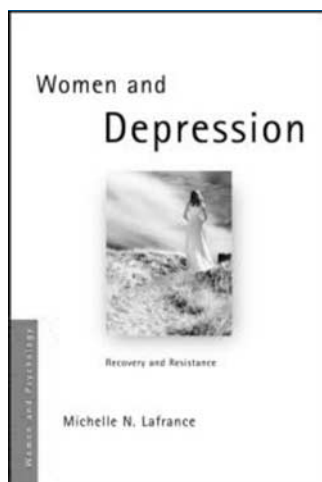
context puts an important and under-researched perspective on the understanding of depression.

The editors have structured this book by selecting a number of vulnerability factors and presenting a chapter on normal development in this area, followed by a chapter on the development of affective pathology. Areas covered include brain development, puberty, cognition, moral emotions, shame, temperament, familial processes, and peers and romantic relationships. The complex interplay between risk and protective factors within a developmental biopsychosocial perspective is highlighted throughout this book, for example in relation to the increased risk for depression in teenage girls. Differences in brain maturation between boys and girls are explored and early pubertal maturation in girls appears to be a particular vulnerability factor. This is discussed in relation to hormonal influences and the 'affiliative need' of girls, whereby girls are more likely to experience disappointment and 'co-ruminate' with their peers.

The developmental framework used by the authors has not been previously adequately explored and therefore this book is essential reading for anyone interested in understanding depression and the potential mechanisms involved across the life-span, as well as gaining an insight into normal emotional development. The presentation of the evidence base is thorough but left me wondering about other potential vulnerability factors that were not covered. For example, although the effects of culture are mentioned, a chapter with a fuller exploration of developmental cultural issues in depression would have been fascinating. Similarly, I wondered about a developmental perspective on socioeconomic status and how this may differentially influence depression. This is not a criticism of the book but a reflection on how this impressive volume of work provokes further thought and questions. The authors have succeeded in their aim to produce a text that synthesises diverse research areas generating new perspectives on depression for future investigation.

**Bernadka Dubicka** University of Manchester, The Junction, Piccadilly, Lancaster LA1 4PW. Email: bernadka.dubicka@manchester.ac.uk

doi: 10.1192/bjp.bp.109.067975



### Women and Depression: Recovery and Resistance

By Michelle N. Lafrance (author) & Jane Ussher (series editor)  
Routledge. 2009.  
£16.95 (pb). 248pp.  
ISBN: 9780415404310

According to Michelle Lafrance, psychology, psychiatry and psychotherapy are 'notorious for holding a myopic view of people's distress', as they only look to neurochemical and cognitive models to explain depression. She challenges this approach in her

book, one of a series entitled 'Women and Psychology'. The book is based on in-depth interviews with women who have experienced depression and recovered. Lafrance interviewed 19 women from an eastern Canadian city, focusing on their recovery from depression, and undertook similar interviews with 14 women from a semi-rural area who attended a 'Nurturing Ourselves' workshop which focused on the ways in which they attended to their health and well-being in everyday life.

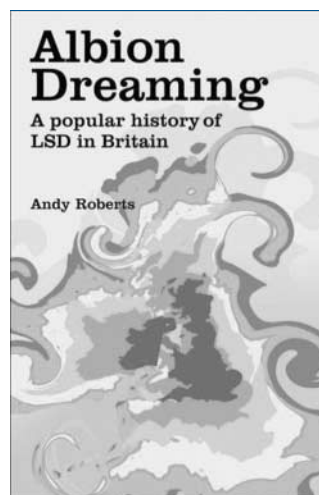
In the first chapter, Lafrance reviews the lives and experiences of women which, she argues, are the main drivers for depression: violence and abuse, poverty, care-giving and difficult relationships. I would argue that most mental health professionals are aware of the realities of the lives of many women with depression in relation to the issues she discusses.

The second chapter explores the analysis of her data in relation to recovery and in the third she addresses the self-care women undertook in order to remain well, which is often a struggle in the face of competing demands and societal views. In addition to discussing the themes emerging from these interviews, Lafrance also reviews and interweaves the background literature and main feminist and sociological theories relating to depression in women. The book draws to a close with a concluding chapter and there are appendices outlining Lafrance's methods.

As much of the recovery agenda in psychiatry focuses on severe mental illness, this book is a welcome gathering together of the detailed experiences of women who have suffered from depression, and the current theories and literature. Trainees will find it a good introduction to feminist and sociological theory in relation to women and depression and a welcome complementary text to all those biomedical ones. In addition to thinking about recovery, it will also provide an example of a qualitative research method, namely discourse analysis.

**Carol Henshaw** Liverpool Women's NHS Foundation Trust, and Staffordshire University, Bank House Farm, Spen Green, Smallwood, Sandbach, Cheshire CW11 2UY. Email: chenshaw@doctors.org.uk

doi: 10.1192/bjp.bp.109.068197



### Albion Dreaming: A popular history of LSD in Britain

By Andy Roberts.  
Marshall Cavendish. 2008.  
£18.99 (hb). 288pp.  
ISBN: 9781905736270

As a trainee psychiatrist 20 years ago, I recall hearing a senior colleague recount being given lysergic acid diethylamide (LSD) in the 1950s as an experiment at work and being taken to the old Glasgow Airport to watch the planes taking off and landing. Although everything was vivid and meaningful at the time for him I did not get the impression that he gained anything of lasting

value for his work as a psychotherapist from this experience in the three decades to follow.

British psychiatry's dalliance with LSD in the treatment of neurosis and alcoholism from 1953 onwards through to the mid-1960s when it fell out of favour pre-dates the widespread use of antidepressants as a treatment for neurotic conditions. It also pre-dates the opprobrium that was to attach to LSD-25 or 'acid' in the cultural conflicts between the establishment and the hippie generation. This conflict led to LSD's class A status in the Misuse of Drugs legislation that followed in 1971. The psychiatric story is only one aspect of this 'popular' history which is an excellent piece of high-quality journalism, ranging across the interests of the military and security services in Albert Hofmann's 'problem child' as either a weapon to disable the enemy or a 'truth drug' for interrogation, to much detail on the counter-cultural psychedelic movement from the 1960s up to the present.

The story presented by Roberts fits very well with Mike Jay's comment that the history of mind-altering drugs often follows a three-stage Frankenstein narrative: in the first stage the drug is discovered and celebrated; in the second it escapes from the laboratory, taking on a life of its own, and is perceived as a menace to the prevailing order; finally, in the last stage the powers that be try their best to capture and control the 'monster'.<sup>1</sup> There is no doubt from the account here that the high priests of the counter-culture who advocated that all should try LSD at least once in their life wanted to overturn the fundamental values of our materialistic culture. Timothy Leary is refused entry to the UK at various points in this story and the memoranda of the customs official refusing him entry are enlightening. Also of interest is that the LSD revolutionaries wanted to go further than even Ronnie Laing would countenance and Laing refused to associate himself with distributing free LSD to a large number of young people simultaneously as a social experiment in the UK. (Laing is also mentioned as conducting LSD psychotherapy with Sean Connery who was feeling insecure after the success of *Goldfinger* in 1964.)

Roberts's work is a very useful addition to the literature as it complements Jay Stevens' earlier account from the USA, *Storming Heaven*,<sup>2</sup> and also represents original research in the oral history tradition using the medium of the internet.

*Albion Dreaming* is not a work by a medical historian and it generously points the way to the need for more detailed scholarship on this topic, such as is starting to emerge – for example, Dr Erika Dyck's work on Canadian psychiatrists' use of LSD in the 1950s and 1960s. Similar work for the UK would be of interest.

The story remains highly topical at a time when the classification of drugs of misuse in the Misuse of Drugs act has become a political football – witness cannabis recently moving from class B to C and then back again. The disregard for expert testimony on the relative safety of LSD was as strong in the high-profile court cases of the 1960s as it is today for LSD's ranking as 14th out of 20 in the league table of drug harmfulness<sup>3</sup> produced by the expert panel of Blakemore, Nutt and others. Still, LSD remains a class A drug. Interestingly, the use of LSD has been declining in recent years perhaps because of the range of other psychedelics available.

My main quibble with Roberts's book is that he underplays the risk of psychiatric harm which he is right in saying has often been overplayed by the media. As a corrective, I would refer readers to the review by Abraham & Aldridge<sup>4</sup> but otherwise commend this book as an engaging work of cultural history.

1 Jay M. *Emperors of Dreams: Drugs in the Nineteenth Century*. Dedalus, 2000.

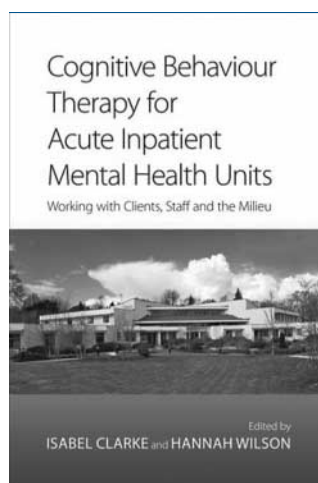
2 Stevens J. *Storming Heaven – LSD and the American Dream*. Heinemann, 1988.

3 Nutt D, King LA, Saulsbury W, Blakemore C. Development of a rational scale to assess the harm of drugs of potential misuse. *Lancet* 2007; **369**: 1047–53.

4 Abraham HD, Aldridge AM. Review: adverse consequences of lysergic acid diethylamide. *Addiction* 1993; **88**: 1327–34.

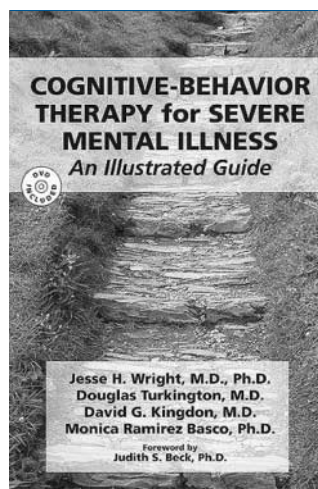
Iain David Smith Gartnavel Royal Hospital, Kershaw Unit, 1055 Great Western Road, Glasgow G12 0XH, email: iain.smith@ggc.scot.nhs.uk

doi: 10.1192/bjp.bp.109.065441



**Cognitive Behaviour Therapy for Acute Inpatient Mental Health Units: Working with Clients, Staff and the Milieu**

Edited by Isabel Clarke & Hannah Wilson.  
Routledge, 2009.  
US\$44.99 (pb). 248pp.  
ISBN: 9780415422123



**Cognitive-Behavior Therapy for Severe Mental Illness: An Illustrated Guide**

By J. H. Wright, D. Turkington, D. G. Kingdon & M. R. Basco.  
American Psychiatric Publishing, 2009. US\$65.00 (pb). 374pp.  
ISBN: 9781585623211

*Cognitive Behaviour Therapy for Acute Inpatient Units* is written 'both for and by those people who find themselves in acute mental health inpatient units in the UK', and it certainly tells it like it is. Written mainly by clinical psychologists (one of the few irritating aspects of this book lies in the interchangeable use of clinical psychologist and cognitive behaviour therapist), the challenges of providing any kind of psychological therapy in an in-patient setting are clearly laid out. Sections on working with individuals, staff teams and groups, illustrated by case studies, all contain useful descriptions of practice and what can be achieved through the application of psychological theory, mainly third-wave cognitive-behavioural therapies (CBT). It is, however, the relentless optimism of the authors in the face of all the ridiculous barriers to their work (which will be familiar to most readers) that gives this book its peculiar charm.

Although it will be of real interest to all staff who work on acute units, I would like to make it mandatory reading for ward