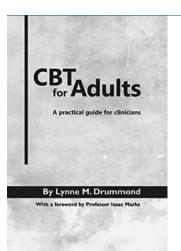
Book reviews

Edited by Allan Beveridge, Femi Oyebode and Rosalind Ramsay

CBT and practice how to construct CBT formulations from a variety of clinical scenarios.

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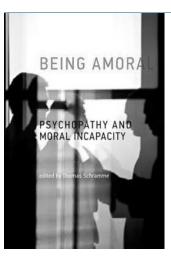
CBT for Adults: A Practical Guide for Clinicians

By Lynne M. Drummond. RCPsych Publications. 2014. £30.00 (pb). 280 pp. ISBN 9781909726277

The author sets out an extremely broad remit for this book: 'a comprehensive guide to the use of cognitive-behavioural therapy (CBT) throughout adult psychiatry'. There is an implicit emphasis on the more severe, secondary care presentation of mental health problems, although she does also include a brief summary of Improving Access to Psychological Therapies (IAPT). The emphasis on situations frequently encountered in secondary care, such as psychosis, personality disorder and prescribing issues (when a patient is also receiving CBT), makes this book a particularly useful resource for psychiatrists in training and indeed other medics, such as general practice trainees, who have a particular interest in mental health. A particular strength of the book is the excellent case examples which it contains. Atypically for a textbook, the examples do not just show how things can go 'swimmingly well' if we put into practice the techniques, but rather are complicated and typical of the complex scenarios which we actually encounter in psychiatry.

The author's own extensive experience in the field of CBT shows itself in the choice of conditions and therapies covered. Examples include social skills training (such as for patients with schizophrenia) and motivational interviewing approaches for addictions. I have only two reservations about this book. First, to help memorise the CBT models for the specific conditions it would have been helpful to have included these models in their original basic diagrammatic formats (e.g. the Clark model of panic). Second, there is an emphasis on 'assessment' and treatment approaches but the book could have outlined more succinctly and more frequently how clinicians should try to formulate a patient using a CBT model. The chapters which relate to obsessive-compulsive disorder, body dysmorphic disorder and hoarding are particularly rich and informative, which no doubt reflects the author's own experience in this area, especially welcome as hoarding in particular is a clinical area which is often neglected in CBT literature.

Overall, this is a good, comprehensive textbook, particularly for trainee psychiatrists, although they will obviously need to add to it the indispensable experience of face-to-face contact in



Being Amoral: Psychopathy and Moral Incapacity

Edited by Thomas Schramme MIT Press. 2014. £31.95 (hb) 344 pp. ISBN 9780262027915

This volume aims to examine the concept of psychopathy in relation to the lack of moral capacity, which is widely believed to be the defining characteristic of the condition.

The essays in this book cover a broad spectrum. Some authors use psychopathy as a way of examining the nature and structure of morality. The questions addressed include whether moral behaviour is rooted in emotion (or 'sentiment'), rationality or a combination of the two; whether moral internalism holds (i.e. that awareness that an action is morally required entails motivation to carry out that action); the nature and overlaps between empathy, sympathy and the ability to take the perspective of another person; whether one can experience resentment at being the victim of a moral transgression without caring about others who are similarly victimised; and whether the distinction between moral and conventional transgressions of rules is a valid one.

A central problem that arises when writing about psychopathy is uncertainty about the concept itself. This volume contains nearly as many definitions as there are chapters. Psychopathy is variously defined as a discrete condition based on distinct neuropathological abnormalities; an extreme form of antisocial personality disorder; sociopathy plus violence; an above-threshold score on the Psychopathy Checklist – Revised (PCL-R); as primary or secondary depending on whether one scores highly on Factor 1 or Factor 2 of the PCL-R; and as an inability to care about moral reasons and the effects of one's actions on others. Gwen Adshead has contributed an interesting essay in which she examines abnormal use of language and narrative incoherence as features of psychopathy. Another interesting chapter is on dangerous and severe personality disorder, a concept that overlaps with, but is non-identical to, psychopathy.

In trying to decide whether psychopaths, however defined, are amoral, we hit up against a similar problem of the heterogeneity of moral concepts. This is important when we come to consider whether psychopathy leads to diminished moral responsibility. Such considerations bear on the question of what responses are