Ten books

Chosen by Michael King

Choosing ten books that have most influenced my practice is an odd challenge. I wasn't one of those medical students who wanted to do psychiatry since he was 12, or read most of Freud or Jung. In fact throughout medical school, and for several years as a junior doctor, I thought psychiatry and psychiatrists were pretty weird. It was only in my general practice vocational training year that I realised how much of medicine concerned the psychological and began my psychiatric training. This influence came not through books that I read but through the patients whom I saw.

So what is this review for? Is it to recommend some good reading, help others improve their practice, show how erudite I am, reveal something of myself or all of the above? I'm not quite sure. I read book reviews out of curiosity because they show me how people think. A good review tells us as much about the reviewer as the book. That's why periodicals with dull names and even duller designs, like the London Review of Books, survive, despite Arts Council subsidies. However, as I imagine it was for those who have gone before me, selecting these ten books was a challenge. It requires a degree of introspection that might be fascinating for me but risks being pretty dull for you. Some works influence our practice directly by their wise words on cognition, psychopathology, sociology or statistics, while others change us as people. I will give equal weight to both.

Sex and sexuality

I suppose no better place to start is with James Baldwin's *Giovanni's Room*. If ever there was a tale of ambivalence, depression and longing, this is it; a young American in Paris struggling against his passionate feelings for an Italian who is free and unashamed of his sexual desires. Such ambivalence was common when the book appeared in Cold War America but even

today fundamentalist believers in the Christian, Jewish and Muslim faiths seem to be more exercised by homosexuality than climate change, civil and military violence, poverty or the threat of global epidemics. Our apocryphal visitor from Mars can only watch and wonder. I stumbled upon this short novel on the top shelf of a bookshop in a tiny, 1970s New Zealand town that boasted more sheep than people. Courageously published in 1956 by a Black American, it became the impetus for my first faltering steps towards openness and insight. Facing the disapproval of family and society, not through brave rebellion but because there was no choice, has enabled me to see the world from the outside - if one can ever really do that. It has made me forever alert to hypocrisy and rejection and has been invaluable in my understanding of the fear and struggle in the lives of people who consult me. I am grateful that I found the courage to face the prim shop assistant and buy it.

What can we know?

No psychiatrist's consideration of ten books that influenced them can fail to mention Karl Jaspers' *General Psychopathology*. However, I include it not because I was mesmerised during my training by its lucid description of the phenomenology of mental illness; I wasn't. I discovered the real gems later, where Jaspers focuses on meaning and belief. His painstaking approach to the spiritual in the context of the psychological is profound and he manages to pull it off without the usual romantic or post-modern notions that so often cloud the subject:

'The fact that man senses his finiteness everywhere and cannot be satisfied with any of it points to a hidden possibility in his nature. He must have another root of his Being than that of his finiteness. If he had no pre-knowledge of the unknowable he would lack urge to enquire. But he seeks after Being itself, after the Infinite and the Other. Only this can give him satisfaction' (p. 763, emphasis in original).

Pretty interesting, if you're interested. And may I remind any trainee, who at this point thinks I'm getting a bit dull, that Jaspers also wrote some liberal (for its time) stuff about masturbation and even speculated about the psychological origins of orgiastic cults. Excellent bedtime reading.

In similar vein Kant's philosophy, particularly that found in the Critique of Pure Reason and the Critique of Practical Reason (Wood, 2001), has profoundly affected the way I think. His painstakingly obsessive digging down through what and how we can perceive and know has influenced me over the years. In particular, I find his ideas on morality, means and universal ends complex and yet fascinating. It is interesting to see how his concepts of morality, as rational precepts that can arise through reflection in any person, provided they have universal application, might be a springboard for 20th-century post-modern thought, although Kant would be amazed to see where it has led.

Meaning

I practise cognitive-behavioural therapy but in every patient I encounter, no matter how smart or sophisticated, I see a longing for meaning and purpose. Although cognition is inevitably the way we make sense of our perceptions, cognitive therapy often disappoints when it is rigidly applied and fails to grasp our patients' struggle to find meaning. Some years ago Viktor Frankls' Man's Search for Meaning had a powerful effect on me. Although I do not subscribe to the school of existential psychotherapy that arose from this young psychiatrist's reflection on his imprisonment in Auschwitz, it was clear to me that man's search for meaning in the most deprived and cruel conditions imaginable reveals much about survival of the human spirit. It doesn't give me answers to patients' questions but it makes me see when they're asking them.

Hard on its heels in the yearning for meaning stakes comes George Eliot's much neglected last novel *Daniel Deronda*. This story of 19th-century English attitudes to Jews is both instructive and moving. Eliot draws a memorable portrait of Mordecai the Jew (a somewhat secondary character) who sees in Deronda (the main character, who doesn't know he is Jewish for most of the novel) the fulfilment of his spiritual desire, the ultimate soulmate with whom

he can discuss meaning and fulfilment. Yearning for the 'one' who will explain and fulfil is likely to disappoint in the end. However, reading Deronda offers an antidote to the pervasive reductionism of psychiatry that, although greatly increasing our knowledge, be it of neuroscience or epidemiology, is ultimately sterile stuff when we encounter people in distress.

Epidemiology

Like many academics, I don't tend to read books about my own subject, epidemiology, as papers are always more salient and topical. One writer in particular, however, who is endlessly entertaining, as well as informative, is the statistician David Streiner - and it is no small task to make statistics funny. His book written with Geoffrey Norman, Biostatistics: The Bare Essentials, is a classic. Like many epidemiologists I actually like statistics and, like most nerds, can even read books about it on holiday. So, although this will not generally appear in the Observer's list of books for summertime reading, it will keep you guessing, laughs at our academic pomposity and is a great resource for epidemiologists in the making. It combines humour, humility and scholarship in equal measure and is well worth going back to again and again, no matter how sophisticated statistically we think we have become.

Realism

Sometimes when we look back it seems that everything is serendipity. We comprehend as we hear birdsong on the sunny morning of a funeral of a loved one that the world is indifferent to our fears, hopes and plans. At other times, however, like the celebrity who has started to believe he really does matter, our lives seem part of a lofty Hegelian roll of history. Thinking like that inevitably drew me to the stuff of realism, and fads followed, first for Thomas Hardy but later for Emile Zola, Gustave Flaubert and George Eliot. There is one of this kind, however, that stands out perhaps from the rest, at least for a psychiatrist, with its chilling description of that malady which has done its best to devastate so many families - alcoholism. L'Assommoir by Emile Zola relates the life of Gervaise who, abandoned by her lover and father of her two children, marries a man who descends into alcoholism before Gervaise descends into the same

state herself. It reveals the playful, hideous face of alcohol as it charms and harms its way into people's lives and, even worse, those who are close to them. Zola was criticised for his stereotypes of feckless working-class drunks. However, his depiction of medical treatment of alcoholism in 19th-century Paris and the dissipation wreaked by alcohol among the poor and those about to be poor is a must for aspiring psychiatrists who, as they look under metaphorical stones, will find alcohol addiction everywhere.

After theory

Like every junior doctor who wants to specialise in the discipline of his current post, I am in danger of overemphasising something read recently. However, I can't resist including Terry Eagleton's After Theory in my ten best. Eagleton's fluency and wit, as well as his ability to stand back and look at the (often rather silly) invasion of cultural theory into almost every academic subject (including psychiatry), makes this book a page turner. Instead of investing effort into things like a 'structuralist reading of Popeye the Sailorman' Eagleton urges academics and others towards a return to essential truths about such things as love, morality and death. There is a lot to read and ponder on in this short book, particularly for psychiatrists interested in the mental health of particular groups variously defined by their race, age or sexuality.

Self-help

I want to include a book that was prominent on the bookshelves of my father's generation but is still irrepressible today. In fact, it was recently revived by BBC Radio 4's 'Book of the Week'. Dale Carnegie's How to Win Friends and Influence People deserves a second look. If you can put aside its focus of getting on in business, it offers insights into the human mind that have not been surpassed by the abundance of self-help books we see in bookshops now. That the way we think determines our happiness and fulfilment is an age-old idea contained in many philosophical and theological systems that have been rediscovered and expanded in cognitive-behavioural therapy today. Carnegie emphasises the self-absorbed nature of all of us but most particularly those with what we now call common mental disorder. He shows how concern for others, resilience in times of stress and exposure to what we fear (be they thoughts or things) are the keys to overcoming it. It calls for less of 'me, me, me' and more of 'you, you, you', an approach that, as mental health professionals, we are prone to regard as trivial in contrast to rich, narrative-based explanations for mental distress. In fact, I am always intrigued by my patients' explanations for their depressive or anxiety states (and often their psychoses). This or that event in childhood, or a more recent loss or trauma are all confidently offered up as things that must be considered as causes for their depression or anxiety and put right in therapy. For an epidemiologist who can rarely put cause A together with effect B with much confidence or for very long (Davey Smith & Ebrahim, 2002), these leaps of faith are impressive. Given time, however, patients begin to see that the myriad of influences they endure each day makes a lost cause of concluding cause and effect and that concentrating on behaviour and cognition right now might be more profitable.

A passion

I cannot end without including a book on one of my passions. Like most otherwise lapsed New Zealanders, I still swim. Although exercise is a surprisingly neglected approach to disordered mental states (presumably because there is so much survival value in laziness), things are changing. I am fortunate enough to chair the trial steering committee for an ongoing, randomised trial of exercise for depression that is taking place in south-west England. My own experience is that exercise elevates mood and that swimming is the most sublime way to achieve that buzz. It also provides an unequalled time for reflection and meditation, which is not all about suspended animation or sitting in a corner. Perhaps thinking is more accurate or incisive when the cardiovascular system is at its most exuberant. No doubt someone somewhere is researching that. You can find no better description of swimming at the heart of a novel than in Jamie O'Neill's At Swim Two Boys. Here swimming is the symbol for a passionate struggle of politics, religion, class and sexuality set in the time of the Easter uprising in Dublin in 1916. So, sometimes, when I am leaping about in wild surf that is determined to drown me or gliding through the limpid blue of my local gym's swimming pool, I see a point in Being.

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