across the globe into his work. Recently, this includes the increasingly large contribution of research studies exploring attachment theory and its implications for childhood and adult development.

For those wishing to keep up to date with research highly relevant to clinical practice, the book is a one-stop-shop that allows the reader to become conversant with attachment theory research, discussed in the initial chapters. For those who are willing and able to invest more time and thought into the implications of Professor Blatt's book, they are unlikely to be disappointed. Peter Fonagy asserts in his foreword that Blatt's work represents 'the first comprehensive integrated model of personality development and could provide the foundation for the developmental psychopathology of the future'. No doubt some would contest this statement, but none the less this publication certainly represents a milestone in the integration of clinical experience, theorising and research from the psychodynamic school.

Blatt's thesis is essentially that although it has been recognised for decades that personality development appears to hold a tension between relatedness and self-definition (the desire/drive/ need to be close to others physically, emotionally and cognitively and the desire/drive/need to be separate and 'individuate'), what has not been fully recognised is the absolute interdependence of these processes.

Blatt takes as his springboard concepts such as the 'dialectical spiral or helix' to describe the way in which the infant's capacity to relate to itself and others gradually develops from its experiences of physical and psychological attunement and autonomy. From there he interweaves research on primates, which has similarly found their social organisation and behaviour to inhabit 'agonic' and 'hedonic' modes, narrative research identifying themes of 'intimacy' and 'power', and psychodynamic theory that has identified a tension between 'competition and success' and 'brotherly love and humility'. On this basis, Blatt proposes a 'dynamic structural developmental approach' that views psychopathology as arising from an imbalance in these facets of development.

The book stands alongside such classics as Erich Fromm's The Fear of Freedom (1942) in its contemporary relevance and originality of thought. However, it is unique in its scholarliness and comprehensive integration of the research across psychology, psychiatry, psychodynamic theory, social anthropology and neuroscience, to name a few of the academic fields from which Blatt draws. One aspect of psychological thought notably absent from the book was any reference to systems theory or a nod in the direction of understanding how individuals in society seem to present in a 'pathological' way not simply due to their development in their proximal social systems (families) but also over time due to how, once pathologised, their behaviour is influenced by society's response to their new identity. The elusive concept of 'power' was conspicuous by its absence, yet we know the role that poverty and social disadvantage play in incidence of those identified with mental illness.

Of particular interest to me was the challenge Professor Blatt's work represents to current diagnostic systems. He sets out a convincing rejection of the current psychiatric nosology in favour of a classification system that can hold itself up to scientific scrutiny and is based on valid concepts. For a clinician who has spent many years attempting to help individuals diagnosed with 'schizophrenia' (which can sometimes mean 'drug-induced psychosis' or be an indicator of neurological damage as a result of a head injury, or refer to hearing voices following severe and ongoing trauma, or hide Asperger's syndrome and so on, but for which there is no evidence of a biological brain 'disease' as is so often misunderstood by those we work with) this is a breath of fresh, logical air. I can see Professor Blatt and the now retired Professor Mary Boyle (author of *Schizophrenia: A Scientific Delusion?* Routledge: 2002) exchanging thoughts on this topic. However, whether Professor Blatt's *meisterwerk*, despite its vast expertise, will be able to move the mountain of the DSM–IV–TR or the ICD–10, I have grave doubts given the market forces which pull in the other direction.

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doi: 10.1192/bjp.bp.108.056333



Living with Schizophrenia

By Neel Burton & Phil Davison. Sheldon Press. 2007. £7.99 (pb). 128pp. ISBN: 9781847090065

Straightforward and, for the most part, comprehensible, this book charts the attitudes to and perceptions of schizophrenia from pre-Hippocratic times to gradual enlightenment through the centuries, down the various blind alleys of diagnosis leading to a more humane understanding. Of comfort to readers, carers and service users is that schizophrenia is irrefutably a biological disease of the brain, for which medication has been developed, along with complementary therapies, for those inclined to accept them. However, not much is offered in the way of reassurance or even recognition of the difficulties experienced by both carers and service users when the person with schizophrenia has no insight and is therefore unwilling to accept help.

Searching for answers is the overriding preoccupation of many individuals coming into contact with schizophrenia for the first time. A chapter on the predisposing factors of genetics, gender and ethnicity is informative as well as occasionally veering towards creativity and originality.

As in all publications on schizophrenia, there are few definitives. It could be caused by various factors. There is no black or white test to prove a diagnosis, meaning that wrong diagnosis is a clear risk. Some of the information is presented in a clinical form and the impression is that much has been 'lifted' from textbooks and internet sites. Tables explaining positive and negative symptoms, cognitive problems, care services and medication are easy to understand and provide very accessible sources of instant information. Helpful, too, is the section on the role of community mental health teams and the Mental Health Act 1983. Also discussed are the proposals for the reform of the Act and the concerns of their effect on civil liberties resulting in the shelving of these proposals.

The role of medication, the side-effects and benefits are explained, again though with an assumption that most individuals adhere to treatment regime. Neat and tidy, if the person can be relied upon to keep a treatment diary – many cannot.

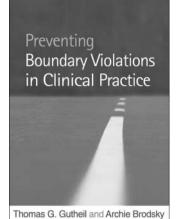
There are useful chapters on the place of the carer and the need for balance in responsibility to ensure a carer's own wellbeing. It is wonderful to read that blame for the illness of a loved one should not be shouldered – easier said than done.

The ability of an individual to access the correct benefits and allowances makes all the difference between living an independent and dignified life and one that is not so 'privileged', therefore the comprehensive chapter on these issues is invaluable and places this book ahead of many others for practical help.

To sum up, a lot of information is contained in this concise book, which makes it a valuable reference, particularly for people confronted with a shocking diagnosis of schizophrenia for the first time.

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doi: 10.1192/bjp.bp.108.053603



Preventing Boundary Violations in Clinical Practice

By Thomas G. Gutheil & Archie Brodsky. Guilford Press. 2008. US\$38.00 (hb). 329pp. ISBN: 9781593856915

Would you accept: (a) a handshake, (b) a lift, (c) a drink from a patient? Perhaps in a multiple-choice ethics examination you might avoid giving the impression that you were embarking on the famous 'slippery slope'. In real life, you might be somewhat puzzled at these situations having become apparently 'problem-atised'. Yet this is apparently the case for psychiatrists in the USA, following the extensive focus on boundary violations, with sexual misconduct being the most serious. In the view of the authors, the concept of the slippery slope has given rise to extensive constraints and fear of legal action or professional complaints, deriving more from overzealous risk management than the good of the patient.

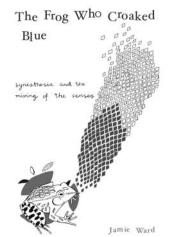
Gutheil & Brodsky derive their thinking and material from hours of discussion over many years at the Program in Psychiatry and the Law at Harvard Medical School. Their expertise is evident. The chapter on self-disclosure is particularly helpful in inducing reflection and considering wider options than in Britain, where they tend to range only from 'disclose nothing personal under any circumstances' to non-discussion and personal idiosyncrasy. Psychiatrists, used to asking the questions, may be taken aback by a more 'equal' approach and being asked 'Tell me, doctor, are you gay?' or 'Do you find me sexually attractive?', though 'Do you have children?' is not uncommon. Sometimes, honesty and straightforwardness is best, sometimes asserting that the question is 'not part of therapy', sometimes reversing the question by replying, for instance, 'What would it mean to you if I did find you sexually attractive, or if I did not?' The ethical standard recommended is that the response should be for the benefit of the patient.

Encounters in the community may be tricky. Therapists are advised that attending a patient's funeral is usually all right, as it may be appreciated by the bereaved family. On the other hand, attending a wedding has potential pitfalls – one might be asked to dance with one's patient or be perceived as trying to drum up custom on the basis of success.

Gutheil & Brodsky are clearly most used to transference-based analytic work in private office practice and their references to community and hospital psychiatry or other forms of therapy are brief and artificial, though an attempt is made. In the UK we have been slow to realise the extent of professional abuse of patients and give serious consideration to boundary issues, yet it is evident that remedies will depend so much on context that books such as this one almost require translation.

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doi: 10.1192/bjp.bp.108.056283



The Frog who Croaked Blue. Synesthesia and the Mixing of the Senses

By Jamie Ward. Routledge. 2008. £8.99 (pb). 192pp. ISBN: 9780415430142

Synaesthesia is a fascinating phenomenon (or group of phenomena) in which stimulation of one sensory modality apparently leads to sensory experience in another modality (e.g. sounds producing visual experience of colour, as in the example that gives this book its name), but it has often been seen as a diverting curiosity rather than a subject deserving serious scientific study. In recent years this situation has changed and synaesthesia has attracted the attention of prominent psychologists and neuroscientists. Jamie Ward, a senior research psychologist at the University of Sussex, has emerged as one of the leading experts in the field, and has now written this short but compelling book, the first full-length 'popular science' treatment of the topic.