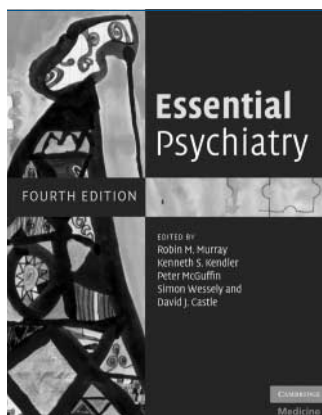


principles of operant conditioning and social learning (Skinner and Bandura are acknowledged influences, and Wolpe was an early collaborator). Although not avoiding issues of theory and service management, the book attempts to be more a practical manual than a textbook. In this Liberman is at least partially successful. A particularly good chapter on working with families would give any practitioner a degree of competence in this oft-discussed but in reality oft-avoided aspect of mental healthcare. Where treatments are sketched in, the reader is directed to resources commercially available from Psychiatric Rehabilitation Consultants, according to the website 'the dissemination site for the UCLA Psych REHAB program' (www.psychrehab.com).

Liberman's book stands out from the crowd in a number of ways. He is the only author to attempt to tackle the subject on his own, which allows his humanistic concern and deep commitment to alleviating the effects of mental illness on service users and carers to shine through, despite his occasional use of language that deviates from the politically correct. As the book's title indicates, Liberman is upfront about the 'd-word', disability: a word that has served in these socially inclusive and recovery-oriented times to make rehabilitation so very unfashionable. He has, uniquely among the fifty-odd contributors to the other recently published titles, the intellectual self-confidence to articulate concerns about the more glib formulations of the recovery movement, with the marvellously dismissive: 'Catchwords trump dry logic, dull evidence and mere facts'. This book is in a very real sense a monumental achievement, fruit of 40 years of active research and practice in what was and remains an undeservedly unfashionable field.

Frank Holloway Consultant Psychiatrist, Bethlem Royal Hospital, Monks Orchard Road, Beckenham, Kent BR3 3BX, UK. Email: f.holloway@iop.kcl.ac.uk

doi: 10.1192/bjp.bp.108.060053



Essential Psychiatry (4th edn)

Edited by Robin M. Murray, Kenneth S. Kendler, Peter McGuffin, Simon Wessely & David J. Castle
Cambridge University Press. 2008.
£48.00 (pb). 752pp.
ISBN: 9780521604086

There are very few prospects less appetising than the appearance of a new edition of yet another multi-author textbook in any discipline. Far too often such textbooks are over-sized, over-priced and characterised by an overwhelming sense of disjointed incoherence, as an arbitrary selection of topics receive idiosyncratic treatments at the hands of a variety of uninterested authors, selected for no apparent reason. In fairness, though, not all multi-author textbooks fit this paradigm: occasionally, one such volume will provide a brisk, formatted run-through of current thinking about key themes and leave the reader with a genuine desire to seek out more focused, opinionated polemics on specific topics of interest.

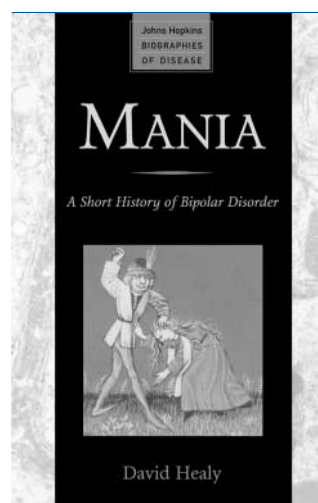
Happily, the 4th edition of *Essential Psychiatry* belongs firmly in the second category, managing to avoid the pitfalls of the dreaded multi-author format and producing some interesting new thinking in a range of areas. I was particularly impressed by the chapters on schizophrenia and related disorders by Robin M. Murray and Kimberlie Dean, and forensic psychiatry by Kimberlie Dean, Tom Fahy, David Ndegwa and Elizabeth Walsh. The chapter on social and cultural determinants of mental health by Vikram Patel, Alan J. Flisher and Alex Cohen is also outstanding and should be mandatory reading for psychiatry trainees at all levels.

Notwithstanding these considerable strengths, *Essential Psychiatry* is still a multi-author volume and as such lacks the forceful clarity and focus that accompany a single author's voice. This is not a fault of the volume itself, but the format. On this basis, then, although there is a clear need for texts such as this one, there is a similarly pressing need that they be complemented by shorter, single-author volumes that not only summarise existing evidence in specific areas, but offer radically new, opinionated ways of thinking about psychiatry.

There are, sadly, few such polemics published any more, as publishing houses tend towards the 'compilation' rather than 'authorship' of textbooks. Incidentally, 2010 will see the 200th anniversary of one of the most interesting single-author textbooks of psychiatry ever published in Ireland or the UK, Dr William Saunders Hallaran's *Enquiry into the Causes Producing the Extraordinary Addition to the Number of Insane together with Extended Observations on the Cure of Insanity with Hints as to the Better Management of Public Asylums for Insane Persons* (Edwards & Savage, 1810). Best of all, Dr Hallaran's book can be downloaded free of charge from the Google Books website (www.books.google.com) and should be of interest to practising psychiatrists and trainees alike. In addition, of course, to *Essential Psychiatry*.

Brendan D. Kelly Consultant Psychiatrist and Senior Lecturer in Psychiatry, Department of Adult Psychiatry, University College Dublin, Mater Misericordiae University Hospital, 62/63 Eccles Street, Dublin 7, Ireland. Email: brendankelly35@gmail.com

doi: 10.1192/bjp.bp.108.060277



Mania. A Short History of Bipolar Disorder

By David Healy.
The Johns Hopkins University Press.
2008. US\$24.95 (hb). 320pp.
ISBN: 9780801888229

In the preface to his new book, David Healy, chronicler of the evolution of psychopharmacology and fearless critic of the pharmaceutical industry, offers some playful remarks about

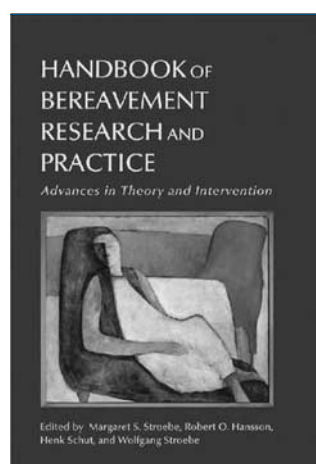
writing history. He points out that as a 'player' in the debate about the role of medication in mental illness, he inevitably has his own agenda. He asks the reader to decide whether this agenda distorts the story he tells. The warning is an apt one, because Healy's book, rather than being a short history of mania, is actually more concerned with recent developments in pharmacotherapy. The book races through two millennia to arrive at the 1950s and the advent of lithium. One senses that Healy is really more interested in recent events than the distant past. This is a pity, because his account of medical ideas about mania in classical Greece is revealing. He points out that many clinical accounts of manic-depressive illness begin by claiming an ancient lineage for the condition, reaching back to Hippocrates. By looking at the original documents, Healy convincingly shows that other authors have quoted selectively from Hippocrates and omitted the crucial detail that symptoms suggestive of 'mania' occurred in individuals who were also experiencing 'fever'. He suggests that what was actually being described was some kind of organic, confusional state. Healy refers to that master of the linguistic archaeology of psychiatric terminology, German Berrios, who emphasised that the meaning of clinical terms can change over time and we cannot assume that when the ancient Greeks used the word 'mania', they meant the same as we do.

Thereafter, Healy proceeds to 17th-century England to consider Thomas Willis' work on the brain, before travelling to Paris in the 1850s where the new category of *folie circulaire* was being outlined independently by Jules Baillarger and Jean-Pierre Falret. This concept was taken up by Karl Kahlbaum and then Emil Kraepelin who by the end of the 19th century was delineating a condition he called 'manic-depressive insanity'. According to Healy, the disease remained a rarity until the 1960s when clinicians began to ask whether it might respond to lithium. Healy devotes nearly two-thirds of the book to subsequent developments in psychopharmacology. He is clearly fascinated by the subject and over the years has interviewed many of the leading figures in the field, the fruits of such labour being published in his three volumes of *The Psychopharmacologists* (Altman, Chapman & Hall, 1996). This has been a valuable and illuminating project in oral history, but do we need quite so much of this material in a short book on bipolar disorder? The average reader may find accounts of who said what to whom at a succession of medical conferences and what happened behind drug company walls a bit wearying.

Nevertheless, what Healy has to say about recent trends in the treatment of mood disorders is deeply disturbing, particularly the case of 'Alex', a 2-year-old baby girl who was treated with antipsychotic medication for a supposed bipolar condition and subsequently dropped dead. Hers was not an isolated case: Healy reveals that in the USA young children and infants are routinely being treated with antipsychotic medication for psychiatric conditions they almost certainly do not have. In the final section entitled 'Coda', Healy strikes an apocalyptic note which veers between the allusive and the opaque. The pharmaceutical companies' push to sell their product, Healy asserts, has transformed the way we see ourselves and how doctors practise medicine. We are at risk from what Healy styles a 'pharmaceutical Pied Piper' who connives to have our children administered unnecessary and potentially fatal doses of psychotropic medication. Despite the imbalances in the book, Healy continues to provide a probing and challenging commentary on the state of contemporary psychiatry.

Allan Beveridge Queen Margaret Hospital, Whitefield Road, Dunfermline
KY12 0SU, UK. Email: allan.beveridge@fahf.scot.nhs.uk

doi: 10.1192/bjp.bp.108.060483



Handbook of Bereavement Research and Practice: Advances in Theory and Intervention

Edited by Margaret S. Stroebe, Robert O. Hansson, Hank Schut, & Wolfgang Stroebe.
American Psychological Association, 2008.
US\$69.95 (hb). 658pp.
ISBN: 9781433803512

This wonderful, heavyweight volume draws together a cast of eminent contributors who review and provide expert commentary on the latest developments in bereavement research. It is the third handbook edited by Margaret Stroebe and colleagues, the first having been published in 1993. It should not, however, be seen as an updated edition, as it is a new work and like its predecessors provides a masterly state-of-the-art overview.

One of the most impressive features of this book is the way it sweeps across the field of bereavement. The editorial stance conveys respect for a spectrum of knowledge, from evolutionary and biological analyses through to social constructionist and sociological perspectives. This open-minded attitude must surely have played a part in enabling the editors to gain contributions from virtually all the leading thinkers and researchers in the field. It covers topics that are relevant across the lifespan, considers differing family, societal, religious and cultural contexts, and pays attention not only to the current state of the field but also to implications and applications.

A number of chapters challenge and push the boundaries such as those by Archer, Fisher and Luecken that focus on findings from functional magnetic imaging and animal studies, in a discipline that is currently dominated by 'softer' ideas. The two chapters that pose arguments for and against the inclusion of prolonged grief disorder in the next edition of the *Diagnostic and Statistical Manual of Mental Disorders* are explicitly controversial, with Prigerson and colleagues working hard to convince us that the time is ripe, whereas Rubin and colleagues argue for greater caution. Chapters that highlight growth and resilience (Davis' on post-traumatic growth; Sandler *et al's* on theory-based interventions for children who have lost a parent) in an area that is more used to considering the devastating consequences of grief, might also be seen as disturbing usual understandings.

As with many edited volumes, the chapters vary in style, and it is a joy to see the different ways that topics are approached and to hear the voices of the authors' commentaries. Some, such as Parkes in his excellent chapter on bereavement following disaster, and Doka on disenfranchised grief, draw on huge personal experience, centring on their own research and lessons learnt. Others, such as Field writing on continuing bonds and Schulz *et al* writing on caregiving and bereavement, provide evaluative, systematic reviews of research publications. It is perhaps trite to say, but it seems unfair to mention these yet not other contributors, as so many deserve mention.

The book is unashamedly and, one could say unfashionably, focused on a scientific approach that propounds the need for sound research while also paying attention to the need for research to influence practice. In this regard, part VI on the development and efficacy of interventions is particularly welcome. This