Psychosis in older people receives perplexingly little attention compared with dementia and depression. I have never understood why this should be so, as these patients constitute some of the most memorable that old age psychiatrists encounter and often show remarkable responses to antipsychotic treatment. Opaque and unhelpful terminology, combined with uncertainty about how such patients should be viewed in relation to schizophrenia in young people and psychoses that arise secondary to it, has perhaps contributed to this neglect. The importance of this book is that it will gain deserved recognition as required reading for old age psychiatrists in training.

Robert Howard
Professor of Old Age Psychiatry
Institute of Psychiatry
London SE5 8AF
UK
Email: r.howard@op.kcl.ac.uk
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The Origins and Course of Common Mental Disorders

This book had its first incarnation 12 years ago when Peter Huxley was David Goldberg’s co-author. It’s just as important a book now as it ever was because of the emphasis on what the community is really suffering from, rather than what the psychiatrist ends up seeing on the wards or in the clinic. The contrast between the two is much wider than most psychiatrists appreciate – much to the frustration of many general practitioners.

But Goldberg and Goodyer marshall current thinking on what really are common mental disorders in a manner that is useful to psychiatrists precisely because they range across viewpoints unfamiliar to many in the profession to bring us a fresh and often surprising perspective on mainstream disorders.

For example, it remains a puzzle why women are more prone to depression than men but one clue many are focusing on is that as a result girls are exposed in the longer term to more disappointing experiences than boys within their friendship framework. Perhaps such acute disappointments are potent risks for depression? Perhaps boys are protected from the disappointments of a more intimate and intense social life by their preference for more solitary interests like computing, model-building, collecting stamps or the like. Before. While it is therefore tempting to locate this corresponding marked and profound contrast in mental health which continues throughout adult life as ‘down to hormones’, Goldberg and Goodyer suggest here an intriguing theory that will be genuinely novel to most psychiatrists.

The theory locates the centre of the action in terms of mental health in an area of human life which has so far been neglected by psychiatrists – friendship. The first point the authors make is that marked differences begin to emerge in adolescence in the same-sex friendship patterns of boys and girls. First, girls’ conversation with friends tends to be more emotional, while that of boys is markedly more reserved. The very emotionality of the language girls use might put more strain on their friendships – in other words they may demand more of their friends than boys do. It may come as no surprise then to learn that girls have a higher turnover of close one-to-one friendships than do boys.

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numbers on trains? The authors note that, to the extent that these behaviours provide a degree of satisfaction, a friendless boy could have a theoretical mental health resilience advantage compared with a friendless girl.

There are many other examples where this fascinating book will provoke and intrigue but the key focus on what the community really suffers from – as opposed to what psychiatrists end up treating – is a sobering and ominous warning about how detached many in the profession can get from the real world out there.

Raj Persaud

Westways, The Maudsley Hospital,
49 St James Road, West Croydon CR0 2UR, UK.
Email: r.persaud@iop.kcl.ac.uk
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