Book reviews

neuroimaging in psychiatry, as well as new directions in these areas, are discussed. In addition, an introduction to the principles of neuropathologically sensitive MRI techniques (magnetization transfer and diffusion tensor imaging) is provided, and the data on the application of these techniques to the study of psychosis reviewed. Other subjects covered in this volume include the genetics of normal and abnormal cognition, brain development, and consciousness.

I would recommend this book to any clinician and researcher working in psychiatry, neuropsychology and neurology. It provides a fascinating collection of articles that introduces one into neuroscientific topics currently of interest in psychiatry.

Machteld Marcelis
Department of Psychiatry and Neuropsychology
Maastricht University
The Netherlands

Campbell’s psychiatric dictionary

Campbell’s Psychiatric Dictionary is now available in its 8th edition. This message should in itself be sufficient as a review of this cornerstone in the literature of the psychiatric profession. However, allow me a few words more.

Being a dictionary browser, this book is a goldmine: Servomechanism, reeler, holergasia, consolidation (which is not what you believe), artificial intelligence (which has nothing to do with management culture), acamprosate and good old maternal deprivation syndrome.

It covers the full spectrum from basic psychoanalytic theory and history to the most present modern genetic, biochemistry and brain physiology.

By offering comprehensive descriptions and biographies, the dictionary has the character of being almost an encyclopedia.

The decrease in academic educational level has in some parts of the so-called civilized world come to a level where you can become a psychiatrist (and doctor within the other medical specialties too) without ever having been taught even the slightest touch of Latin – (not to mention Greek). To these poor people the Campbell Psychiatric Dictionary would bring at least some touch of cultural background if it in following editions added Latin and Greek origin to relevant words, concepts and expressions.

Finally, by giving the crucial (and almost) fully correct information about my late teacher, Professor Erik Strömgren, the author made me a full supporter of the book which should be a must in any locality where psychiatrists, neurologists and members of allied profession move.

Povl Munk-Jørgensen
Unit for Psychiatric Research
Aalborg Psychiatric Hospital
Molleparkvej 10
DK-9100 Aalborg, Denmark

Autism and creativity. Is there a link between autism and exceptional ability

This book covers an interesting topic, i.e. whether certain historical figures had Asperger’s syndrome or showed features of Asperger’s syndrome. Furthermore, the book provides us with a better understanding of these major characters in modern time history.

The first part of the book covers the diagnosis and psychology of high functioning autism and Asperger’s syndrome. The subsequent and largest part of the book is a presentation of a lot of examples from the life of the philosopher Wittgenstein to support that Wittgenstein suffered from Asperger’s syndrome. Also, the book deals with other historical figures, i.e. Sir Keith Joseph (politician), Eamon de Valera (politician), William Butler Yeats (poet and playwright), Lewis Caroll (author), and Ramanujan (mathematician).

Many examples are provided about the behaviour of the historical characters and these examples are related to the symptoms of Asperger’s syndrome/high functioning autism. However, owing to the many examples provided the book sometimes seems incoherent and therefore may be less readable.

The description of features of Asperger’s syndrome or high functioning autism in relation to the historical figures Sir Keith Joseph, Eamon de Valera, William Butler Yeats, Lewis Caroll, and Ramanujan provides new information and seems interesting.

This book although it sometimes seems incoherent expands our understanding and contributes to the discussion of whether these historical persons have features of Asperger’s syndrome or autism. This is, however, an ongoing debate and the discussion has not been closed with this book.

Marlene B. Lauritsen
Center for Basic Psychiatric Research
Psychiatric Hospital in Aarhus
Skovagervej 2
DK-8240 Risskov, Denmark

Beating the blues: new approaches to overcoming dysthymia and chronic mild depression

Although many self-help books have been written for people with depression, Thase and Lang are the first to publish a specific self-help book about dysthymia and chronic mild depression. In this book, the authors describe elaborately what dysthymia and mild chronic depression are, the symptoms, diagnosis and risk factors. Furthermore, several mood-management techniques that can be used by patients to reduce mood problems are described with real-life examples. The authors give useful advice on when to seek professional help and, apart from psychotherapy and pharmacological treatment, also describe alternative treatments, such as exercise, nutrition and herbal treatments.

One problem with the book is that many of the important subjects could just as well be written for any self-help book on depression and is not very specific for dysthymia or mild
depression (for example, the large chapter on mood-management techniques ‘the psychology of feeling good’). But overall, the book is a welcome addition to the self-help literature, in which the expertise of Thase and the writing skills of Lang are combined into a well-written, easily accessible self-help book, which undoubtedly will be appreciated very well by patients.

Several of the best self-help books for dealing with depression have been studied in randomised controlled trials (‘Feeling Good’ by David Burns; and ‘Control your Depression’ by Lewinsohn and colleagues). As this is the first self-help book on dysthymia and mild depression and as it represents well what is known from current research, it would be worthwhile to examine the effects in a well-designed trial.

Pim Cuijpers

Department of Clinical Psychology

Vrije Universiteit Amsterdam

Van der Boechorststraat 1

1081 BT Amsterdam

The Netherlands

Dopamine in the pathophysiology and treatment of schizophrenia: New findings


The book serves as a record of the proceedings of a meeting in the summer 2002 in Montreal on dopamine in schizophrenia research. The meeting had received an unrestricted grant from Sanofi-Synthelabo, but apart from amisulpride getting disproportionate space, the book is an excellent updated review of current theories and knowledge of not only dopamine in schizophrenia research, but also on the pathophysiology and treatment of schizophrenia in general. The authors are world leading experts within schizophrenia research, and even if some of the chapters are more easily read by scientists within Neuropsychopharmacology, the book provide adequately background information for it to be a valuable contribution for the continuing supplementary training of all psychiatrists. The fiftieth anniversary of the introduction of antipsychotics in 2002 – and the recent recognition of dopamine researchers as Nobel laureates – provide a good reason to put under one umbrella recent highlights within neuropsychiatric schizophrenia research, and to reflect on the many unmet needs of schizophrenia patients and the limitations of present treatments. The book review the most interesting recent brain imaging studies, genetic mechanisms, the neurotransmitters involved in drug actions, different models of schizophrenia, and present and future treatment strategies, all within 259 pp.

It is highly recommended to researchers as well as to clinicians, as a matter of fact, it ought to be compulsory reading, not the least for clinicians working with schizophrenia patients.

Birte Glenthøj

Centre for Neuropsychiatric Schizophrenia Research

University of Copenhagen

Department of Psychiatry E

Bispebjerg Hospital

Bispebjerg Bakke 23

2400 Copenhagen NV, Denmark

Models of madness


This volume is somewhat in the tradition of R. D. Laing and Thomas Szasz of hostility to the concept of schizophrenia as an illness. However, this judgement does not do justice to the range and arguments of the individual contributors. In the first part of the book on the illness model John Read deals with the history of madness and the origins of the term ‘schizophrenia’, and with Jeffrey Masson, gives a very pointed account of the origins of the euthanasia programme in German hospitals under the Third Reich. In a chapter on ‘Does schizophrenia exist?’ John Read argues for a dimensional approach. I can agree with him on this, but is another thing to specify exactly what the dimensions are and how they relate to each other. In the next chapter on ‘Biological Psychiatry’s lost cause’ he argues against the concepts that (i) schizophrenia is equally frequent in all countries, (ii) the brains of ‘schizophrenics’ are abnormal, and (iii) there is a genetic predisposition to schizophrenia. These cases are not so strong.

I was amused and honoured to be given a section as the sole proponent of the viral theory of schizophrenia! But Read has confused two separate papers – (i) Crow TJ. Lancet 1983;342:173–175 when I argued for horizontal transmission, and (ii) Crow TJ. British Journal of Psychiatry 1984;145:243–253, the one actually cited here in which I had convinced myself that the evidence did not support it.

Joseph’s critique of the genetic studies (chapter 7) which précís his recent book The Gene Illusion is worth reading, although his alternative that the causation of the disease is in the social environment is unconvincing. Having at one time been involved in ECT research I found difficult to fault John Read’s account of this literature. The account of antipsychotic medication (chapter 9) I found unbalanced with overemphasis on dyskinesia (the irreversible component of which can be shown to be disease rather than drug related) and an underestimate of the drug effect as for example shown by Hogarty and colleagues in the classical NIMH studies of the interaction of antipsychotic medication with social casework support.

Parts II and III deal with social and psychological approaches and evidence based psychosocial intervention. Here there are many and diverse contributions but what I found lacking was an overall coherent theoretical account of the nature and origins of psychosis. Why do some people develop psychotic symptoms and why do they have the form that they do? Why do the symptoms come on in early and middle adult life and why is there a sex difference in age of onset? Why is there an increased risk to first-degree relatives, and why is the distribution of ventricular size shifted upwards without an increase in variance in those who are psychotic? These are questions that remain in spite of the thought provoking contributions to this interesting volume.

TJ Crow

Warneford Hospital

Oxford, OX3 7JX

UK