

Book Reviews

Editor: Yoram Barak

Fish's Clinical Psychopathology: Signs and Symptoms in Psychiatry.

**by Patricia Casey and Brendan Kelly
Gaskell (an imprint of the RCPsych) 3rd
Edition, 2007, pp. 138, £18.00**

The letter accompanying the 3rd edition of "Fish's clinical psychopathology" opened with the statement that this book "...has shaped the psychiatric training and clinical practice of several generations of psychiatrists..." Looking at the slim and simply designed paperback one has to think that this is an atypical British overstatement. Opening the volume and beginning to read, I was taken aback – what a glorious book, easily fulfilling this promise.

The book is divided into nine chapters and these are followed by two relevant appendices. Starting off with the classification of disorders, the book then takes the reader on a fascinating journey of disorders of perception, thought and speech, memory, emotion, the experience of self, consciousness, motor and finally personality. Each chapter is well written and clear and supported by both clear definitions and a concise list of references. The reader versed in the "American" tradition of formatting textbooks according to disorder, such as affective disorders, somatoform disorders and so on will find the design of this book a challenge. However, once reading is commenced the text wins over.

The two appendices are filled with a wealth of historical yet useful information. Who remembers the "astasia-abasia" is "Blocq's disease"? Who defines the perception of one as a victim into the cognitive distortion "woe is me"? Only the assured authors of Fish's 3rd edition can thus express their knowledge.

Recently the Israel Psychiatric Association debated translating the American Kaplan and Sadock's "Synopsis of Psychiatry" into Hebrew. Having read Fish's clinical psychopathology, it is my recommendation that this enjoyable, informative text be made available in Hebrew to students, residents and psychiatrists.

Yoram Barak, Bat Yam

Seminars in General Adult Psychiatry, second edition.

Edited by G. Stein and G. Wilkinson, Gaskell, 2007, pp. 834

Published, as a part of the successful "College Seminars Series" of textbooks, a decade after the first edition, this second edition of the highly readable book offers in a single-volume form an updated and expanded overview of the field of adult psychiatry with a focus on common psychiatric disorders and reference to their position within the ICD-10 and DSM-IV frameworks. The chapters newly added to the second edition include: liaison psychiatry, psycho-sexual medicine and a chapter on cross-cultural and international psychiatry.

As a whole the book is intended for psychiatrists preparing for their final specialty examinations, as well as to provide a reference tool for practicing psychiatrists. The book offers both access to classical psychiatry and to currently developing trends, in addition to modern clinical management methodology such as drug and cognitive therapies.

The first 19 of the book's 31 chapters focus on the frequent conditions most commonly observed by clinicians, while the rest intend to provide an overview of the sub-specialties of general adult psychiatry and the organization of psychiatric services. Adding to the book's value as a textbook is the brief novice reader guide provided by the editors in order to assist first-time readers. The guide provides a link between the reader's level of clinical experience and the relevance of the material contained in the various chapters.

Over 4,000 references and over 260 tables and boxes are included in the book in order to provide the reader with key information regarding some of the original data utilized by modern evidence-based medicine.

In conclusion this book can be a very useful text for trainee-psychiatrists and present practicing psychiatric clinicians with an excellent reference tool for the more common psychiatric disorders classified in ICD-10 and DSM-IV.

Shelly Tadjer, Bat Yam

Cognitive Grief Therapy: Constructing a Rational Meaning to Life Following Loss

by Ruth Malkinson

W.W. Norton & Company, 2007, New York.

ISBN: 978-0-393-70439-6, pp. 246

“The day the temple was destroyed, the Messiah was born.” This Jewish Talmudic dictum is one of the many classic Jewish sources connecting grief with hope, destruction with rebuilding, death with life. In the same week that Dr. Malkinson’s brother died after a long struggle with illness and she was grieving over his death, she received the first copy of her book, in which two chapters are written together with her colleagues, Professors Eli Witztum and Simon Rubin.

The book, an impressive contribution to the theoretical understanding of and clinical interventions with patients facing the task of coming to terms with traumatic loss, is the fruit (in more than one sense) of a long and rich career of working with clients who have to confront issues that therapists would like to avoid as long as possible since they confront us – unavoidably – with our own death.

The book is organized around three main themes:

1. The Continuous Bond with the Deceased Model which, contrary to earlier models (that saw the main challenge as one of letting go and ending relationships), posits that the main task of the surviving patient is to learn how to continue the relationship with the deceased person, albeit in an internalized form.

2. The Two-Track Model of Bereavement (written with Simon Rubin) which looks at the process of coming to terms with loss through two pairs of lenses or tracks: track one – the results of loss as reflected in different aspects of functioning (cognitive, emotional functions, work, social relationships, etc.) And track two – aspects of the internalized relationship with the deceased (images, memories, feelings, idealization, etc.).

3. Grief-therapy from the perspective of Rational Emotive Behavior Therapy (REBT) and cognitive-constructivist approaches.

These three themes return in the three parts of the book: Part 1: the theoretical foundations of

cognitive grief therapy. Part 2: the practice of cognitive grief therapy. Part 3: difficulties and challenges for therapists

In this reviewer’s view, the most creative and original part of the book is the integration of the psychology of loss and grief with a cognitive-behavioral orientation in general and the cognitive psychotherapy model of REBT in particular.

REBT, or Rational Emotive Behavior Therapy, is one of the oldest and earliest if not the earliest of the different branches of Cognitive Behavior Therapy (CBT) that over the past 30 years has become the most important and influential school of psychotherapy in many Western countries, supported by an impressive body of research and clinical evidence. In a nutshell, REBT approaches emotional problems from a perspective that considers emotional difficulties as a function of the interaction between environmental, cognitive and behavioral influences with a central role assigned to cognitive processes. As Albert Ellis, founder of REBT and Malkinson’s role model, used to say, “if you do not feel right, you do not think right.” By “thinking right,” i.e. using constructive and constructivist thinking processes, one can change one’s emotional and behavioral functioning.

“Nothing is more practical than a good theory” (Kurt Lewin). The introduction and first four chapters of the book lay the theoretical groundwork for the therapeutic application of cognitive-grief therapy.

The introductory chapter presents the general theoretical background against which we can better understand and grasp the main theoretical issues that are being investigated in depth in the following four chapters.

In the introduction Malkinson presents the major conceptual shift in thinking about grief and loss, which took place over the last 100 years, beginning with Freud: from a point of view that saw the main task of the surviving relative as one of going through a sequence of stages or phases to be able to separate and terminate the relationship with the deceased (to accept the loss as final and be able to let go) to a perspective of “continuing bonds” that sees coping with loss as a lifelong developmental process (p. 18). “Bereavement involves reorganizing

one's life and worldview without the deceased but with bonds remaining intact and unbroken" (p. 19).

The first chapter, co-authored with Simon Rubin, describes Rubin's original and well-researched Two-Track Model of Bereavement. It is a model that clarifies the impact of loss on general areas of day-to-day functioning (e.g., anxiety, work, social relationships, self-esteem) and on the internalized relationship to the deceased (memories, emotional closeness, affect). Rubin's model offers a useful tool to assess changes in those two areas and points to the importance of the quality of the internalized relationship, which seems to be a function of the pre-existing interpersonal relationship when the deceased was still alive.

In the following three chapters the author lays the theoretical groundwork for the practice of Cognitive Grief Therapy, which is described in the second part of the book. What strikes the reader who is familiar with CBT is that some of the same ideas, principles and techniques that were known as effective and useful in the 1970s and 1980s are still being applied but – as Malkinson notes – within a different conceptualization. While in the past techniques like exposure, desensitization and guided imagery were used to help the patient extinguish bonds with the deceased, in the new conceptualization these same methods are used to help the patient reconstruct new meanings around the loss.

For any therapist who wants to apply the ideas of the first, theoretical, part of the book, the second part, the Practice of Cognitive Grief Therapy, describes the outline of the therapy approach. On the basis of meta-analyses of the results of Grief Therapy, Malkinson proposes the Cognitive Grief Therapy model as the first choice of treatment in cases, "where the circumstances are traumatic, and when grief takes a complex form." She adds that when the client refers him or herself to treatment the effectiveness increases (p. 101).

Underlying all interventions, described in the book, is the principle that:

"the client is an active collaborator in the process of change, and has the choice and ability to change distorted thinking as a way to create order in a world that has been shattered" (p. 124).

Two chapters on the adaptation of Cognitive Grief Therapy to couples and families conclude the

second part of the book. Here Malkinson combines her superb skills of both a CBT therapist and a family therapist to show us how to integrate the two fields.

Interspersed between these chapters is an important contribution by Malkinson together with Eli Witztum on the use of letter writing to the deceased as a way of coping with complicated grief, illustrated by a very interesting and moving case study.

The title of the third and last part of the book, Difficulties and Challenges for Therapists, speaks for itself. In size it is the smallest of the three (only eleven pages) but in a way it is the most important one since – as every therapist knows – on paper, theories and applications sometimes look seductively elegant, clear, logic, applicable. But sitting opposite the client, things look different. Malkinson discusses some of the unhelpful beliefs, not of the clients but of the therapists, and ways to cope with them. She also considers the cumulative effects of dealing with grief and loss of clients on the therapists themselves. Here is a paradox: to become a specialist in this field you have to see many clients who have lost their loved ones. On the other hand becoming a specialist puts the therapist at great risk. That we, as therapists, can now, in this book, enjoy the fruits of Malkinson's long and rich experience with patients who have experienced loss is a tribute to the author's inner strength, humanity, deep understanding, and above all real care for other human beings who in their pain and suffering form a mirror in which we can, will and must see ourselves as well.

Joop Meijers, Jerusalem

Clinical Topics in Addiction

Edited by Ed Day

The Royal College of Psychiatrists, London, 2007,
ISBN: 978 1 904671 50 3, Price 25.00 Euros

Addiction to psychoactive substances can lead to a range of biological, psychological and social problems, and the clinical management of these issues can be complex. There have been huge changes in the treatment of addictive behaviors in the past 30 years. The steady development of a scientific evidence base, fluctuating levels of political interest in

the topic and the growing numbers of psychoactive substances users around the world, have led to evolving and increasingly complex treatment systems in many countries, including the U.K. (which the book describes) and also in Israel.

This 326-page book comprises 22 chapters covering almost all aspects of addiction. The book originated in articles written in peer-reviewed psychiatric literature for a generic audience of consultant psychiatrists. This book collects and updates articles from *Advances in Psychiatric Treatment* (APT) written by practitioners with extensive experience of managing these difficulties, and provides a handy synthesis of clinical, research and policy issues. Twenty articles have appeared in APT over the past 10 years, and two newly commissioned chapters. Several articles have been extensively updated by the original author to take into account new developments in the field. The book is written by practicing clinicians for practicing clinicians and its main aim, as the editor in its preface points out, is to synthesize up-to-date evidence into information that is useful in clinical practice.

Jason Luty provides an analysis of the evidence supporting the range of pharmacological and non-pharmacological approaches to drug and alcohol misuse in enough detail to guide managing individuals with such problems.

Duncan Raistrick gives an extended account of alcohol detoxification, a skill with which doctors and nurses practicing in all branches of medicine should be acquainted.

Three chapters explore the implications of using psychostimulant and hallucinogenic drugs, including khat and magic mushrooms. Sanju George and Vijaya Murali, in their chapter, highlight issues surrounding the management of the growing problem of gambling addiction. Chapter 2 gives a plotted history of the drug treatment system in the U.K., highlighting the rapid process of evolution seen in the past 10 years. Two chapters cover the issue of laboratory testing for alcohol and drugs in detail. It is important for clinical and medico-legal work to understand the benefits and limitations of the available technologies.

The challenging topic of comorbidity of psychiatric illness and substance misuse is covered in detail in four chapters. Ilana Crome and Tracy

Myton give a broad overview of the range of pharmacological strategies available for managing these problems, and Mohammed Abou-Saleh describes the psychosocial context. The most commonly encountered psychiatric problems in users of drugs and alcohol are depression and anxiety, and each is given a chapter; McIntosh and Bruce Ritson describe the management of depression complicated by substance misuse, and Anne Lingford-Hughes, John Potokar and David Nutt cover anxiety.

Although great strides have been made in developing pharmacotherapies for addictive behaviors, psychological interventions remain the mainstay of treatment in many cases. Effective interventions are reviewed and described by Adam Huxley and Alex Copello, and motivational interviewing is explored in detail. Motivational interviewing has developed rapidly in terms of theory and evidence for effectiveness in the past 10 years, and has become an essential skill in many areas of psychiatry and behavior modification.

Addiction in special populations is covered by two chapters. Harith Swadi and Sangeeta Ambegaokar give an overview of the unique problems of treating substance misuse problems in adolescents, whereas Sanju George and Ed Day focus on pregnancy. There is a strong link between addiction and crime, and two aspects of this relationship are explored. Medico-legal aspects of intoxication are covered by Quazi Haque and Ian Cumming, and Peter Snowden reviews violence and substance misuse from the perspective of a forensic psychiatrist.

The final chapter by Ed Day and Iain Smith explores what can be learned from the rich and growing literature about users' subjective perceptions of a variety of psychoactive substances. This is a delightful chapter that offers a rarity in a clinical textbook, namely a good bedtime read!

Of special interest for me was the second chapter, the development of drug treatment in England. It is worth noting that dramatic and unplanned shifts in policy have often been the result of a combination of changing political ideals, social structures and medical ideologies, rather than the consequences of any better understanding of addiction. It is interesting to learn about the central role of the GP in the treatment system of substance addiction in the British system. "The network of

GPs offers an unrivalled system of health care provision with great opportunities for intervention with drug misusing patients.” In the past 10 years there is expansion of the GP role with an accredited qualification for “general practitioner with special interest” based on close, collaborative working between primary (GP) and secondary care (addiction specialists).

In his Foreword, Nat Wright, who is a general practitioner prominent in the field of substance misuse interventions in primary care, and GP advisor to the U.K. Department of Health, Health Offender Health Unit, notes that although psychiatry services for those with mental ill health and drug dependence are largely and traditionally separate, in primary care, such comorbid conditions are managed by the same clinician. He recommends this book to them, his own professional group, in order to widen their perspective beyond reducing drug treatment to pharmacological provision for large number of opiate users. In Israel, traditionally, drug users and alcohol addicts are treated by social workers in the municipal units for treating addictions or in methadone centers. The growing number of dual diagnosis patients in the primary care clinics, psychiatric centers and in units for treating drug and alcohol users, calls for multidisciplinary treatment.

Overall, the book is stimulating, practical and useful, and is a valuable resource in a world where use and misuse of a variety of psychoactive substances is increasing. The text is set out in as concise, complete and unbiased, non-judgemental a manner as possible, in a style that is readable, engaging, yet authoritative. This reference should find its place in the library of anyone interested in the field of addictions and its management.

Yael D. Elayahu, Bat Yam

Childhood in the Shadow of the Holocaust Survived Children and Second Generation

Editors: Z. Solomon and J. Chaitin

**Hakibbutz Hameuchad Publishing House Ltd.,
480 pp, 2007, in Hebrew, DanaCode: 31-4311,
price: NIS 88**

Throughout the years it has been a commonly held, albeit mistaken, assumption that children during the Holocaust were “too young” to remember the traumatic events that they experienced and were thus not considered to be “true” survivors. Moreover, when the war had passed and these children wished to speak out of their tragic exposure, their elders silenced them. Part of this conspiracy of silence resulted in sparse attention being paid to this particular group of survivors.

Zahava Solomon and Julia Chaitin have created a unique and moving volume focusing on child survivors, children born to survivors (second generation) and the grandchildren of survivors (third generation). This is an ambitious and encompassing project. It is the first of its kind to be published in Hebrew and to aim at presenting the Israeli audience with the vast body of data and experience accumulated over decades of observation, research and treatment. The long list of contributors include leading figures from Israel and abroad and they unfold a wide array of issues including psychological, psychiatric, social work, anthropological and sociological perspectives.

The book is divided into two parts: the first describes child survivors and the second the children and grandchildren of survivors. The scope of both parts of this book is wide and deep. Memories, loss and development, families and parents-children relationships, post-traumatic symptomatology, aging, the trips back to Europe, group therapy, intergenerational transmission, collective memories and more are all discussed.

At the risk of sounding blasé I recommend that this book become a part of the training of each mental health professional in Israel. The Holocaust cannot be considered just another chapter in the textbooks of psychiatry. It is our duty as teachers of future generations of clinicians to make their acquaintance with these children of the Holocaust.

Yoram Barak, Bat Yam