Interpersonal psychotherapy has emerged as an important modality of treatment of depression. Its effectiveness is based on solid research evidence. Interpersonal psychotherapy has recently been modified into a time-limited (12-week-long) program designed for adolescent depressed patients. This book describes this new, promising approach. It consists of three parts. In the first part, the origins and development of interpersonal psychotherapy for depression, the nature of depression in adolescents and an overview of current treatment for adolescent depression are provided. These are excellent, concise and well-balanced reviews which enable the reader to realize that depression in adolescence has some specific features. The second part of the book is devoted to the description of the application of interpersonal psychotherapy for depressed adolescents: from the assessment phase, setting the treatment contract, to the termination phase, via specific clinical problems which may be encountered (e.g. grief, interpersonal role disputes, interpersonal role transition). There is a splendid chapter on single-parent families, which I have found extremely helpful. The description of special clinical problems continues in the third part of the book, which deals with topics such as the suicidal or assaultive adolescent, issues in the therapist-patient relationship, crisis management and use of antidepressant medication in conjunction with psychotherapy. A final chapter is devoted to future directions in research on interpersonal psychotherapy. The book is an excellent addition to the scarce literature on depression in adolescence. It is a must for anyone involved with this psychotherapeutic approach. Moreover, I would strongly recommend it to anyone who is involved with treatment of adolescent patients, regardless of his or her approach. In this sense, the title may be a little misleading. This is not only a book on a specific psychotherapeutic technique; it is also an outstanding review of interpersonal problems of adolescent patients, which reflects the clinical wisdom of its authors, including the late Gerald Klerman. I am thus sure that also the psychiatrist mainly using psychotropic drugs in his or her approach will find important insights from reading this book. A final issue. The book is designed to stand on its own, that is it can be approached also by someone who knows very little about interpersonal psychotherapy. Is the knowledge of the previous, reference book on interpersonal psychotherapy by the Authors a ‘sine qua non’ for this book [1]? In my opinion it is, even though one may start from this book on adolescent depression and then go back to read the manual on adult depression. However, this requisite applies to those who are specifically interested in interpersonal psychotherapy.

S. Grandi, Bologna


A. Sims, D. Owens
Psychiatry; 6th ed.

This is the sixth edition of a fortunate textbook for the teaching of psychiatry to medical students, whose first edition was published in 1964. Compared to similar books, Psychiatry stands for its exceptional clarity, conciseness (it consists of only 260 pages) and pragmatic focus. The majority of medical students will not go into psychiatry and (unfortunately) will not pursue further reading on the psychological aspects of medicine after graduation. Hence the need for carefully selected, practical information. This has certainly been achieved by the authors of this book. The volume consists of 24 chapters. After a short introduction, there are two chapters on psychopathology and psychiatric interviewing. These are two splendid chapters, which certainly reflect one of the authors’ long-standing interest in descriptive psychopathology [1]. A description of the concepts of etiology and classification completes this introductory part. Specific chapters on depression and mania, schizophrenia and delusional disorders, organic disorders and misuse of alcohol and other substances then follow. The ninth chapter is devoted to the concept of neurosis. One may be surprised to see this concept surviving the various editions of this textbook to arrive, alive and well, in the nineties. But there are several justifications for retaining this concept – as discussed in this journal [2] to comment on the publication of an important book by another researcher of the Leeds school, Philip Snaith [3]. As to teaching psychiatry to medical students these justifications emerge clearly: the following chapters (anxiety disorders, dissociative, somatoform and posttraumatic disorders, obsessional states, personality disorders) do not appear as rigid and separate dimensions of psychological distress, as the medical student influenced by the DSM-III-R (and, at times, unfortunately, also psychiatrists) may be inclined to think, but as parts of a complex, multifactorial spectrum. The book then continues describing sexual disturbances, eating disorders, liaison psychiatry, deliberate self-harm and suicide, psychiatry of old age, child and adolescent psychiatry and learning disability. All these descriptions are clear and substantially satisfactory; perhaps a chapter on psychosomatic medicine, instead of the choice of dealing with a few selected topics of liaison psychiatry, would have been preferable. Three chapters on treatment conclude the volume, together with a short description of psychiatry and the law. Treatment is very clearly described along its psychological, social and physical (psychopharmacology) lines. Perhaps, again, the chapter on psychotherapy fails to convey the amount of research which has accumulated in the past decades and lists the various psychotherapeutic techniques as if they were all equally effective and tested modalities. Overall, the use of this book is highly recommended for teaching psychiatry to medical students. This edition is based, as to the classification system, on ICD-10 and not DSM-II-R, and this should facilitate its international use. Andrew Sims and David Owens have been very successful in offering a simple and concise account of psychiatry, without falling into the trap of oversimplification.

A. Raffi, Bologna

References

F. Creed, R. Mayou, A. Hopkins (eds) Medical Symptoms Not Explained by Organic Disease
Patients presenting with symptoms for which no organic cause can be detected constitute a substantial proportion of medical practice. There is insufficient research on these patients. As a result, we very much welcome this little book directed to general practitioners, psychiatrists and physicians in general. It has for sure the quality of being clinically oriented, synthetic and reasonably priced, which means a lot these days. It consists of 10 chapters. The first two, by Heaton and Creed, deal with nonorganic abdominal pain, with special reference to illness behavior, psychiatric disorder and life stress. The following two chapters are devoted to atypical, noncardiac chest pain (Chambers, Bass and Mayou). There is then a chapter, by Hopkins, on the management of patients with chronic headache not due to obvious structural disease. Francis Creed tries to provide a model of nonorganic disorders, yet his contribution is too abridged (6 pages) and fails to provide a connecting link across the different disorders. The last four chapters deal with therapy of functional disorders, according to the reattribution model (Goldberg), to some research in the field of irritable bowel syndrome (Guthrie), to the cognitive-behavioral approach (Salkovskis) and to the evidence available on the use of antidepressant drugs in chronic pain. Overall, the book, which derived from a conference, may be very helpful to clinicians in medical practice. They may discover that a diagnosable psychiatric disorder is found to occur only in a small proportion of patients with functional medical disorders (it was as low as 16% in the headache patients) and that there is a discrepancy between European and American studies in these areas (American studies tend to report much higher percentages of psychopathology). Clinicians may also discover that something can be done about these disorders, as the important studies by Mayou’s and Creed’s groups indicate. Being a multi-authored book, its quality is likely to vary considerably across chapters. A few references are presented at the end of each chapter, which may facilitate the selection of more detailed accounts. At times, however, the use of references is too selective. It is astonishing, for instance, that in his chapter Salkovskis quotes almost exclusively his own work and fails to make reference to the work of Kellner [1], whose ideas, however, he seems to have endorsed in many cases. Another problem is that some chapters are based on research evidence (however selective it may be), while other chapters describe personal, impressionistic approaches. This book, however, does not purport to offer an exhaustive review of the literature or precise treatment guidelines – one may opt for the landmark book of Kellner [2] or, at least, for the review which was published in this journal [3] after his death -but was written and edited to increase the interest in psychosomatics of physicians dealing with functional medical disorders. In this sense, I believe that it fulfilled its aim and can be viewed as a valuable addition to the literature.

G.A. Fava, Bologna

References

In addition to its well-known effects in affective disorders, lithium has interesting properties which make it a versatile drug in the medically ill. In this journal such properties have been reviewed in two specific articles [1,2]. This volume is a valuable addition to those articles. In the first chapter F.N. Johnson and G. Minnai describe several potential alternative applications of lithium, both in psychiatric conditions (eating disorders, premenstrual tension, obsessive-compulsive disorder, attention deficit disorder, schizophrenia, addiction) and in medical illnesses (headache, movement disorders, seizure disorders, other neurological disturbances, thyroid disease, inappropriate secretion of antidiuretic hormone, diabetes mellitus and hematological conditions). The authors conclude that the majority of these alternative uses of lithium are likely to have a theoretical, rather than practical interest, insofar as they may suggest new approaches to an understanding of lithium action as well as of the pathogenesis of specific disorders. The following chapter deals with topical applications of lithium in the treatment of seborrheic dermatitis, definitely an effect one would not even imagine. Intriguing is the chapter on the antiviral effects of lithium. Various in vitro studies have shown specific inhibition by lithium of the replication of a number of DNA virus groups (herpes, pox and adenovirus) at concentrations which do not affect normal cell functions. In vivo studies on lithium have consistently shown a reduction in frequency of recurrent and severity of labial herpes infections. There is preliminary preclinical evidence that topical treatment with lithium may reduce the number of herpetic lesions. Lithium may act on the viral enzyme DNA polymerase via competition with potassium, and this effect may have considerable research implications. The antiaggressive effects of lithium are reviewed in a well referenced chapter by A. Nilsson. The conclusion is that lithium appears to have better documented antiaggressive properties than any other drug. The volume is then closed by a splendid review on the mechanisms of action of lithium. This review is what really makes the book a must for any psychopharmacologist or psychiatrist interested in lithium. The chapter summarizes the conclusions of 25 research workers who have approached the problem from distinct, yet related directions: the sodium-potassium pump, calcium, magnesium, membranes and ion transport processes, neurotransmitters, cholinergic/adrenergic balance, neuropeptides, catecholaminergic, serotonergic and muscarinic receptors, the phosphoinositide second-messenger system, protein-mediated signal transduction, cyclic guanosine monophosphate and cyclic nu-cleotide balance, gene expression, essential fatty acids and monoamine oxidase stereoselectivity. How does lithium work? A clear and simple explanation does not appear to be feasible and cannot be provided by this review, which however is very successful in indicating the effects of lithium on several different and interact-
This is the second edition, expanded and revised, of a little book whose first edition attracted considerable interest. The editors are experienced researchers with a special interest in improving the research skills of psychiatric trainees. The psychiatric resident is thus the one who would be expected to benefit the most from the volume. Which is a commendable, neglected target. Yet, some of its chapters are so well done they could be helpful to anyone, including seasoned researchers. For instance, as an editor, I wish that everyone would read the chapter by Berrios on how to write a review paper. His statements may appear rather basic and simple, but should be a source of reflection (e.g., ‘remember that the best or most important work does not necessarily appear in the most prestigious journals’, ‘remember to review foreign language journals’, and ‘remember to search particularly hard for negative results; they have a higher publication threshold and are more likely to appear in obscure journals...’). How many reviews (particularly American, I must say) do we read which are based on a few journals and investigators’ work and disregard any ‘foreign’ literature (where foreign may also mean in the English language)? The book is divided into two parts. The first is concerned with general methods (getting started in research, the review article, statistical methods and clinical trials, using computers in research with single patients, rating instruments, principles of psychological assessment, writing up research). The second part is devoted to specific methods (biological psychiatry, epidemiology, research in psychotherapy, long-term-outcome studies of psychological treatment, rating scales for psychotherapy or special purposes, research into the history of psychiatry). Of course the quality of these chapters, written by different authors, varies quite a lot. I particularly liked, for instance, the chapter by Morley and Snaith on the principles of psychological assessment and the one on long-term-outcome studies by Hawton. Some chapters are too abridged particularly for some difficult and complex topics (it is not easy to describe in 23 pages the biological methods of research in psychiatry). The need to be simple and clear (no prior knowledge has been assumed on the part of the reader of this book) of course always carries the danger of being oversimplistic. With these limitations in mind, this book is a very worthwhile effort, which I hope will be widely read throughout Europe.

G.A. Fava, Bologna
Per Bech
Rating Scales for Psychopathology,
Health Status and Quality of Life
Springer, Berlin 1993
503 pp.
ISBN 3-540-55903-5

In the past two decades the number of rating scales available has grown tremendously. Despite these psychometric developments, a rather limited number of inventories is frequently used. The investigator is often confused about what to choose and thus eventually tends to rely on the most traditional instruments. The work of Per Bech is of paramount importance: it offers a clear, balanced view of the rating scales worthy of clinical attention. After an introduction to the
relationship of rating scales with the DSM-III-R and ICD-10 systems and to the most important psychometric characteristics of the scales, Bech reviews rating scales for psychopathological states and mental disorders, self-rating scales, personality inventories, rating scales for somatic disorders, for psychosocial stressors, for social functioning and coping, for quality of life and adverse drug reactions. In each section, Bech indicates which are, according to psychometric evidence, the most reliable, valid and sensitive instruments available. The instrument is then actually reported with its most updated scoring instructions so that the investigator who was not familiar with it immediately knows how it looks like and does not need a reference which is sometimes difficult to find or does not report the original scale. As a result, a substantial part of the volume is devoted simply to the production of the actual rating scales and their instructions. The amount of time that this book may save is considerable. It is also full of practical indications which are difficult to find elsewhere (e.g. how to use the Hamilton Anxiety Scale in panic disorder, since anxiety and panic were not differentiated in the original scale). This is definitely the kind of book one would be very reluctant to lend a colleague, because it is too valuable and may turn out to be handy at any time. Per Bech has thus accomplished an outstanding work. This volume is a must for anyone involved in psychiatric or psychosomatic research, as well as for clinicians. It should become compulsory reading for psychiatrists and psychologists in training, who may thus realize the amount of additional clinical information that carefully selected rating scales may provide.

C. Rafanelli, Bologna

Joachim Küchenhoff
Psychosomatik des Morbus Crohn
Zur Wechselwirkung seelischer und körperlicher Faktoren im Krankheitsverlauf
Klinische Psychologie und Psychopathologie,
vol. 57
Enke, Stuttgart 1993
198 pp., 10 fig., 5 tab.; DM 44.-
ISBN3-432-25521-7

Formerly Dr. Joachim Küchenhoff was the senior deputy of the Department of Psychosomatics, University of Heidelberg, Germany, where he worked on the extensive scientific material of this book. At present Küchenhoff is the leading doctor of the Section of Psychotherapy und Psychohygiene, University of Basel, Switzerland. This book deals with the clinicointerdisciplinary very relevant topic of Crohn’s disease. Starting with a group of 78 patients and their examination on the basis of numerous medical, psychological and psychosocial parameters during both the critical Crohn’s disease stage and the remission stage 1 year later complex psychosomatic and somatopsychic relationships could be objectified. Furthermore on the basis of psychodynamic interviews the following patient-oriented variables are presented: ‘emotional mastering concerning the disease’, ‘psychological defence mechanisms’, ‘coping strategies’ and ‘life satisfaction’.

The quantitative and qualitative evaluation of the extensive data included the following results: the empirical evidence concerned clearly the psychosomatic disease model in comparison to the somatopsychic disease model. Furthermore various psychological variables (e.g. concrete
modalities concerning disease mastering and personality traits) are suitable for influencing both
the disease course and the setting of adaptive reactions (in the sense of a combination of coping
dimensions and personality factors). In this context the following empirically founded
observation is very impressive. The patient’s depressive-passive basic modality with a resigning
coping style may prolong the disease course whereas its shortening was observed in patients who
showed personality traits which could be characterized with the key words ‘active’, ‘able to get
one’s way’ and ‘flexibility’. This book is outstanding particularly because of both the clear
psychodynamic orientation including the careful casuistically oriented view (in the sense of the
qualitative aspect including the acquiring of a new procedure concerning the qualitative analysis
of contents) as well as the obvious patient and clinically oriented interpretations on the one hand.
On the other hand, the consequent empirical foundation (quantitative aspect) of the findings
obtained round off an impressive example of modern psychosomatic research.
H. Freyberger, Hannover
Allan S. Kaplan, Paul E. Garfinkel
Medical Issues and the Eating Disorders
This book is number 7 of the Brunner/Mazel Eating Disorders Monograph Series whose serieseditors are Drs Garfinkel and Garner. The editors of this seventh book are Dr. Allan S. Kaplan,
Director, Eating Disorder Day Centre, University of Toronto, Toronto, Ontario, Canada, and Dr.
Paul E. Garfinkel, Professor and Chairman, Department of Psychiatry, University of Toronto,
Ontario, Canada. The book starts from the thesis that more than any other psychiatric disorder,
the eating disorders are conditions in which a disturbed psyche contributes to a disturbed soma.
Indeed some studies set the mortality rate of anorexia nervosa and bulimia nervosa as high as
18%. Obviously a significant percentage of the mortality is directly attributable to the physical
complications that accompany
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these disorders. Therefore, any clinician who treats these patients should be familiar with
medical aspects of anorexia and bulimia nervosa. In detail, the volume opens with a review of
the medical and nutritional assessment of patients (Dr. A. Kaplan) and is followed by discussions
and diagnostic issues (Dr. Kaplan and Dr. M. Katz, Toronto, as well as Dr. T. Wilson, New
Jersey); medical (M. de Zwaan and J. Mitchell, Minneapolis) and dental (J. McComb, Toronto)
complications are then presented. Genetic factors (B. Wood-side, Toronto) as well as interactions
between chronic medical illnesses and anorexia and bulimia nervosa (G. Rodin et al., Toronto)
are also covered. Finally, S. Kennedy and C. Shapiro, Toronto, deal with the medical
management of the hospitalized patient including pharmacotherapeutic treatments. This greatly
informative book is of inestimable value not only to psychiatrists and other physicians who work
with these patients but also to nonmedical clinicians including psychologists, nutritionists, and
other health professionals.
H. Freyberger, Hannover
William A. Griffin
Family Therapy
Following the great classic work in the field of family therapy, namely the book entitled Milan
Systemic Family Therapy; Conversations in Theory and Practice [1], recently further books have
appeared which are also relevant to the topic of family therapy. The book by Griffin, Associate
Professor, Department of Family Resources and Human Development, Arizona State University, Tempe, Ariz., is the first volume in the new Brunner/Mazel Basic Principles into Practice series. Griffin’s book includes the aim to integrate the common elements of several approaches of therapy – e.g. the family therapy orientations in the sense of both the communication model (MRI; Strategic, Milan) as well as the structural, behavioral and psychoeducational views – into a practical model. Griffin stresses the importance of learning to view and treat the family as a whole often requiring a difficult conceptual shift in one’s view of aberrant behavior. On the basis of a practical concise and useful presentation this book is a valuable and timely addition to the field. However, in my view this book is not entirely appropriate as a so-called ‘learning book’ but rather as an additional learning help on the basis of a systematic training in family therapy.

H. Freyberger, Hannover


Hartmut Radebold

Dr. Hartmut Radebold, who is both Professor und Chairman of Clinical Psychology, University of Kas-el, Germany, and leader of an interdisciplinarily oriented study group on applied social gerontology, is the author of this very remarkable book whose title in English is as follows: Psychodynamics and Psychotherapy of the Older Man (Psychodynamic View and Psychoanalytic Psychotherapy of 50- to 75-Year-Olds). Starting from the continuous change of the age structure of the German population, Radebold developed a systematically acquired psychodynamic and psycho-therapeutic view of growing old which is founded upon both his unusually extensive experience in dealing with these patients as well as the careful documentation of the psychodynamic and psychotherapeutic observations and results. On this basis the author is able to fill a large gap in the psychoanalytic psychotherapy of the elderly up to now both largely unknown and not successfully dealt with in Germany. Radebold makes clear that human development does not cease in the middle period of life. Man in the higher age groups also goes through a developmental and maturational process which could be connected with psychic problems and neurotic reactions. Additionally the elderly are confronted with (renewed) traumatizations in the sense of threat, loss and narcissistic insults. Following many treatment examples the author shows that individual psychotherapy, group psychotherapy and systemic couple therapy on a short-term or a longer-term basis in 50- to 70-year-olds may be a successful procedure. Finally Radebold describes in detail how particularly younger therapists are able to deal with the questions and problems which are relevant in the psychotherapeutic context of older people, e.g. the reverse transference constellation.

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couple therapy on a short-term or a longer-term basis in 50- to 70-year-olds may be a successful procedure. Finally Radebold describes in detail how particularly younger therapists are able to deal with the questions and problems which are relevant in the psychotherapeutic context of older people, e.g. the reverse transference constellation.
Recently an important new field of examination has been added to the application of qualitative methods to psychotherapy research. In spite of the great relevance of this field to research, no systematic strategies have as yet been developed. Therefore, we welcome the contribution of Dr. Stephanie Wilke, research assistant at the Department of Psychosomatics, University of Heidelberg, Germany, to the topic of qualitative diagnosis research in her book entitled *Die erste Begegnung* (in English ‘The initial dialogue, a conversation- and contents-analytical examination within the psychoanalytically oriented initial interview’). Dr. Wilke evaluates the first three dialogues of 32 initial interviews with neurotic and psychosomatic patients on the methodological basis of qualitative-contents, analytical and ethnomethodological conservation analysis approaches. By this approach the great relevance of the opening phase of the interview to the further course of the dialogue and the development of the therapeutic relationship become particularly evident. Typical opening patterns and defence strategies can be elaborated with regard to the different groups of neurotic and psychosomatic patients; thus detailed proof is given of the increased motivation patterns of neurotic patients compared to those of psychosomatic patients. Dr. Wilke’s excellent book includes both one of the first clinically oriented approaches to the promising topic of ‘Qualitative diagnosis research’ as well as impressive and exemplary methodological examination strategies.

H. Freyberger, Hannover
G. de Girolamo, H.H. Reich

Personality Disorders
This is a very helpful little book on personality disorders. Its main asset is that it provides a balanced comparison of the DSM-III-R and ICD-10 classifications of personality disorders, with a short discussion of controversial issues on categorical versus dimensional styles and assessment methods. Another area explored by the book is the epidemiology of personality disorders, with particular reference to community surveys, comorbidity of personality disorders and temporal trends in their prevalence. A nicely selected bibliography accompanies the text. The book is a good introduction to the issue of personality disorders. It is the ideal monograph for those who are not familiar with the ICD-10 classification of mental disorders and do not think that the DSM-IV has solved all the diagnostic problems.

G.A. Fava, Bologna

N. Sartorius, G. De Girolamo, G. Andrews, G.A. German, L. Eisenberg (eds)
Treatment of Mental Disorders
A review of effectiveness
Published on behalf of the WHO by American Psychiatric Press, Washington, 1993 ppXX-501; US$58.50
ISBN 0-88048-975-8
This volume reports on a welcome effort by the Mental Health Division of the World Health Organization to survey treatment effectiveness issues in mental disorders. The volume is divided into six sections: prevention, biological treatments (critical questions in clinical
psychopharmacology, biological treatments other than drugs), psychological treatments (evaluation of psychodynamic therapy, cognitive therapy, behavior therapy, the benefits of psychotherapy), psycho-social treatments (psychosocial interventions, procedures used in rehabilitation), influence of culture on treatment (traditional medicine relevant to psychiatry, cultural aspects of treatment) and quality of care and care of quality (rational treatment in psychiatry, quality assurance in mental health care, and cure, relief and comfort).

As with any multiauthored book the quality of contributions varies across chapters. The section on psychological treatments is excellent. Jean Cottraux provides a clear and balanced survey of behavior therapy. Perris’ review on cognitive therapy is also good, yet it tends to ignore the strong behavioral components of cognitive approaches. I particularly liked Gavin Andrews’ chapter on the benefits of psychotherapy, which is successful in providing an account (on 12 pages!) of the main clinical implications of hundreds of psychotherapy studies. I strongly recommend this book. It is full of cultural stimuli and is ideal reading for psychiatrists and psychologists in training. It is also a valuable antidote against dogmatism in psychiatry. Such antidotes are more and more needed.

G.A. Fava, Bologna

J.A. den Boer, J.M. ad Sitsen (eds) Handbook of Depression and Anxiety: A Biological Approach
This is a survey of research on mood and anxiety disorders, with particular reference to biological findings and pharmacological treatment. It consists of 25 chapters. The first part covers general issues such as a conceptual history of anxiety and depression, the co-morbidity and epidemiology of mood and anxiety disorders and their genetic, psychometric and psychophysiological aspects. There are then 4 chapters on anxiety: animal models, theories of etiology, the provocation of anxiety states and the pharmacological treatment of panic disorder. The following 4 chapters are devoted to depression (animal models, pathogenesis, pharmacological treatment and effects of antidepressants on specific neurotransmitters). Pharmacological issues are further discussed in 4 chapters (the neuro-pharmacology of anxiety, serotonergic drugs, the role of noradrenergic function in human anxiety and depression, and the use of antidepressant drugs in anxiety disorders). Other chapters are concerned with immune function, stress-responsive neurohormones, neuropeptide alterations in depression and anxiety. The final part of the volume deals with benzodiazepine receptors, the ß-carbolines abecarnil and the neurobiology of personality. Overall, the level of the volume is quite good. There are 2 chapters by 2 late contributors (Robert Kellner and Willy Haefely) which are outstanding. They offer balanced accounts of research on the measurement of anxiety and depression (Kellner) and on benzodiazepine receptors and endogenous li-gands (Haefely) which should be treasured. Excellent are also the chapters on the effects of antidepressants on specific neurotransmitters by Leonard, the one on serotonergic drugs by Deakin and the one on antidepressant drugs in anxiety disorders by Tyrer. Their main strength is to show the cutting edge of research in these areas. This perspective, however, undermines other chapters. Ballenger’s survey of pharmacological treatment of panic disorder offers a one-sided, inadequate view of the issue, which does not reflect, for instance, the debate surrounding the alprazolam collaborative study [1]. How can one ignore discontinuation outcomes as Ballenger does? The two chapters on psychoneuroendocrinology (by Michelson and Gold, and Yehuda and Nemeroff) are also rather disappointing. For instance, they do not make
appropriate reference to the issue of neurosteroids and try to save the theory of corticotropin-
releasing hormone hypersecretion in depression, omitting the literature which would make its
grounds rather shaky [2]. Finally the chapter on abecarnil, despite being interesting, reflects a
questionable editorial choice and does not provide an overall view of the emerging field of
benzodiazepine partial agonists [3].

With these limitations in mind, I believe that this handbook of biological research on anxiety and
depression represents a worthwhile effort. I would conceive it as a valuable addition to Paykel’s
Handbook of Affective Disorders, even though it does not reach the high standards of this latter
work [4]. It is helpful reading for anyone involved in the pharmacological treatment of affective
disorders.

G.A. Fava, Bologna

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Book Reviews
Almuth Massing, Günter Reich, Eckhard Sperling Die Mehrgenerationen-Familientherapie;
2nd ed.

The authors of this book entitled The Multiple-Generation Family Therapy are members of the
former Department of Psycho- and Sociotherapy, Center of Psychological Medicine, Göttingen,
Germany. Starting from this family therapeutic principle at least three generations are brought
together with the object of tracing conventional illness-causing structures and restoring these to
the consciousness of the family members. On this basis conflict-oriented behavior is revived and
changed. Similar to the Milan people [1] originally the Göttingen group also started with the
treatment of patients suffering from anorexia nervosa. But Massing et al. did not only apply the
multiple generation perspective but also psychoanalytic techniques with the emphasis on clearing
up interactional relationship structures. The combination of both a well-presented theory and
very clear exemplary family histories is particularly impressive.

H. Freyberger, Hannover
Reference 1 Boscolo L, Cecchin G, Hoffman L, Penn P: Milan Systemic Family Therapy;
M, Hasenbring
Chronifizierung bandscheibenbedingter
Schmerzen
Schattauer, Stuttgart 1992. 213 pp., 7 fig., 72 tab.;
DM 48.-
ISBN3-7945-1531-5
C. Buddeberg
Brustkrebs
Recently, the Schattauer publishing house, Stuttgart, FRG, which is strongly medically oriented and covers all medical subdisciplines, has built up a new systematic German-language program entitled ‘Psy-chosomatics Psychotherapy’. An important pacemaker in this very welcome development is the scientific director of the company, Dr. Wulf Bertram, who is not only a doctor, but also a psychologist. The contents of these carefully commissioned books are intended to be useful for both practice-oriented psychosomatic psychotherapeutic work and of relevance in general medical care. The build-up of this special, highly promising Schattauer program is particularly relevant at the end of the eighties, for in the past some German publishing houses indiscriminately published most of the available psychosomatic psychotherapeutic manuscripts without careful examination of either their content or quality. As a consequence, booksellers became resigned to the fact that psychosomatically and psychotherapeutically oriented books are not very attractive and could be difficult to sell. In contrast, this review deals with seven books which are not only affirmative evidence of the successful new Schattauer work, but are also characteristic of the main current tendencies in the German psychosomatics-psychotherapy field, in particular the two leading psychotherapy trends: the psychoanalytical or psychodynamic and the behaviorally therapeutic lines.

The first two books concern psychosomatic research in two very important clinically interdisciplinary fields. Dr. Monika Hasenbring, behavioral therapist, Privatdozent, Department of Medical Psychology, University of Kiel, FRG, presents an outstanding study of the chronic development of pain (with special regard to risk factors and positive health behavior). This topical problem is exemplified by chronically ill patients with damaged lumbar discs in whom pain persists or will be manifest again following surgical intervention, to the point where the pain becomes permanently disabling. In her prospective longitudinal study, Dr. Hasenbring’s examination is based on both clear clinically oriented descriptions concerning the patients’ medical inpatient and outpatient history, and effective well-tried test instruments. Starting from
Dr. Hasenbring is able to support by definite documentary evidence that long-term effective somatic therapy in these patients can only be expected if both the somatic and the psychological risk factors are properly considered. Typical risk factors are depressive states and various modalities concerning pain-mastering as well as not only avoidance modalities (e.g. vis-à-vis friends and hobbies) but also contrary tendencies such as massive stamina strategies. This book will be very important for psychosomaticists and clinical psychotherapists, and should also, without exception, belong in the library of every neurologist, neurosurgeon and orthopedist.

Professor Claus Buddeberg, director of the Department of Psychological Medicine, University Hospital, Zurich, Switzerland, whose psychotherapeutic orientation is a psychodynamic one, presents the results of a 5-year prospective study, realised in close cooperation with a group of gynecologists, psychiatrists and psychologists, on 107 female patients taken ill with breast cancer for the first time. Three variables were studied.

The first, ‘disease-mastering’, included adapted and nonadapted coping in the examined patients. The patients tended to rate a mainly depressive mastering of the tumor disease as bad disease mastering. Secondly, the variable ‘quality of life’ was estimated as ‘good’ to ‘very good’ by the majority of the patients. According to the authors, this finding is evidence that the confrontation with the tumor disease may change the patient’s attitude towards her life situation with the effect that she is satisfied ‘with less’ in comparison to a healthy person. Thirdly, with regard to the ‘correlations between somatic and psychosocial variables’, the patients with lasting high values for a depressive disease mastering did not show the signs of tumor progression more frequently than those with low depressive values. This very interesting book is based upon both subsequent research and extensive clinical experience and may be strongly recommended to doctors, psychologists and nurses dealing with the psycho-onco-logic topic.

The following two books, whose orientation is psychodynamic, have two very impressive distinguishing features. On the one hand, the thematically well-grouped psychosomatic and psychotherapeutic contributions take a very interdisciplinary approach and are therefore also inviting for readers from other clinico-medical subdisciplines. On the other hand, unusually successful editorial work has made it possible for the various chapters, written by 37 and 40 authors, to be particularly imposing, because the different contributions are clearly interrelated while no tiresome over-lappings are manifest. Firstly, Thure von Uexküll and five coworkers are the editors of the book whose title in English is ‘Integrated Psychosomatic Medicine in the Practice and the Clinic’. This book presents concrete recommendations and examples for the realization, organization and evaluation of biopsychosocial medicine. The great didactic value of this book is in the description of the outlined models on the basis of a homogeneous structure, so that they may be compared with each other. Subjective experience, theoretical understanding and practical consequences of action are outlined, as are existing resistance vis-à-vis psychosomatic approaches and ways of overcoming these. The book’s ‘General Section’ (pp. 3-82), which includes extensive definitions and supplementary considerations, is followed by the ‘Special Section’ encompassing the topics ‘Outpatient Care’ (pp. 83-166), ‘Nursing Care’ (pp. 167-188), ‘Inpatient Care’ [subdivided into ‘Acute Hospital’ (pp. 189-200) and ‘Medical Departments’ (pp. 201-368)], and finally ‘Rehabilitation’ (pp. 369-424). It is a remarkable fact that, following the first edition 10 years ago, the third edition (1994) suc-
ceeded the second (1992) quite rapidly. Dr. Ulrich T. Egle and Professor Sven O. Hoffmann, Department of Psychosomatics and Psychotherapy, University of Mainz, FRG, are the editors of the book whose title rendered in English would be ‘The Patient Suffering from Pain’. The authors first describe the fundamentals of their pain concept and pain therapy. Special clinical problems concerning the pain phenomenon (e.g. the question about the so-called pain personality) and the difficulties with regard to the process which becomes chronic are also outlined. Diagnostic and therapeutic processes are covered extensively. Finally, some selected diseases are described, e.g. headache, chronic low back pain and rheumatoid arthritis.

Two further books originate from the well-known scientific study group of Dr. Rolf Meermann, Privat-dozent, a behavioral therapist who is director of the General Clinic of Psychosomatics, Bad Pyrmont, FRG, and Professor Walter Vandereycken, University of Leuven, director of the Section of Behavioral Therapy, Department of Psychiatry, Alexianen Clinic, Tiën, Belgium. The subject of the first book ‘Behavioral Therapy Psychosomatics’ is a teaching and methodology theory, and its contents comprise a successful textbook, containing both a survey of behavioral therapeutic methods in psychosomatic and psychiatric patients (with special regard to outpatient and inpatient procedures) as well as instructive case presentations. Vandereycken’s and Meermann’s second book (in collaboration with Vanderlinden, Kortemberg and Norré, Leuven) is an excellently written practice-related primer (in English ‘Therapy of Bulimia nervosa’). The therapeutically crucial point concerns the behavioral therapy, family therapeutic interventions are fortunately included too, and hypnotherapeutic strategies are taken into consideration. The extensive clinical experience of the authors, their splendid didactic abilities (including the impressive case examples) as well as their instructive highlighting of patient-oriented solutions result in a book of unusually great information value. Psychoanalysts will certainly profit from this book too. It has been translated into English.

The editor of the seventh book is Professor Wolfgang Tress, director of the Department of Psychosomatics and Psychotherapy, University of Düsseldorf, FRG. Tress and five colleagues discuss ‘Psychosomatīsche Grundversorgung’ (psychosomatic basic care), which has recently become widespread in Germany. On the health insurance plan, psychosomatic basic care may be defined as basic diagnostics and therapy in the sense of the so-called ‘dialogical medicine’ which is practised by general practitioners and specialists who may charge a fee for these special activities. The diagnostically and therapeutically oriented doctor-patient dialogue is central to psychosomatic basic care. This book covers both the fundamental principles of this dialogue as well as specific problems in dealing with particular patient groups, especially pragmatic conflict solution possibilities concerning communication problems and the initial therapeutic steps. Starting from their models of both symptom development and the doctor-patient relationship, the authors develop a psychoanalytically oriented interpersonal concept. This book is optimally suited to satisfy an urgent demand from doctors and should find a large readership.

Last but not least, the prices of these seven books are unusually reasonable.

H. Freyberger, Hannover

Peter Fürstenau


Peter Fürstenau, PhD, is both director of the Institute concerning Applied Psychoanalysis, Düsseldorf, Germany, and Associate Professor of the Faculty of Medicine, University of Giessen, Germany, as well as author of this book entitled Development Advancement of
Psychoanalytic-Systemical Psychotherapy. Fürstenau begins with the statement that psychoanalysis with regard to its therapy concepts has widely fallen short of its theoretical development. On the basis of his observation and contrary to a broadly accepted general opinion the author shows that the psychoanalytic and systemic approach may be integrated into a practice-related model with regard to the treatment of experience-determined disorders. Starting from this comprehensive basic orientation in the sense of the so-called ‘psychoanalytic Praxeologie’ Fürstenau’s book includes carefully directed ideas concerning both the daily psychotherapeutic routine and the scientific discussion. In the reviewer’s opinion Fürstenau’s enlarged psychoanalytic paradigm makes very marked allowances for the various different patient-oriented conditions and environment factors with which the psychoanalyst is confronted at present.
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