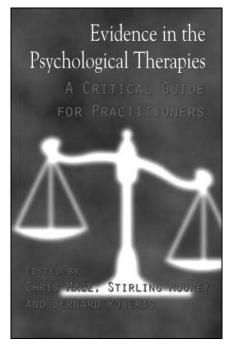
### **Book reviews**

#### **EDITED BY SIDNEY CROWN and ALAN LEE**

# Evidence in the Psychological Therapies: A Critical Guide for Practitioners

Edited by Chris Mace, Stirling Moorey & Bernard Roberts. Hove: Routledge. 2001. 218 pp. £15.99 (pb). ISBN 0 415 21248 0



This is a thoughtful and probing book. At first, I wondered whether the evidence base for the various types of psychological therapy would be summarised. This approach is not taken. Instead, the nature of evidence itself is explored. It is intended to show that 'evidence takes many forms in a psychologically complex field' and to look at how evidence can be gathered and used across a range of practice, from the behavioural therapies to psychoanalysis. From the outset there is acknowledgement of the difficulty of applying an evidencebased model to the psychotherapies and an awareness that attitudes towards the scientific method can vary from 'willing borrowing to deep distrust'.

The book follows on from a conference organised by the Royal College of Psychiatrists, the University Psychotherapy Association and the Association of University Teachers of Psychiatry. The contributors, 17 in total, come from a variety of specialist backgrounds, including law, sociology and philosophy as well as psychoanalysis, cognitive-behavioural therapy, psychology and psychiatry.

In the opening chapter, a professor of law discusses how the legal concept of evidence, grounded in the need to resolve a case (where establishing the truth may be a subsidiary consideration), differs significantly from scientific concepts regarding evidence. He contrasts the intense debate within the medical profession about what constitutes best-evidence practice with the almost 'complete absence of discussion of best-evidence practice within the legal profession'.

In a chapter on research, Michael Rustin argues that the process of knowledge generation in the clinical fields of psychoanalytical and systemic psychotherapy are inadequately captured by conventional concepts of research in psychology and psychiatry. He highlights the valuable convergence taking place between psychoanalytical research and some forms of empirical developmental psychology, which he considers demonstrates the 'fertility of methodological pluralism in the mental health field'. He points out the discrepancy between 'pure models' and their everyday application. The medical profession's emphasis on 'normalisation' (in psychiatry by reference to standard diagnostic classification) differs from the psychotherapists' focus on the 'elaboration of individual meanings' and the exploration of identity.

Simon Wessely, in contrast, champions the randomised control trial as the conclusive arbiter of treatments that work as opposed to those that should be avoided. He cites the accumulating evidence that psychological debriefing is not an effective treatment for post-traumatic stress disorder as an example of 'evidence' that challenges us because it appears to be counterintuitive. He cautions against the tendency to cling unquestioningly to treatments. All effective treatments have the potential to do harm as well as good, so it behoves us to ascertain whether overall the balance is in favour of the latter rather than the former.

The randomised trial is examined from another perspective by Phil Richardson, who explores the limitations of the 'drug metaphor' as applied to psychodynamic psychotherapy. Paul Sturdee, in his chapter, questions the evidential status of scientific research. He points out that scientific evidence is not immune to commercial influences and therefore should be interpreted in that context. The nature of meaning in psychotherapy is looked at by Digby Tantum and he specifically focuses on how psychotherapeutic interventions act as organisers of meaning.

There are further chapters on: single-case methodology; hypothesis-testing in cognitive-behavioural therapy and psychoanalytical psychotherapy; audit; cognitive-analytic therapy; and 'practice-based evidence' in psychotherapy.

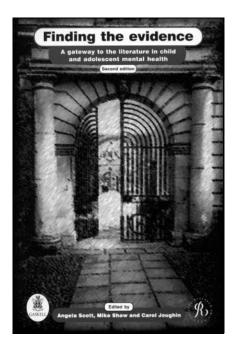
If there is any criticism of this book it is that the range of contributions makes it difficult to integrate the various arguments into a cohesive whole. However, this diversity is an antidote to the often simplistic promotion of the evidence-based model. Well-balanced, the varied perspectives give the book breadth as well as depth. This is a fascinating and rewarding read and can be recommended as an intelligent guide for practitioners of psychological therapies.

**Eilis Kennedy** Specialist Registrar in Child Psychiatry/Clinical Research Fellow, Leopold Muller Centre for Child and Family Mental Health, Royal Free and University College Medical School, Royal Free Campus, Rowland Hill Street, London NW3 2PF, UK

### Finding the Evidence: A Gateway to the Literature in Child and Adolescent Mental Health (2nd edn)

Edited by Angela Scott, Mike Shaw & Carol Joughin. London: Gaskell. 2001. 204 pp. £18.00 (pb). ISBN 1 901242 68 4

This second edition of Finding the Evidence was published in October 2001: the first edition is already available online, at http:\\www.focusproject.org.uk, under completed work and available resources. As the editors comment in their introduction, this is 'a living document' and it is hoped that this version will be updated with new material every 6 months. The



editors also hope to arrange for cited articles to be critically appraised and posted on the web. The ultimate aim is that fulltext articles will be available through internet links.

This 'work in progress' consists of a guide to current evidence-based medicine for clinical practice. Two methods were used in its compilation. First, electronic search strategies were applied to identify relevant systematic reviews, meta-analyses and practice parameters of clinical guidelines. Second, experts were asked to choose non-systematic reviews, cutting-edge and classic papers and books. The experts were asked to address two critical questions about their particular field of expertise: 'What are the latest developments in understanding the management of the condition?' and 'What are the key messages from new research that are not being widely used?'

Part 1 of the book provides a description of terms for conducting an electronic search, as well as a guide to searching and a summary of a search strategy. In part 2 evidence is reviewed by clinical category. There are sections on emotional, physical and sexual abuse, attention-deficit hyperactivity disorder, bullying, conduct disorders and juvenile delinquency, and deliberate self-harm. The review continues with eating disorders, elimination and emotional disorders. Gender identity disorders, paediatric liaison, pervasive developmental disorders, post-traumatic stress

disorder and psychoses are considered, as are substance misuse and tic disorders. A section is devoted to treatment approaches, which covers psychotherapeutic and psychopharmacological evidence reviews. Another section deals with emerging data-sets, where current evidence is not as well developed. The penultimate section includes assessment, attachment disorders, electroconvulsive therapy, mental health and deafness, and the mental health of children and adolescents from ethnic minorities. The final section is devoted to a review of service development and legal issues. Appendices contain further information on search strategies, randomised controlled trials for systematic reviews and meta-analyses, and critical appraisal tools. For the interested reader, FOCUS provides useful links to other evidence-based medicine resources that expand the information in the book.

The value of this publication lies in both its up-to-the-minute review of current data and the critical questions considered by the experts. The quality of evidence in child psychiatry is not as well developed as in other medical disciplines, and there is a relative lack of systematic reviews, metaanalyses and clinical guidelines. The role of the expert in developing an overall formulation and the raising of critical questions is often still primary in setting the gold standard. However, some of the topic areas covered here lack expert critical comments on the current literature. Treatment categories such as psychopharmacology and psychotherapy appear to be covered briefly and in an undifferentiated manner and might well have benefited from sub-categorisation. The 38 contributors to this work have done a good job in developing an initial database that will hopefully grow and may well become the first port of call for an up-to-date clinical review of 'the evidence'. That this will be useful to carers and relatives, as the editors hope, seems to be less realistic, as their needs are likely to be quite different from those of clinicians. A book to be recommended for the academic library and the individual academic, this is of less immediate value for front-line clinicians.

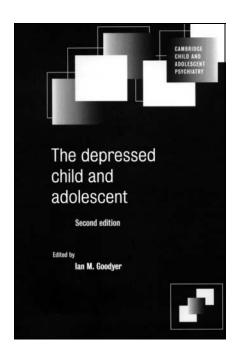
**Laurence Jerome** Consultant Psychiatrist in Community Practice and Consultant Psychiatrist to the Amethyst (ADHD) Provincial Demonstration School, Ministry of Education, London, Ontario, Canada

## The Depressed Child and Adolescent (2nd edn)

Edited by Ian M.Goodyer.

Cambridge: Cambridge University Press.

2001. 388 pp. £39.95 (pb). ISBN 0 521 79426 9



This is the second edition of a book first published 7 years ago. Twenty-seven distinguished authors review research findings in a wide range of 13 subjects, including the developmental precursors of depression, physiological and family and genetic factors, mood regulation, clinical phenomenology and psychopharmacology. Comorbidity is discussed, especially in relation to anxiety disorders, and there are interesting short accounts of some possible relationships between depressive and bipolar disorders and attentiondeficit hyperactivity disorders. Obsessivecompulsive disorder, another condition with striking cognitive and mood components that sometimes responds to antidepressant medication, might be mentioned in future editions, especially as there is an interesting chapter on the development of emotional intelligence. The chapter on psychotherapy points out the need for more interventions to be designed for this age group rather than adapted from work with adults, for a fuller understanding of risk and predisposing factors and for more outcome studies. It would be nice to think also that future editions might have more studies of psychosocial interventions available to review. However, this edition is