This book focuses primarily on people with severe intellectual disabilities, although the broad principles outlined are applicable to individuals with all degrees of intellectual disability. The first section aims to improve the reader's understanding of challenging behaviours. In the opening chapter, Emerson and Einfeld emphasise the importance of the social context in defining challenging behaviour. Then, the prevalence and risk factors associated with challenging behaviour are described. Chapter 4 summarises various behavioural phenotypes in specific genetic disorders, such as fragile X syndrome, psychiatric disorders and general health conditions associated with challenging behaviour. The behavioural models used for analyses of challenging behaviour are described in detail.

In the second section of the book, Emerson and Einfeld examine the design and implementation of interventions and support for people with intellectual disability and challenging behaviour. In the absence of a robust literature on the use of psychotropic medication for challenging behaviour, the authors provide a comprehensive account of behavioural interventions, which will be very useful for psychologists, psychiatrists and other professionals involved in the care of people with intellectual disabilities. Towards the end, the situational management of challenging behaviour is explored. The authors propose a range of specific strategies, from active listening and use of restraints to the use of psychotropic medication.

I feel that the authors could have explored the psychodynamic approach in the assessment and management of challenging behaviour. Similarly, their comments on the use of complementary and alternative therapies in people with intellectual disabilities and challenging behaviour would have been interesting to examine further. However, the book provides a good mix of theoretical knowledge and clinical examples. It contains up-to-date information on this important topic, relevant not only to psychiatrists, but also to other professionals working with people who have intellectual disabilities.

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# Clinical Obsessive-Compulsive Disorders in Adults and Children EDITED BY Robert Hudak and Darin D. Dougherty

## Clinical Obsessive-Compulsive Disorders in Adults and Children

Edited by Robert Hudak & Darin Dougherty. Cambridge University Press. 2011. £55.00 (hb). 230pp. ISBN: 9780521515696

Type the words 'obsessive-compulsive disorder' into the search tab of your favourite online bookstore and you will be greeted by a plethora of books detailing personal accounts of the illness and varying aspects of cognitive-behavioural therapy for the disorder. However, this is a book with a difference: it aims to be a textbook, stating it is a complete, comprehensive overview of obsessive-compulsive disorder (OCD), covering its underlying causes, manifestations and treatment.

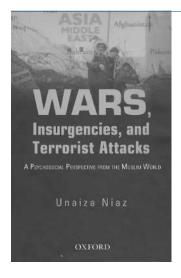
The introduction acknowledges OCD's 'chameleon like' presentation and gives useful case examples, helping to demystify common issues that may contribute to misdiagnosis. The first chapter, however, propels the reader into a comprehensive account of psychosurgery for the disorder. Even with an initial account of the neurobiology and neurocircuitry, this comes as a bit of a shock and sets the scene for the book to be more biological than psychological in its overview of the condition.

Subsequent chapters are less controversial and are clinically relevant. They vary in the nature of their content, from straightforward reviews of the relevant evidence to more discursive accounts, and cover a wide range of topic areas, including pharmacological treatment, exposure and response prevention and common comorbid conditions. The book deals with more social topics, including community supports and implications for the family in treatment, before reviewing related disorders, body dysmorphic disorder and trichotillomania. There are separate chapters on pharmacological and psychological treatment of children with OCD. Personally, the chapter on compulsive hoarding was particularly clinically relevant and interesting. It acknowledges that, despite not being a diagnosis in itself, compulsive hoarding is highly associated with various axis I and axis II disorders, and the authors describe the maladaptive cognitive and behavioural patterns that appear to be common in this syndrome across disorders.

In conclusion, this comprehensive and informative book is a welcome addition to the psychiatrist's bookshelf. My only criticism is that it is disproportionately light on the psychological formulation and treatment of OCD. On the other hand, given the number of readily available publications on cognitive—behavioural therapy, this book could easily be supplemented with another guide relevant to the reader's needs.

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#### Wars, Insurgencies, and Terrorist Attacks: A Psycho-Social Perspective from the Muslim World

By Unaiza Niaz. Oxford University Press Pakistan. 2010. £15.99 (hb). 350pp. ISBN: 9780199060139

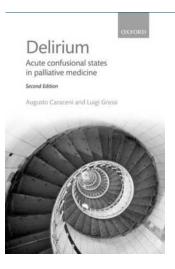
The terrorist attack on the World Trade Center on 11 September 2001 changed the lives of many people throughout the world and resulted in further destruction and trauma. Apart from leading to wars and violence in Iraq, Afghanistan and Pakistan, it also possibly led to the recent wave of public awakening and a drive towards democracy in the Middle East. The cycle of violence and hatred does not seem to stop, however, and religion is being used once again. Thousands have lost their lives. Millions have

been left traumatised. It is the right time that people think about the causes of the current conflict, especially those living in the Muslim world.

I therefore read with interest this book by Unaiza Niaz and co-authors, who have attempted to objectively look at the political and psychosocial causes of terrorism, insurgencies and wars in the Muslim world. They have even gone a step further and tried to clarify some of the misinterpretations of Islam in this area by quoting examples from the Quran. The book takes a balanced approach to describing the causes and consequences of terrorism. It highlights the cost of the wars and terrorism that is paid by civilians and especially the damage to more vulnerable groups, such as women and children. The book tries to answer some of the common questions, for example, why terrorism is more prevalent in Muslim societies and why most terrorists come from a Muslim background. The authors promote the thesis that the underlying cause might not be just misinterpretation of Islam, but a deep unrest in the Muslim world caused by lack of freedom and democracy and a rule of oppressive regimes that are sometimes supported by the West. The terrorist attacks might be a projection of the miserable lives of the people in these countries. The book also suggests that implementing justice and democracy, equal distribution of wealth, addressing poverty, disease and illiteracy will be more helpful in dealing with terrorism. As such I recommend this book not only to mental health professionals, but also to the lay public.

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#### Delirium: Acute Confusional States in Palliative Medicine (2nd edn)

By Augusto Caraceni & Luigi Grassi. Oxford University Press. 2011. £55.00 (hb). 304pp. ISBN: 9780199572052

This is a book about delirium and far less about 'acute confusional states in palliative medicine'. Delirium has been and remains the Cinderella of psycho-syndromes but it is wearing finer dress as a result of studies into epidemiology and pathophysiology as well as phenomenology. These are explored and presented, which is news to clinicians, for delirium is so rarely given centre-stage for its own sake, being incidental to the main players of its aetiology.

Non-pharmacological management is given due attention, though sadly busy hospital wards can be difficult environments in which to follow calming and supportive behavioural strategies for those with delirium. There is concordance with much that is contained in the National Institute for Health and Clinical

Excellence guidelines on delirium and its diagnosis, prevention and management. Drug management is considered in detail and reflects international practice, with some of the key aspects of the European Association for Palliative Care (EAPC) framework for the use of sedation in palliative care being appropriately highlighted.

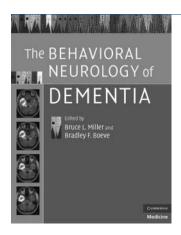
Less gripping are the sections describing assessment scales five are presented in full as appendices which range from 1 to 6 pages in length. In most situations only the very shortest can be justifiable in what is always a fraught and often rapidly changing scenario. Time spent with a paper and pencil or a computer screen is time taken away from providing skilled and humane, well-informed interventions. Yet the messages are well taken: when individuals are known to be dying from an irreversible progressive pathology, they may nevertheless become temporarily less well because of intercurrent problems which can be reversed. These must be identified and then treated effectively. However, delirium is for many the gateway to death and not to be fought as something which can be avoided, but anticipated, acknowledged and managed with calm and acceptance. Judgement on response comes from a close and comprehensive clinical understanding rather than scores on a check-list.

The final chapter returns, most appropriately, to family experiences and the loss of contact before death which is the essence of terminal delirium. Although this brings a welcome emphasis on holistic palliative approaches to end-of-life care, other texts have covered this ground in greater detail, and there is much included that is not specifically concerned with the issues encountered in caring for the delirious dying patient.

This is an unexpected book. It offers more than the title suggests. It is probably too expensive for most personal collections but should find a place in bench libraries in hospices, general hospitals and larger health centres. It should become essential reading for the psychiatrist working with the physically ill including those in palliative care.

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### The Behavioral Neurology of Dementia

Edited by Bruce L. Miller & Bradley F. Boeve. Cambridge University Press. 2009. £118.00 (hb). 418 pp. ISBN: 9780521853958

This reference tome covers the broad field of the behavioural neurology of dementia in 25 multi-authored chapters. Apart from a chapter by Hodges *et al*, it is written from a predominantly North American perspective, which will make some of the