

concept of mentalisation. This is a complex construct bringing together many elements of how the mind develops and culminating in an individual's ability to manage their feelings and relationships by constructing a coherent understanding of how beliefs and desires arise in themselves and others. The therapy is a means of enhancing this ability and the second half of the book is a manualisation of the psychodynamic day-hospital treatment approach. This is structured and systematic, and incorporates a technique that is both complex and flexible in relation to the individual. As the authors point out many of the elements of their therapy can be used by therapists other than those with a psychodynamic orientation. However perhaps most importantly of all it is jargon-free and approaches patients in a spirit where any breakdown in communication could as easily be by 'us' as by 'them'.

**Mangan, R. (ed.) (2004)** *Gielgud's Letters: John Gielgud in His Own Words*. London: Weidenfeld & Nicolson.

**Strachan, A. (2004)** *Secret Dreams: A Biography of Michael Redgrave*. London: Weidenfeld & Nicolson.

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### Early Intervention for Trauma and Traumatic Loss

Edited by Brett T. Litz. New York: Guilford Press. 2004. 338 pp. £30.50 (hb). ISBN 1 57230 953 9

It used to be said that post-traumatic stress disorder (PTSD) was a normal reaction to an abnormally traumatic situation, and that anyone was susceptible to its development. In fact, the vast majority of people exposed to natural or man-made trauma do not develop PTSD, and factors such as individual vulnerability, peri-traumatic influences and social support play a critical role in defining risk. However, for those who develop significant psychological distress, when should appropriate intervention take place? In the aftermath of the earthquake and tsunami in South-East Asia, the role of early psychological intervention for survivors has again come into sharp focus. News reports reassure viewers and listeners that counsellors are on hand to help relieve stress and prevent the development of more

chronic psychological syndromes. These interventions continue unabated despite research showing that techniques such as psychological debriefing have limited, if any, benefit and may actually increase the risk of developing stress reactions in the future.

So, is there any role for early intervention in relieving distress and preventing future morbidity? Hot on the heels of a similar book with a more European perspective (Omer & Schnyder, 2003), this text, covering early-intervention initiatives across the lifespan and in various clinical settings, provides an authoritative summary of existing knowledge, as well as offering evidence-based recommendations and directions for future research.

It is divided into three sections. Part I focuses on the psychological impact of trauma and traumatic loss, centring on acute stress disorder, PTSD and traumatic bereavement, emphasising the importance of risk and resilience in promoting recovery in a selected at-risk population. Part II, the core of the book, highlights the importance of secondary prevention using evidence-based practice that is tailored to the population and context. Although 'psychological first aid' is appropriate following trauma, it should not be seen as a therapeutic or preventative intervention. The criticisms of secondary prevention strategies such as critical incident stress debriefing are clearly elucidated in the book and

balanced with a summary of cognitive-based models of proven efficacy in early intervention. This is the section of the book that I enjoyed the most and is likely to be the most useful to clinicians. Part III covers experience gained in special populations, including the response to the terrorist attacks on New York and Washington in September 2001 and the challenge of developing effective early-intervention strategies in the US military, where the use of psychological debriefing is deeply ingrained.

Despite some repetition between chapters, this is a useful book, which goes some way towards rehabilitating the whole concept of early intervention and secondary prevention in trauma work. There is increasing evidence that such strategies work, but they must be selective and focused, appropriately timed and promote natural resources and personal resilience.

**Omer, R. & Schnyder, U. (eds) (2003)** *Reconstructing Early Intervention after Trauma. Innovations in the Care of Survivors*. Oxford: Oxford University Press.

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### Practical Psychiatric Epidemiology

Edited by Martin Prince, Robert Stewart, Tamsin Ford & Matthew Hotopf. Oxford: Oxford University Press. 2003. 414 pp. £35 (pb). ISBN 0 19 851551 0

Enter the world of *Practical Psychiatric Epidemiology*. The book opens with a quotation, probably seldom surpassed in a discipline rarely afforded great literary expression, that epidemiology '... is like a cocktail blended from equal parts of science, art, and craft, laced with liberal applications of intellectual rigour and scepticism'. From this opening, one is confident of an enjoyable, critical introduction to the 'young' discipline of psychiatric epidemiology.

This text is primarily intended for students of epidemiology with an interest in psychiatry. Epidemiological concepts and techniques are introduced and discussed with exceptional clarity, and there is good application to psychiatric research throughout. Each well-referenced chapter

