

Self-help books for depression

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Depressed patients and their families can benefit enormously from being given appropriate information about their illness, their treatment and the steps that they and their families can take to cope with and overcome the problem. All too frequently, the doctor or psychiatrist, through lack of time, may pay too little attention to this aspect of treatment. Self-help books provide a useful solution to the problem, and not surprisingly the market has been flooded with books which cover, with varying degrees of success, the many facets of depression and its treatment.

Over several years I have arrived at my own selection of 'best buys' in the field, and these will be briefly described below in the hope that readers might, if not already familiar with most of them, find useful additions to their own patient library.

Nine books have been chosen to cover the following topics:

- (a) general information on depression and its treatment (1)
- (b) general information and general self-help techniques (2)
- (c) manic depressive illness and its treatment (1)
- (d) psychodynamic approach to the treatment of depression (2)
- (e) cognitive approaches (2)
- (f) assertion training (1)

Each of these books has been chosen as a best buy because of its clarity, comprehensiveness, ease of availability and acceptability.

(a) General information

Depression and its Treatment by John Hinton. Pp 32. BMA Publications, £1.

This, the briefest of the books on depression, covers the essential information succinctly. Symptoms, aetiology, physical treatments and psychotherapy are briefly described. Two useful sections on treatment in hospital and recovery from depression are included. This book is to be recommended if brevity and very basic education are the requirements.

(b) Information and self-help

(i) *Depression* by Greg Wilkinson. Pp 96. BMA/Equation. 1989. £2.99.

This is a very recent addition to the self-help literature on depression. Each chapter is well laid out in

brief note style with clear headings which make it easy reading. Introductory chapters describe the symptoms, causes and types of depression clearly and simply. There is an excellent chapter on how to tackle depression, outlining a problem-orientated cognitive behavioural approach to coping with the symptoms and managing the sources of stress maintaining the depression. Following this there is a very good chapter on antidepressant therapy giving the indications, dosages, side effects etc, of tricyclics and MAOIs, ending with a brief and less satisfactory section on the role of ECT. There is a very clearly written chapter on psychological treatments emphasising the importance of the patient-therapist relationship in all therapies and concentrating in particular on cognitive behavioural approaches. The book finishes with some brief comments on how to decide which treatment works best on an individual patient. I would strongly recommend this self-help book for the patient who wants a reasonable grasp of depression and very good ideas on how to help himself.

(ii) *Defeating Depression* by Andrew Stanway. Pp 244. Arrow Books. 1987. £3.95.

Stanway's book is by far the most detailed guide on depression and its treatment. There are excellent introductory chapters covering signs, symptoms and aetiology. There is a particularly helpful chapter devoted to outlining practical methods of coping with some of the key symptoms of depression, e.g. inactivity, sadness, agitation, insomnia and self neglect. Treatment with tricyclics, new generation antidepressants and MAOIs are discussed clearly and helpfully. A whole chapter is devoted to ECT. This is much the best both in terms of information and tone of all the self-help books dealing with ECT in any way. Psychological treatments also have a chapter covering cognitive behavioural therapy, behavioural therapy, marital therapy and interpersonal therapy. This chapter is informative and well balanced.

The penultimate chapter describes hospitalisation in a realistic and reassuring way, and again is much the best on this neglected topic in self-help lists. The last chapter discusses suicide, parasuicide, and how relatives may cope with a suicidal member in a very helpful way.

Because Stanway's book is quite exhaustive and detailed, I tend not to recommend it *in toto* and have tended to point to specific chapters in it, e.g. the one

on ECT, and to supplement this with Wilkinson's briefer guide. However, for patients or relatives who have the motivation to acquire a detailed understanding of depression, Stanway's book is excellent.

(c) *Manic depressive illness*

Coping with Depression and Elation by Patrick McKeon. Pp 95. Sheldon Press. 1986. £3.95.

This is the only readily available book on manic depressive illness and is consistently praised by patients and their families. The symptoms and aetiology of mania and depression and their complications are clearly described.

The treatment of both poles of the illness is well outlined in a positive reassuring way. Substantial emphasis is placed on describing lithium, its efficacy, its routine use in practice and its side effects. The commonly asked questions about the illness and its treatment with lithium are given clear answers. Very useful descriptions are given of the psychological issues the patient has to grapple with in coming to terms with a long term illness and its treatment. The role of the family in monitoring and supporting the patient is outlined. This is definitely a best buy in its area.

(d) *Psychodynamic approaches*

(i) *Defeating Depression* by Tony Lake. Pp 146. Penguin. 1987. £3.95.

This book is delightfully free of jargon and arcane theory and conveys the inter-personal psychodynamic approach to depression in a very commonsensical yet informative fashion. The psychological triggers, predisposers and vulnerabilities to depression are well described, and considerable attention given to parental styles of child-rearing that sow the seeds for depression in later life. The patient is given a lot of information and ideas on how to recognise current representations of parental figures, and more importantly how to translate his insights into effective action in the real world. Methods of combating current transference figures are given substantial emphasis as are pointers to establishing a more balanced life style. This book is a fine example of psychodynamic insight as commonsense and is to be warmly recommended.

(ii) *Living with Grief* by Tony Lake. Pp 154. Sheldon Press. 1984. £3.95.

Grief is a common and important component of depression. Lake's self-help guide is an excellent account of grief, its purpose, tasks and problems.

The stages of shock, acceptance, crises, setback and re-affirmation are eloquently described.

Chapters on resisting isolation, dependence and facing change are particularly helpful. Grief in different situations, following suicide, loss of a child, loss of a parent, expected death and anticipated death are well covered. The grieving person will find this a clear, honest and encouraging account of the path he has to travel.

(e) *Cognitive approaches*

(i) *Feeling Good* by David Burns. Pp 399. Signet Press. 1983. £3.75.

Burns provides a detailed and very readable guide to cognitive therapy. The patient is systematically taken through the stages of diagnosis, assessment, thought-catching techniques, examination of thoughts for logical errors and techniques for modifying automatic thoughts. Methods of activity scheduling to overcome inertia and finally techniques to elicit and modify key vulnerability-producing basic assumptions are described in detail. This book is full of lively examples and written in an enthusiastic optimistic style. For the patient with some motivation and concentration span this is the cognitive therapy book to recommend.

(ii) *Coping with Depression* by Ivy Blackburn. Pp 121. Chambers. 1988. £2.95.

Blackburn's book is shorter and simpler and hence is better suited to the less sophisticated or more depressed patient. All the areas covered by Burns are dealt with, and the basic self-help techniques are particularly well laid out, making it easier for the patient to follow and practise. The book, however, lacks some of the engaging and enthusiastic tone of Burn's book so is probably best offered in the context of on-going therapy.

(f) *Assertion training*

A Woman in Your Own Right by Anne Dickson. Pp 162. Quartet Press. 1982. £3.95.

No list of self-help books on depression would be complete without one on assertion. Anne Dickson's brief guide has been deservedly popular and has the advantage of being written for an English rather than an American audience. It covers descriptions of healthy assertion, gives clear views on personal rights in relationships with well laid out exercises on the issues of saying no, expressing positive and negative feelings, handling criticism and confrontation. There are useful chapters in assertion in relation to sexuality and the work situation. For men with assertion problems a suitable alternative to Dickson's book is *Your Perfect Right* by G. R. Alberti and M. Emmons published by Impact in 1974 at £3.75.

Patients are more likely to read these books if they are readily available, i.e. can be handed out at the end of the interview, and if the books are tailored to match the patient's particular level of sophistication, type of depression and its treatment. It also helps if the psychiatrist indicates that at the next session some time will be spent going over any questions raised by the self-help book. It pays to be thoroughly familiar with each book so that, if necessary, specific chapters can be prescribed for reading and any misinterpretations countered.

The psychiatrist himself can learn much about

depression and how to communicate with his patient about the problem from these books and they would make good background reading for trainees who are beginning to diagnose and manage depression in its many presentations.

The list outlined obviously is not exhaustive but hopefully sufficiently comprehensive for most of the depressed patients the psychiatrist is likely to treat. If I have missed any books that would be considered essential by other readers, I would be grateful to be informed about these.

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Trainees' forum

Child observation during attachment to a child psychiatry unit: a registrar's experience

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Child observation forms part of the training of psycho-analysts and child psychotherapists (Bick, 1964; Brafman, 1988). The trainee visits a neonate weekly at home for one to two years and spends one hour on each occasion in 'free-floating' observation. The material is written up after each session as a detailed narrative account, which is discussed and interpreted in seminar groups. Both observing and interpreting are regarded as important elements of training (Rustin, 1988). Although Anthony (1968) wrote "Observing children is almost our main business in child psychiatry", formal observation is rarely undertaken by child psychiatry registrars. This article describes the benefits and difficulties of such an undertaking.

Setting up the project

During my child psychiatry attachment, I was allotted a fortnightly session with Mrs Marta Smith, a Tavistock-trained child psychotherapist. A description by Mrs Smith of infant observation during her training interested me and I decided to undertake short-term child observation with supervision from Mrs Smith.

A 22-month-old boy, A.H. attending a local Social Services nursery, was selected and permission was obtained from his parents and the Social Services Training Section. Ten half hour observation periods with corresponding supervision times were arranged. I chose a pre-work time, to prevent overlap with