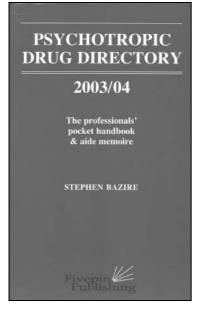
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## **Psychotropic Drug Directory 2003/04**. The Professionals' Pocket Handbook & Aide Memoire

Stephen Bazire Salisbury: Fivepin Publishing, 2003, £24.99 pb, 416 pp, ISBN: 0 95 448839 01



Rock bands fear releasing 'the difficult third album'. Marriages are unsettled by the seven-year 'itch'. Over repeated editions, initially successful and muchrespected books become jaded and unnecessary. This familiar handbook, often made available to prescribing doctors by pharmaceutical company representatives, has entered its second decade. Has it survived the journey intact?

In the foreword, Stephen Bazire states this directory contains over 1000 new references, with major changes throughout the text. He has adopted a new approach to the chapter devoted to selecting drugs, doses and preparations; to the description of sexual side-effects; and in the account of drug-drug interactions. He has included material relating to drugs recently available for clinical use (memantine and aripiprazole). As in previous editions, sections are arranged in a problem-orientated manner, supported by extensive references, with emphasis on recent review articles and original research papers.

Reading the book from cover to cover would occupy a few days, but is probably not the best approach to assessing its value in supporting practice. Instead I

## reviews

took it to out-patient clinics for a few weeks, to see whether it resolved clinical queries and conundrums. A second challenge was to see how it addressed some admittedly rather idiosyncratic current research interests, i.e. the treatment of anxiety disorders and bipolar depression, and sexual dysfunction with antidepressants.

It seems pretty robust: in just one clinic, it helped resolve queries regarding co-administration of lamotrigine and sodium valproate; the possible combination of bupropion with a selective serotonin reuptake inhibitor; and weight gain with paroxetine. Some of these matters were not resolved by prior consultation of the *British National Formulary.* As implied in the foreword, it proved less consistently valuable in providing data for developing research questions, largely due to the delay between manuscript submission and book publication.

Unnecessary and jaded? No; still needed, and surprisingly chirpy.

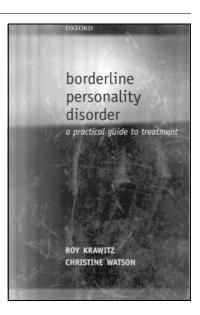
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## Borderline Personality Disorder: A Practical Guide to Treatment

Roy Krawitz & Christine Watson Oxford: Oxford University Press, £24.50 pb, 201 pp, ISBN: 0 19 852067 0

Personality disorder, especially borderline personality disorder (BPD), is a 'hot' topic both politically and clinically. Mental health practitioners have been told by their political masters that they must treat patients with personality disorders, and have been criticised for not doing so even though there is limited knowledge about how to manage and treat them appropriately within general adult mental health services. This book goes some way towards addressing this issue and increasing our skills in routine practice. It summarises the basic knowledge of BPD and provides a practical guide to its management in community services.

The reader will not be disappointed. It is not a book for those people seeking information about specialist treatment but more a handy guide for the generic practitioner. It does exactly what the title suggests; it focuses on the practicalities of the treatment of BPD within mental



health services. Although background theoretical and research information is covered, the book focuses on treatment issues such as assessing and monitoring risk, implementing care plans, and delivering treatment programmes. Using frequent clinical examples, treatment issues and clinical pathways form the core section of this book. A framework for management is provided, a guide to assessment presented, proformas for crisis plans given, and exemplary clinical plans outlined. Importantly for the clinician, there is discussion of common problems such as self-harm, when to admit to hospital, how to manage the patient in hospital what level of risk to accept, managing countertransference, and maintaining boundaries. Rightly, the authors take a 'high risk' approach, recognising that patients have to be helped to manage their own risk and not have it managed for them by an overprotective, risk-averse mental health team.

One small criticism is that, in their quest to be practical and informative, the authors become overly behavioural in their solutions. It is as if the only useful interventions for practitioners are actionbased. There is little emphasis on understanding the psychological processes of borderline patients and linking these to verbal therapeutic interventions or even masterly inaction. However, perhaps that is for a more specialist book. As a treatment primer this book is the best on the market.

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