



reviews

The Alcohol and Drug Wildcard. Substance Use and Psychiatric Problems in People with HIV

By Joan E. Zweben & Patt Denning.
UCSF AIDS Health Project
Monograph Series Number Two.
1998. 98 pp. \$9.95 (pb)
ISBN 1-879168-02-2

This monograph looks at 'triple diagnosis' concentrating on the complications the additional diagnosis of substance misuse brings to those people already diagnosed with HIV and mental health problems.

The book examines the ways in which the mercurial influence of substance use may be better managed if treated as a primary disorder rather than by way of handling the other two conditions. It centres its arguments around three neatly packaged case studies which offer all the variations of the triple diagnosis which life is likely to throw at a carer. From here, there are concise chapters addressing assessment, diagnosis and addiction treatment. The book tries to integrate the management of the three conditions simultaneously, accepting that few carers are adequately trained to do so. Unfortunately, this very dilemma is reflected in the book's own infrastructure. The authors seem comfortable with the concept of the dual diagnosis of alcohol misuse and mental illness, but need to keep reminding themselves, and us, of the inconvenient addition of an HIV diagnosis.

Treatment, they advise, should always be accompanied by group or individual psychotherapy as "evidence points to an improvement in socialisation and a reduction of relapse". What this evidence is, we are not told.

The authors are over-inclusive in their attempt to improve our understanding of the three conditions and only manage to critically review the addiction problem.

For those with severe mental illness, they recommend a highly structured programme of low intensity – including an evaluation of support networks. Ways of funding these programmes are not discussed and money is not mentioned at all, the lack of which may trump all attempts to treat triple diagnosis, however wild the card.

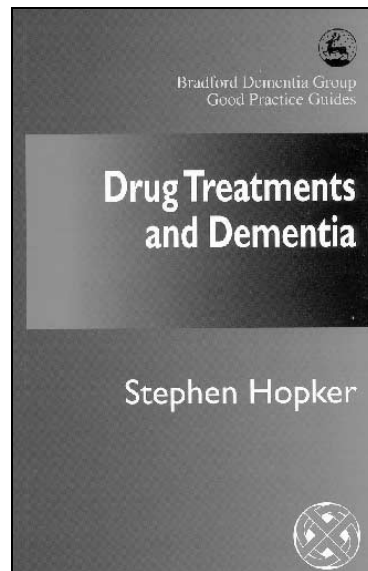
Much is made of the conflict between total abstinence and harm minimisation. Various alternatives to classical therapies are discussed, even programmes in which a patient may 'rebirth a new life', reflecting, perhaps, the book's bias towards the USA market. None of the resources mentioned is based over here.

Overall, the book is well written and easy to follow. It offers a succinct overview of the complexities of comorbidity and is to be welcomed for this.

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Drug Treatments and Dementia (Bradford Dementia Group, Good Practice Guides; 1)

By Stephen Hopker. London:
Jessica Kingsley Publishers. 1999.
128 pp. £12.95 (pb)
ISBN 1-85302-760-X



Drug Treatments and Dementia is the first of a series of good practice guides from the Bradford Dementia Group. It is a tribute to the late Professor Tom Kitwood, holder of the Alois Alzheimer Chair at the University of Bradford, who was a strong advocate of helping the person suffering from dementia, rather than just treating the disease itself. It is written in good size print and is relatively compact considering the subject at hand. Hopker writes in an easy to read conversational style, explains technical terms and uses case studies to highlight particular areas of importance.

Hopker recommends understanding the underlying reasons for the problem behaviour or the presenting symptoms in the context of the 'person' and the social environment. He warns about losing sight of the person when using structured assessment, and promotes a common sense approach of trying other interventions, such as environment modification before considering pharmacotherapy.

There is discussion about the problem of untreated and under-treated depression in dementia and a review of the evidence for the efficacy of antipsychotic, antidepressant, anxiety and antidementia drugs.

Overall, I could not help feeling that Hopker has presented a somewhat pessimistic view of the various drugs used in dementia, with some repetition about the pitfalls of current research. I agree with the author that studies on the new treatments in dementia need to include measures like activities of daily living and quality of life. He has used number needed to treat (NNT) to show modest efficacy for new treatments in various trials. For example, five patients need to be treated with donepezil to achieve an effect in one.

I think there is a danger of the real person being lost under the weight of evidence-based medicine (EBM). EBM may be important, but one must remember 'today's evidence can be tomorrow's myth' and that medicine would not have advanced if the researchers and clinicians of the past had restricted themselves to the evidence available at the time.

This is a stimulating book and I recommend it to all professionals involved in the care of patients suffering from dementia. It should be especially useful to general practitioners, junior doctors and carers from different backgrounds, including interested informal carers.

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Overcoming Barriers: Theory and Practice in Disability

By R. M. Hodapp. Cambridge:
Cambridge University Press. 1999.
£75.00 (CD-ROM). ISBN 0-521-64827-0

On the surface, 18 books for £75 would seem good value when the paper version could cost over £300. The publishers also extol the virtues of the CD-ROM being 300 times more compact and therefore easy to transport between work and home. Despite this, and other advantages of the CD-ROM, the printed word is far from dead.

Overcoming Barriers offers four books on developmental disabilities, three about Down's syndrome, three about deafness, one on blindness, two about autistic spectrum disorders, two concerning the use of computers in disabilities, one focusing on mental disorders, one on rehabilitation and one about behaviour disorders. Authors include Hugh Morgan,



columns

Uta Frith, Robert Hodapp, Susan Gregory and Nick Boras.

Certainly due to the widely ranging topics *Overcoming Barriers* will be of interest to a multi-disciplinary readership. The psychiatrist of learning disability may be disappointed there is only one book about psychiatry and no specific book dedicated to epilepsy, forensic issues, behavioural phenotypes or psychotherapy. It is unlikely any single publisher can really provide a collection of books that is truly comprehensive or cutting edge and the future probably lies with collaboration between publishers.

From a technical point of view the 'DynaText' interface is fairly basic, but does incorporate hypertext, search facilities and a journal recording option which will repeat your browsing steps. Anything less than a 17" monitor and 1024 × 768 resolution makes viewing a bit strained and awkward. The system requirements are 386 processor or higher, Windows 3.1 or above, greater than 4 MB of RAM, 2-speed CD-ROM, and 10 MB of disk space.

In summary, this is a useful CD-ROM and should be considered as a reference resource in a library with computer facilities. The use of hypertext can make

finding information easier than wandering through reference lists and indexes. However, I suspect few people will read the full 18 books on a computer screen. Personal users, unless they are particularly keen on this medium, are more likely to buy two or three of the books from the list which relate more closely to their area of interest.

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miscellany

UK Brain Injury Psychiatrists Group

The UK Brain Injury Psychiatrists Group consists of consultant psychiatrists practising in the UK who manage beds for people with problems related to acquired brain injury. The group was convened by Dr Ken Barrett in 1997, following the publication of the Health Advisory Service report on neuropsychiatric disorders, *Heading for Better Care*, and first met in September 1997. Informal meetings are held twice a year at the Royal College of Psychiatrists. The present chairman of the group is Dr Simon Fleminger and the secretary is Dr Anjun Bashir. The overall aim of the group is to improve the quality

of psychiatric management for people who have suffered non-progressive acquired brain injury. Specific aims are: to develop a uniform method of psychiatric assessment for people with acquired brain injury; to develop treatment guidelines for use in this group of patients; to develop training opportunities for psychiatrists in the management of psychiatric consensus of acquired brain injury; to facilitate research on the psychiatric consequences of acquired brain injury; and to create a support network for psychiatrists working in this area.

Specific areas of work undertaken by the group include the development of an acquired brain injury version of Health of the Nation Outcome Scales (HoNOS-ABI),

presently being piloted in collaboration with the Royal College of Psychiatrists' Research Unit, and the development of an aide-mémoire for psychiatrists undertaking a neuropsychiatric assessment of a patient with an acquired brain injury. The group is in the early stages of developing a small common database that may be used to facilitate research in this field and is looking at evidence based guidelines for the management of psychosis following acquired brain injury. For further information or to take part in this group please write to Dr Simon Fleminger, The Maudsley Hospital, Denmark Hill, London SE5 8AZ.

forthcoming events

The National Schizophrenia Fellowship would like to announce the following conferences: **Advances in Care and Treatment**, which takes place in Leeds on 8 June 2000 and **Caring for the Carers**, which takes place in Birmingham on 22 June 2000. Further information: Emma Garoushe (telephone: 020 8547 9202).

Alcohol Concern are the sponsors of a new national network for people who work with children, families and others affected by the problems of alcohol abusers. The new network will be launched at a one-day conference entitled **Trouble Within?** on 8 June 2000 in Leicester. Examples of best practice will be highlighted by experienced professionals. Further information: Rachel Morley or Carole Sired, Alcohol Concern (telephone: 020 7928 7377).

Working with Trauma is a one-day conference and workshop being organised under the auspices of EMDR (UK and Ireland) Northampton and Oxford on 6 July 2000 at St Andrew's Hospital, North-

ampton. Topics will include: working with burns and road traffic victims; and vicarious traumatisation – what do you do with the helpers? Further information: Mary Wild, St Andrew's Hospital, Billing Road, Northampton NN1 5DG (telephone: 01604 616 630; fax: 01604 616 623).

It is proposed to hold the **Second Meeting of the Royal College of Psychiatrists' Golf Society** on Friday 7 July 2000, after closure of the College's Annual Meeting in Edinburgh. Places are limited to 30 golfers and transport will be provided to and from the course. Tee-times have been reserved from 2pm onwards. Further information: Dr A. M. Stewart, Consultant Psychiatrist, Grey-stanes House, Royal Dundee Liff Hospital, Dundee (telephone: 01382 423 109).

The Sainsbury Centre for Mental Health are the organisers of the following conferences: **Interventions into Practice**, being held in Harrogate on 27–28 June 2000, will focus on issues relating to implementing evidence-based interventions into routine clinical practice;

Recruitment and Retention, being held in London on 12 July 2000, will look at the problems of recruitment and retention in mental health services and analyse creative solutions. Further information about both events: The Conference Department, The Sainsbury Centre for Mental Health, 134–138 Borough High Street, London SE1 1LB (telephone: 020 7827 8384; fax: 020 7403 9482; web site: www.sainsburycentre.org.uk).

The Anna Freud Centre would like to announce the first international neuro-psychoanalysis conference entitled **Neuroscientific and Psychoanalytic Perspectives on Emotion**. The event will take place on 21–23 July 2000 at the Royal College of Surgeons, London. The aim of this meeting is to build bridges between psychoanalysis, neuroscience, cognitive science and biological psychiatry. There will be abundant time for discussion and an International Neuro-Psychoanalysis Society will be established at the meeting. Further information: The Anna Freud Centre, 21 Maresfield Gardens, London