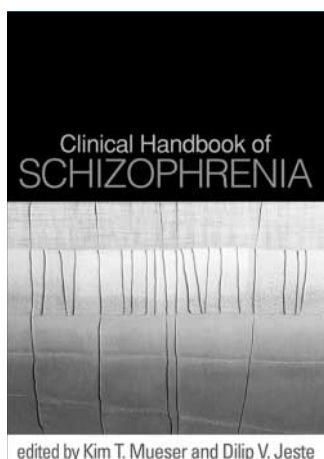


If patients read this bleak book, they might augment their learning with 'practical' examples of ways to rehearse their options, along successful lines used for children in *The Divorced and Separated Game* (Jessica Kingsley Publishers, 1996). Cullington frequently quotes 'no future without forgiveness' and some families may benefit from practical 'rite de passage' approaches to bury old resentments (L. Gulliford, 'The healing of relationships', *Forgiveness in Context*, T. & T. Clark, 2004).

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doi: 10.1192/bjp.bp.108.056598



Clinical Handbook of Schizophrenia

Edited by Kim T. Mueser & Dilip V. Jeste
Guilford Press. 2008.
US\$75.00 (hb). 650pp.
ISBN: 9781593856526

My first reaction on receiving my copy of the *Clinical Handbook of Schizophrenia* was surprise at the heavy thud with which it landed on my desk. This is not a handbook in the sense of a compact reference or *vade mecum*. It is a full-size, hardback tome that will belong on a desk or bookshelf rather than in a bag or briefcase.

The book is essentially a collection of 61 concise literature reviews, divided into eight broad areas and authored by more than a hundred contributors, many of them world experts in their fields. It is probably not intended to be read from cover to cover, and in doing so I encountered several areas of repetition and a few inconsistencies, but in general the book is well edited. Each chapter is written in a clear, simple style, with a minimum of jargon and sparse references, followed by a useful summary of key points and a list of recommended further reading. It is an excellent format and it works well.

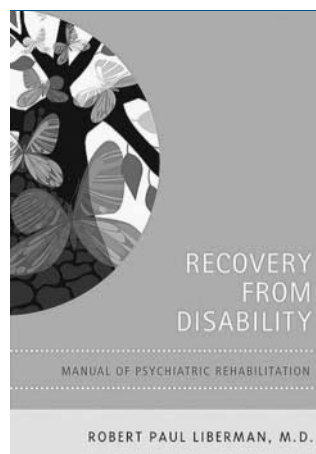
The first and largest of the eight sections, on core science and background information, is succinct, factual and up to date, with excellent summaries of epidemiology, genetics, biological and social aetiological factors. This is followed by sections on assessment, diagnosis and somatic treatments that again cover familiar ground, although the coverage of pharmacological treatments is rather brief. That said, the book's forte is in its comprehensive discussion of psychological and social aspects of treatment and service delivery, areas which are often neglected in psychiatric textbooks. I appreciated the opportunity to fill the (sometimes yawning) gaps in my own knowledge on such topics as cognitive remediation, illness self-management strategies, environmental supports and the recovery movement, as well as more familiar but still relatively recent developments such as cognitive-behavioural therapy for psychosis. The final sections cover special topics, including stigma, sexual functioning, comorbidity, physical health, and schizophrenia in children and the elderly.

The editors have clearly made an effort to include international authors, but the book retains a predominantly US perspective. This obviously limits the usefulness to British readers of some of the chapters, such as those on involuntary commitment or the US jail system, but there are other areas where relevant non-US research seems to have been overlooked. For example, it was disappointing that the chapter on rates of psychosis in African Americans made no reference to the extensive research conducted in Black British populations. Another notable omission was any significant discussion of the possible role of cannabis in inducing or precipitating psychosis.

Overall, however, the editors have succeeded in their objective to produce a collection of accessible and concise reviews on a comprehensive variety of clinical topics, particularly the social and psychological aspects of schizophrenia care.

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doi: 10.1192/bjp.bp.108.058511



Recovery from Disability: Manual of Psychiatric Rehabilitation

By Robert P. Liberman.
American Psychiatric Publishing.
2008.
US\$65.00 (pb). 628pp.
ISBN: 9781585622054

Textbooks of psychiatric rehabilitation are rather like the no. 37 bus of my years living in south London: first you wait a long time at the bus stop and then a whole bunch turn up at once. In the past 2 years I have acquired four substantial tomes on the topic: our own *Enabling Recovery: The Principles and Practice of Rehabilitation Psychiatry* (Gaskell, 2006); the soberly entitled *Psychiatric Rehabilitation* (Academic Press, 2007); the highly academic *Principles and Practice of Psychiatric Rehabilitation: An Empirical Approach* (Guilford, 2008) and now *Recovery from Disability: Manual of Psychiatric Rehabilitation*. All these texts draw on the same evidence base, although the last three are written by practitioners working in the USA, which of course has a radically different system of health and social care than the UK. Even within the USA there are varying rehabilitation traditions: what one might loosely call the Boston model of psychosocial rehabilitation pioneered by William Anthony; an eclectic tradition centred on the work of Robert Drake and Kim Mueser in Dartmouth, Patrick Corrigan in Chicago and Gary Bond in Indiana; and finally the UCLA model, of which Robert Liberman is the doyen.

Liberman began his journey as a young psychiatrist in the 1960s, exploring the exciting new world of behavioural treatments for mental illness. He has remained true to this tradition. The UCLA model consists of tightly operationalised therapeutic modules that involve a didactic approach to rehabilitation using