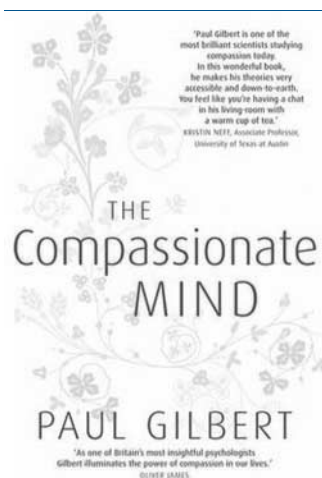


I would have liked to read more about the behavioural genetic clinic as it is one of a kind and I am aware that data based on its operation have been reported already. Finally, I was rather puzzled by the structure of chapter 8 which has lost some of its impact by discussing the training requirements for intellectual disabilities in various professions in the UK. I appreciate that this may have been included for the international readership but somehow it appeared to dilute the message of how important training is, in its wider sense, for further service maintenance and staff morale.

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The Compassionate Mind

By Paul Gilbert.
Constable & Robinson. 2010.
£9.99 (ob). 672pp.
ISBN: 9781849010986

For many years Professor Paul Gilbert has been one of the most original and creative British clinical psychologists. This book not only confirms this status, but will bring him many more admirers. In part 1, Gilbert outlines the science behind compassion; in part 2, he talks about building the compassionate self through a number of skills and exercises. The breadth of sources used throughout the book reveals Gilbert's scholarship and ranges from Freud, Jung and Bowlby to Kelly, Beck and Ellis, to name but a few. He even manages to bring in the well-known but somehow never dated, experimental work of Asch, Zimbardo and Milgram.

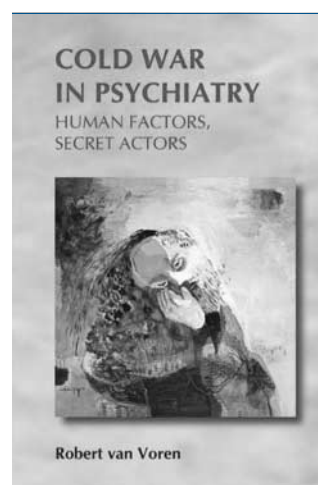
What is compassion? Gilbert does not attempt a definition until page 217. Here he states, 'Compassion can be defined as behaviour that aims to nurture, look after, teach, guide, mentor, soothe, protect, offer feelings of acceptance and belonging in order to benefit another person.' However, quite a few of the exercises in part 2 are focused on the development of compassion towards the self. Compassionate mind training is about 'learning to bring balance to our three different types of emotion regulation systems – namely the system that focuses on threats to self-protection, the incentive resource seeking system that focuses on wants and achievements and the soothing contentment system that focuses on safeness and connectedness' (p. 477).

Gilbert's work ties in nicely with the current emphasis on well-being as seen in the government's *New Horizons* policy document. It is one of several approaches that provide an underlying theoretical structure for the concept of well-being. Given the

length of the book and its 48 pages of notes, I am not sure of its utility as a stand-alone self-help guide. However, there is no doubt that it could form the basis of a very useful training course in developing compassion, both for mental health professionals and for people who use our services. It also has wider social implications for the sort of society we want to live in. Recommended.

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Cold War in Psychiatry: Human Factors, Secret Actors

By Robert van Voren.
Rodopi. 2010.
US\$54 (pb). 512 pp.
ISBN: 9789042030480

Much has been written about the abuse of psychiatry in the former USSR. The advantage of this new book by Robert van Voren is that it shows the author at the forefront of the fight to expose the political abuses of that era. The introduction states that this is not a 'typical scholarly work' – it is to a large extent autobiographical. Nevertheless, the author's first-hand experience and his access to a wide range of references, from professional journals to personal interviews, make this book a valuable source of knowledge in this area.

As the title suggests, the focus is mainly on how the Cold War affected the practice of psychiatry, and the people who played key roles in the saga. The protagonists, apart from the author, are the former medical director of the American Psychiatric Association (APA), Melvin Sabshin, his colleague there, Ellen Mercer, and East German psychiatrist and former member of the World Psychiatric Association executive committee, Jochen Neuman.

The period covered is the volatile years of the 1980s and the struggle to bring the All-Union Society of Neuropathologists and Psychiatrists of the former USSR to account. Owing to the autobiographical nature of the book, the actors play a bigger part than the concepts. In fact, the first 92 pages tell the life stories of Melvin Sabshin and Jochen Neuman. The reader might find this part somewhat tedious but their stories are told not without joy and irony, and interest is maintained by the various interspersed historical facts.

There are also chilling truths about how psychiatry was used as an instrument of oppression. For instance, in the USSR the Hippocratic oath was replaced by the Oath of the Soviet Doctors, where the doctors' responsibility was ultimately to the Communist Party and not to their patients. Psychiatric institutions were caught up in the hierarchy of the state, leading to the lack of

critical thinking or criticism of the leadership, and the substitution of dogma for science. More ominously, psychiatry was used to punish 'crimes' not identified by the law.

It is perverse that many of the psychiatrists who collaborated in the political abuse of psychiatry were highly intelligent individuals who believed in what they did.

One question that will most likely puzzle the reader is why among all medical specialties it was psychiatry that was systematically abused in this manner. One reason could be the lack of clear diagnostics in psychiatry – so, for example, political dissidents were considered to have 'delusions of reform', since only a delusional mind cannot see the obvious superiority of the communist ideology that any rational mind would agree to. The concept of 'sluggish schizophrenia' was developed to categorise people with normal social functioning who had 'reform delusions', 'struggle for truth' and 'perseverance'. Also, psychoanalysis was used to label people with diagnoses such as 'infantilism' to justify their detention.

Interestingly, Sabshin was of the opinion that this political abuse could take place, at least partly, because of the lack of clear diagnostics. As the medical director of the APA, he played an important role in the development of DSM–III. Could the new classification systems be an obstacle against the abuse of psychiatry? Certainly, the author acknowledges that 'psychiatry is politics' and we see that the demise of the Eastern Bloc was one of the important catalysts that put an end to the abuse of psychiatry.

I found the book very informative and well written. The narrative flows well and the author discusses interesting points without major digressions. Unfortunately, the ending was rather pessimistic. The systematic abuse of psychiatry had been stopped, but some of the perpetrators remained in positions of power. As Victor Hugo put it succinctly: 'the windmill has gone, but the wind is there yet'. As certain powers have started to rewrite the history of the USSR, the history of psychiatry's abuse is facing the same fate. That is what makes this book such an important document and a great achievement. Being able to openly discuss the political abuse of psychiatry in the USSR should make all doctors aware of how psychiatry can be potentially abused. It can help lay better ethical foundations and demonstrates the importance of limiting a state's power to use psychiatry as a means to its own ends.

It seems that, overall, van Voren is unsure whether the final changes were fundamental. Nor is he sure whether the methods used were the right ones. He rightly leaves the conclusion to the reader. Whether my view differs from his or not, it does not detract from the utmost respect that van Voren has earned from this reader.

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