

with US Senator Hubert Humphrey professing horror at the prescription of meprobamate 'as freely as aspirin', or today, as British MPs jostle to condemn antidepressant prescription volumes, the careerist rhetoric remains the same.

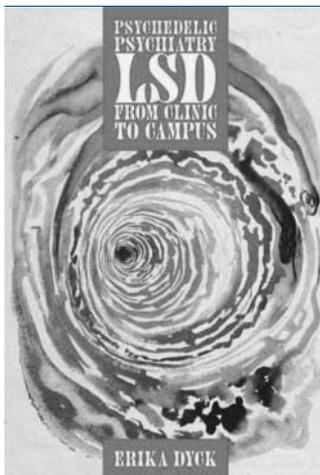
Anyone picking up Shorter's book to enjoy a diatribe against the evil of antidepressants will be disappointed (NICE guidance is the place to go for that). His concerns lie with the paucity of effective drugs, not the principle of chemical treatment. But his assessment of the value of older therapies is not correct: opiates and alcohol are possibly not the best approach to mood disorder (though a fair proportion of the antidepressant-sceptical 'public' seem keen), whereas the serendipitously discovered antidepressants and their descendants were never wholly effective despite the advance they represented. The monoamine hypothesis that grew as drug mechanisms were unravelled could never be adequate either. Mundane commercial conservatism was responsible for the raft of 'me-too' agents that followed: industry simply got on with making products to sell. Academic psychiatry did not have the technology or the ideas to contribute anything new, and got on with making an increasingly fine-grained but futile map of the monoamine system. A sufficiently sophisticated neuroscience of mood disorder just does not exist to guide rational drug development. Possibly it is beginning to emerge now, from interplay between the realms of molecular biology, imaging and neuropsychology. But it may be too late, as it was for Charlton Heston, emerging dumbfounded from a crashed spacecraft to discover that his planet had been taken over by an advanced but brutish civilisation of cognitive therapists. (My memory of plot detail may be a little hazy here.)

The hyperbolic blurb on the back cover would have you believe that this book is a revelatory work of Kuhnian stature. It is not. But it is engaging, sprinkled with Chanderlesque dialogue – FDA agents say things like, 'Baby, it ain't gonna happen' and 'your products are toast' – and fun: you will learn that Leandro Panizzon (who synthesised methylphenidate) named his drug 'Ritalin' after his wife Rita because she liked to take it before tennis matches. And that a horse named Marsilid (after the first monoamine oxidase inhibitor used in depression) won in the 9th at Belmont in 1949 (perhaps it was cheating too).

I would recommend the book as solid summer holiday reading; but don't just continuously develop professionally on the beach – bid for the film rights.

Ian Reid University of Aberdeen, Cornhill Hospital, Aberdeen AB25 2ZH.
Email: ian.reid@btinternet.com

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**Psychedelic Psychiatry:
LSD from Clinic
to Campus**

By Erika Dyck.
Johns Hopkins University Press.
2008. US\$35.00 (hb). 216pp.
ISBN: 9780801889943

Psychedelic psychiatry was a topic I knew little of. The use of lysergic acid diethylamide (LSD) in treating mental illness seemed an alien and somewhat dangerous concept. I was interested to see what emerged from this historical review of these practices in North America in the 1950s and '60s. The author, an assistant professor in history, narrates the real life events from the perspective of the two main protagonists, Humphry Osmond and Abram Hoffer. Osmond was a British psychiatrist who trained at Guy's and Hoffer was an American psychiatrist. They were kindred spirits, both biologically minded in their approach to treatment. The story of psychedelic psychiatry and LSD is told as if it was intertwined with their professional fates.

The book reads like a tragedy. There is initially much hope and enthusiasm that LSD could lead to major breakthroughs in understanding the biological basis of mental illness. There were hugely promising results from trials. Hoffer and Osmond appear as pioneers on the edge of a great leap in psychiatric treatment through the use of LSD. But as with tragedies, LSD, psychedelic psychiatry and the two main characters suffer repeated blows. The psychiatric world becomes reluctant to acknowledge the results, for various reasons. Increasingly desperate to make their mark, Hoffer and Osmond seek other non-medical uses of LSD such as aiding self-realisation and spirituality. This alienates them further and leads to the journey of LSD from clinic to campus. The 'tragedy' ends with LSD becoming increasingly used illicitly. Eventually, this leads to statutory legislation that heavily restricts and stigmatises its clinical use. Thus, LSD, psychedelic psychiatry and the two main characters are pushed to the backwaters of psychiatry.

The story is very well written and researched, allowing the reader to have empathy for the two psychiatrists through the highs and lows of their journey. Along the way the author gives fascinating insights into conflicts within psychiatry. She also illustrates how societal views and politics can influence the development of psychiatric treatments. Overall, the book is a good read and has the bonus of imparting historical understanding of psychiatry during its most exciting and innovative era.

Sanjay K. Khurmi Birmingham and Solihull Mental Health Trust, Highcroft Hospital, 411 Slade Road, Erdington, Birmingham B23 7LA, UK. Email: skhurmi@hotmail.com

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**What Every Therapist
Needs to Know
about Treating Food
and Weight Issues**

By Karen R. Koenig.
W. W. Norton. 2008.
US\$25.00 (pb). 256pp.
ISBN: 9780393705584

This is a short and initially engaging book written in an informal style. Its purpose is to help non-specialists 'gain confidence and competence in assessing and treating weight and eating issues'