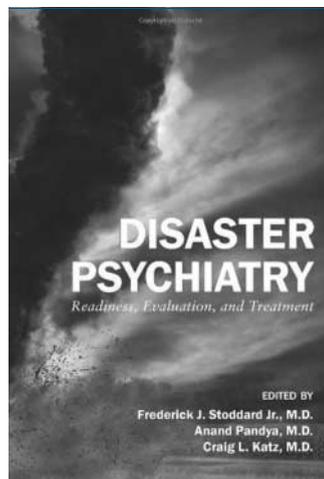


Book reviews

Edited by Allan Beveridge, Femi Oyeboode
and Rosalind Ramsay



Disaster Psychiatry: Readiness, Evaluation, and Treatment

Edited by Frederick J. Stoddard Jr,
Anand Pandya & Craig L. Katz.
American Psychiatric Publishing,
2011.
US\$69.00 (pb). 418pp.
ISBN: 9780873182171

'The wise man in the storm prays to God, not for safety from danger, but deliverance from fear.' Ralph Waldo Emerson

As disasters, natural and man-made, become more common and their impact on mental health is recognised as both an acute aftermath and chronic enduring disorders, the discipline of disaster psychiatry has carved out its niche and gained in importance. This is a comprehensive clinical textbook aimed at informing and supporting mental health professionals interested in the field.

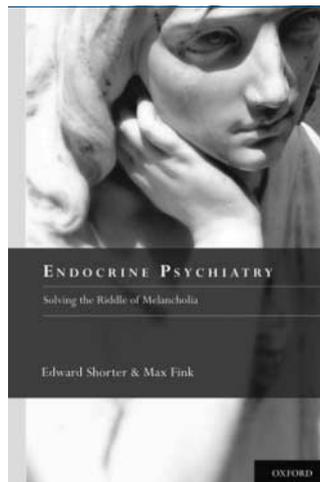
The book has four parts: 'Readiness', 'Evaluation', 'Intervention' and 'Emerging topics'. It takes a biopsychosocial approach to understanding and managing disaster-related mental health issues. It gives brief case scenarios involving various types of disasters, describes mental health problems in affected individuals and discusses practical issues and hurdles faced by psychiatrists confronting disaster situations. The practical experience of the authors in disaster work gives the book an added dimension and enriches it with clinical wisdom.

The authors underline the gaps in knowledge and point to areas that need further research. There is a lack of an appropriate nosology for the spectrum of acute psychological consequences of disaster experience and there is caution against pathologising the normal emotional reactions to stressful situations. The book has its major focus in the USA, but most of its themes are relevant elsewhere, except perhaps the post-disaster intervention systems in the low- and middle-income countries. Psychotherapeutic interventions are discussed rather briefly given the burgeoning evidence base for various kinds, especially those aimed at addressing long-term consequences.

Multiple roles of psychiatrists in the process of dealing with disasters are emphasised. These include being an integral part of the disaster management systems, maintaining readiness between disasters, advocacy and policy-making, along with consultation with various organisations, and on-site and remote work providing training, supervision and support. In summary, it is a useful resource on disaster psychiatry with practical guidance for clinicians.

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Endocrine Psychiatry: Solving the Riddle of Melancholia

By Edward Shorter & Max Fink.
Oxford University Press USA. 2010.
£32.50 (hb). 208pp.
ISBN: 9780199737468

The riddle of melancholia is one which any psychiatrist should be drawn to. In this book Shorter and Fink give a fascinating history of the entrance of endocrinology into psychiatric research. They combine synthesis of the science with personal accounts and interviews to produce a readable and enjoyable tale of the subject. Not only do they describe the evolution of the scientific literature, but they give an equal focus to the personalities and the politics which shape this story.

The book sets a scene of disparate paradigms which influence an understanding of psychiatric illness but relates how some of the key medical discoveries of the 19th and 20th centuries shaped our understanding of psychiatric illness and more specifically depression. From maverick practices such as injecting ground-up testes to detailed explanations of the corticotropin-releasing factor/dexamethasone suppression tests, the reader is taken along the journey unveiling that psychological and psychiatric processes have a significant endocrine component. The central tenet of the book is a description of the rise and fall of the dexamethasone suppression test (DST). The DST is noted to predict treatment response and suicidal risk, yet because of low diagnostic specificity and being a poor measure of severity its use in clinical practice and classificatory systems has become redundant. The reader learns of the ambivalence of psychiatry towards these findings. Although dispassionate in their account, the authors lament the failure of the psychiatric establishment to embrace this measure. We read of the frustration of Bernard Carroll who developed and fought for the use of the DST.

Admittedly, the modern scientist may simply search for the largest meta-analysis to cite, but there is great value in having a historical context for the question being studied. Any systematic review will fail to discuss why diagnosis may become a checklist or how the scientific community may feel about a biomarker. Yet it is for this reason that this book holds great value which lies in understanding the history and the scientists themselves. It is a book to be enjoyed by a specialist readership but could be read by a wider audience who have an interest in medical history. With regard to endocrine psychiatry, the authors conclude, 'it's time to take a second look', and indeed their book will encourage the reader to do so.

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