particularly moving account of her own and her mother's thoughts prior to her first appointment with a psychiatrist. It is a salutary lesson for any mental health professional on how many unspoken hopes and fears hinge on that first contact.

There are useful lists of further reading, frequently asked questions and bibliography presented in a very non-intrusive fashion. At no point is there a feeling of sterile facts blandly laid out in the manner of regulation health promotion fact sheets.

The only minor irritant was the grey sidebars of information about males with depression that interrupt the text. Even in acknowledging the need for the material, I found their content distracting me from the thrust of the main material and wished it had been done differently.

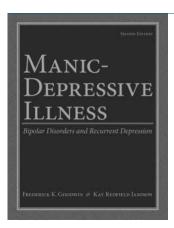
Very different were both the style and content of Monaque's account of her 'fight' against depression. Even accounting for an average adolescent's self-absorption it is difficult to escape the feeling that this book is a self-indulgent rant. Her tone alternates between being condescending and contemptuous. The egocentric account leaves the reader with very little information on depression but with a great deal of extraneous information on what it is like to be Mathilde Monaque. The pathos of the account is purely unconscious: that of a young person surrounded by a prickly hedge of defences and rationalisation, afraid to connect with her audience. The discovery of her being a 'gifted' adolescent goes some way towards explaining her alienation but does not explain the anger that runs through her narrative. The subtext of an eating disorder further muddies the waters.

It is difficult to assess how this book would be read by its presumed adolescent audience but I would have some misgivings in recommending it, given the little value it places on the treatment process. The best of this book is the very sincere afterword by her psychologist which gives a succinct account of adolescent depression and is a reflection of a relationship of trust between a troubled adolescent and a concerned adult which is probably the cornerstone of all successful therapy.

I could not have been asked to review two books on the same topic that approached the subject matter more differently – one I would readily use for psychoeducation but the other is what I suspect an adolescent would actually read and empathise with.

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Manic-Depressive Illness: Bipolar Disorders and Recurrent Depression (2nd edn)

Frederick K. Goodwin & Kay Redfield Jamison. Oxford University Press. 2007. £60.00 (hb). 1288pp. ISBN 9780195135794

The first edition of this book appeared in 1990 and it rapidly became the standard work on bipolar disorder. Some of the tables are still very useful as reviews of specific topics. However, since 1990 there have been changes and advances, including broadening of the clinical concept into a spectrum, accumulating neuro-psychological studies, use of functional imaging, emerging molecular genetic findings, much expansion in clinical use of anticonvulsant mood stabilisers accompanied by better evidence, and a recent burgeoning of randomised controlled trials of psychological treatment approaches. There have also been those sure signs of specialisation – a journal and a scientific association. A second edition is therefore timely.

Now part-way to being multi-authored, fifteen collaborators wrote first drafts of chapters which were then revised by the two authors. The collaborators are not attributed to specific chapters, although you can sometimes guess, and I believe it would have been better to know explicitly. The general approach is still consistent and unified.

The authors declare a Kraepelinian orientation, regarding severe recurrent unipolar disorder as closely linked to bipolar, and decrying the widening of unipolar disorder to the milder non-recurrent disorders now included in most diagnostic schemes. In truth, nevertheless, this is a book about bipolar disorder. The attempts to include unipolar disorders tend to be desultory and inconsistent, in contrast to the excellence of the bipolar material. There is, for instance, no chapter on depression in the elderly, although some of the studies of vascular depression are mentioned elsewhere. The book is generous to the newer spectrum of bipolar disorders, dismissive of the unipolar one. This is not a book that would be of use to the general practitioner to guide understanding and management for the milder cases of major depressions seen in the surgery every week.

This is a single large volume, about a third longer than the first edition, which most readers will use as a reference work. The chapter list is extensive. There are many references and summary tables of research. The references are listed by chapter in a large section at the end of the book losing the advantage of easy finding with the relevant chapter, without gaining the alternative advantages of a single unified list. For a British readership, although the references are comprehensive and international, there are some gaps. The self-help resources listed are all American, and the chapter on follow-up studies omits the two classic papers from the same issue of the British Journal of Psychiatry, by Lee & Murray and Kiloh et al, which established the high recurrence rates shown by many cases of severe, hospital-treated unipolar depression. The index is fairly large, but it is so indispensable for anyone who wishes to look up specific topics and studies that the authors might consider one day making a searchable CD-ROM of the text available.

The chapters are spacious and sometimes discursive, usually prefaced by a quotation from a patient or a classical figure, with following sections on history and methodology. Much of the material is research-oriented, with detailed summary tables of studies. In the earlier chapters I found particular highlights in those on epidemiology, genetics, assessment scales, and neuropsychology. The treatment chapters are more practical in approach, with less summary of the evidence base than in the first edition. The chapter on neurobiology is the longest, at 140 pages, and is particularly comprehensive and detailed. I would guess it to have been authored by Frederick Goodwin with Huseini Manji, a listed collaborator, since their combined credentials to look over the field are excellent. Sadly, and no fault of the authors, the field it exposes is still confused and inconclusive. A particular masterpiece is the chapter on creativity, which bears the hallmarks of having been written by Kay Jamison. Herself a person of remarkable creativity and with manic-depression, she has written most movingly elsewhere on her personal experiences, has made large scientific and educational contributions to the field, and is also

an altruist whose royalties from this book go to a foundation for public education in bipolar disorder. Her touch is also evident in the chapter on psychotherapy which is full of detailed material about the reactions to illness which the therapist needs to handle, but also manages to be current (up to 2006) in summarising the controlled trials of psychoeducation, family approaches, cognitive—behavioural therapy and interpersonal and social rhythms therapy. This chapter also gives a welcome psychosocial element to what is mainly a biological and psychopharmacological book.

Like the first edition, this is destined to be a standard reference work on bipolar disorder. There are some lesser cavils but, overall, it is a tour de force. It should again be good for 15 years, the rapidity of modern advances notwithstanding.

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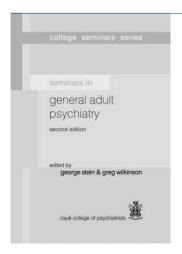
doi: 10.1192/bip.bp.107.042242

health legislation and the care programme approach locate it more particularly in England. That being said, NICE guidelines are not mentioned in isolation; those of the American Psychiatric Association are referenced too. These points are not highlighted as a criticism. For some, perhaps overseas trainees aiming to sit the MRCPsych, it may be an added bonus in preparing for the exam.

So does this book justify its price? There is no doubt that as a textbook for the specialism of general adult psychiatry it serves its purpose well. For trainees proceeding to the MRCPsych in particular it is a worthwhile purchase. But, like all such books, it is worth perusing a copy to see whether its style matches your learning and reading preferences. My review copy, it's worth noting, has gone straight from my desk to my trainee's as he prepares for his exams.

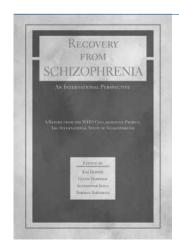
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Seminars in General Adult Psychiatry (2nd edn)

Edited by George Stein & Greg Wilkinson. Gaskell. 2007. 834pp. £65.00 (hb). ISBN 9781904671442



Recovery from Schizophrenia: An International Perspective

Edited by Kim Hooper, Glyn Harrison, Aleksander Janca & Norman Sartorius. Oxford University Press. 2007. 392 pp. £49.00 (hb). ISBN 9780195313673

Seminars in General Adult Psychiatry as a title is slightly misleading. The Oxford English Dictionary definition of a seminar describes, 'a class that meets for systematic study under the direction of a teacher'. The key elements of seminars are groups of, usually, more advanced students actively participating in a discursive learning process. Clearly, the written word will always fall short of this definition. That being said, Stein & Wilkinson, in their preface to this second edition, try to provide direction. This large textbook (the second edition now comes in a single volume despite containing more than the combination of the two volumes of the first) is aimed at those in training for Membership of the Royal College of Psychiatrists. Daunting at first glance, the editors' guidance gives a route in, highlighting where to start reading for the novice trainee. They also give permission to skip some of the heavier, more theoretical parts of these early readings, saving them for later when they will be less overwhelming as the trainee's knowledge and experience grows.

Soundly rooted in clinical psychiatry, the chapters dealing with the disorders and therapies do so in a fairly traditional style. Evidence behind therapeutic approaches is appropriately emphasised and set in a clinical context with evidence for non-drug therapies being included in this edition. It is clear from the therapeutics chapters, and also those on service provision, that this is very much a UK textbook. The references to National Institute for Health and Clinical Excellence (NICE) guidelines, mental

This book is a long overdue account of a research tour de force led by the World Health Organization (WHO) between 1991 and 1996, which made a crucial addition to the contemporaneous research challenging the early Kraeplinian view that the long-term prognosis for schizophrenia was almost uniformly poor. Enormous difficulties arise when comparisons are made across multiple studies in different countries, using different sample frames, sampling criteria, periods of follow up and assessment measures, and this provided the rationale for a series of well-designed WHO multi-country studies using uniform methodology. However, such studies raise enormous problems of their own, not least the difficulties in negotiation, coordination, implementation to attain their goal and, especially in this case, publication, since this particular book had to face unprecedented challenges in finally reaching the light of day.

The International Study of Schizophrenia was a transcultural investigation coordinated by WHO in 18 centres in 14 countries, and was designed to examine patterns of long-term course and outcome of severe mental disorders in different cultures, develop better methods for studying characteristics of mental disorders in different settings and to strengthen the scientific base for future international research on schizophrenia from a public health perspective. Cohorts or participants assessed in a number of earlier WHO studies, and also local studies at three other centres, were followed up for between 12 and 26 years.