from Stahl's longer publication, *Essential Psychopharmacology* (2000), it has the feel of a programmed learning text, a pedagogic style popular in American student texts but relatively unusual in British textbooks of psychiatry. It is beautifully illustrated in colour throughout.

The author states clearly at the outset that his aim is to give the reader a conceptual understanding of the subject. He begins with a gallop through the basics of depression and bipolar disorder, with an emphasis on fundamental neuroscience. This material forms the basis of discussion in the remaining two chapters.

Chapter 2 gives a methodical description of the mechanisms of action of the major classes of antidepressant in current use, augmented by easy-to-follow colour diagrams. The role of the cytochrome P450 enzyme system is clearly and simply illustrated in a review of the pharmacokinetics of antidepressants.

The final chapter, which will probably be the most interesting for advanced readers, deals with the mechanisms of action of newer antidepressants and mood stabilisers. The concept of antidepressants with dual modes of action is illustrated using examples including venlafaxine, mirtazapine and nefazodone. Mention is also made of antidepressants still undergoing development, for example, substance P antagonists. Stahl concludes with a survey of possible drug-combination strategies for treatment-resistant patients.

This readable and attractive volume should be required reading for all those interested in acquiring a comprehensive understanding of the neuroscience of mood disorders and a working knowledge of the basic pharmacology of antidepressants and mood stabilisers at a neurochemical level. Its clear and simple explanations and illustrations are particularly suited to readers new to the subject, although advanced readers will also find it useful in consolidating their knowledge.

For those with clinical responsibility for prescribing antidepressants and mood stabilisers there is no other book quite like this to stimulate, inform and direct further enquiry. There is a list of further reading, but no source references are provided. Multiple choice questions allow the reader to test retention of the material.

**Stahl, S. M. (2000)** Essential Psychopharmacology (2nd edn). Cambridge: Cambridge University Press.

M. Bodani Locum Consultant Psychiatrist, St Nicholas Hospital, Collingwood Court, Jubilee Road, Gosforth, Newcastle upon Tyne NE3 3XT, UK

## Dangerous Sex Offenders: A Task Force Report of the American Psychiatric Association

By H. Zonana, G. Abel, J. Bradford, S. K. Hoge, J. Metzner, J. Becker, R. Bonnie & L. Fitch. Washington, DC: American Psychiatric Press. 1999. 181 pp. £29.95 (pb). ISBN 0 89042 280 X

Public opinion on both sides of the Atlantic currently seems to show 'zero tolerance' to sex offenders. Meanwhile, behind both determinate and indeterminate sentencing can lie a pretence that treatment is the purpose of confinement.

The American Psychiatric Association task force has endeavoured to question the 'policing' role given to psychiatrists, while at the same time educating them about sex offenders and their needs. It also examines the effectiveness of classification and treatment and the impact (or lack of impact) of the latter on recidivism.

Many statistics attempting to determine the prevalence of the different paraphilias are provided. As is often the case in such studies, the descriptions of the different diagnoses far outweigh any attempts to understand why such behaviours occur. Treatment is discussed in chapters on cognitive-behavioural and pharmacological method. Psychodynamic treatments are mentioned only in the chapter on recidivism (with its implication that no treatment cures these problems), which contains a brief reference to the lack of psychodynamic research findings. The task force concludes that psychodynamic treatments are not reported because they are not successful.

This seems to me a simplistic review of a complicated field. There is a substantial international psychoanalytic literature that offers much in the way of understanding sexually deviant behaviour, an understanding that has arisen out of careful treatment. Perhaps it is not accredited because it often describes single cases in detail and does not set out to count successes. The failure to acknowledge this literature is particularly apparent in the same chapter on recidivism, in the section on theoretical explanations. It makes no sense to me for the task force to state that there have been very few recent attempts to conceptualise the theoretical causes of sexual offending. Again, the developmental aspects so important to psychoanalysis are completely missed out. The psychological entity is overlooked in the tendency to create ever-growing descriptive lists.

The final two chapters offer some useful questions and information to encourage the reader to think about the issues involved. For example, various scenarios involving a fictitious John Doe examine what to do when he is accused of abusing his 5-year-old daughter, a 13-year-old boy and a 23-year-old woman. The statement in the section on policy recommendations that "sexual predator commitment laws represent a serious assault on the integrity of psychiatry" is certainly thought-provoking.

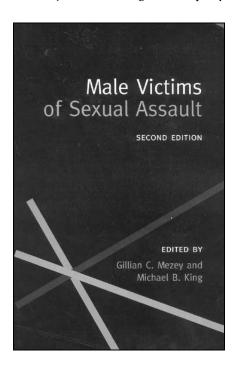
With reservations, the report serves as a review of the current struggle with a very real and complex problem for which there is no simple answer.

**Anne Zachary** Consultant Psychiatrist in Psychotherapy, The Portman Clinic, 8 Fitzjohn's Avenue, London NW3 5NA, UK

## Male Victims of Sexual Assault (2nd edn)

Edited by Gillian C. Mezey & Michael B. King. Oxford: Oxford Medical Publications. 2000. 161 pp. £37.50 (hb). ISBN 0192629328

"Male rape is a taboo subject" is the first sentence of the first edition of this volume, published in 1992. It is partly a tribute to the editors that times have changed, with the subject now being more openly



discussed, and this new edition, with its updated research, is welcome.

I find it paradoxical that male rape has long been a cultural reality, for example, in prison dramas such as Pasolini's film, Saló (1975). Based on de Sade's 120 Days of Sodom and set in fascist Italy, the film recounts the story of a group of young women and men imprisoned in a chateau and abused by four male 'libertines' with the help of female accomplices. Thus, Pasolini combines sexual and political aspects of assault, both of which are addressed in this volume (e.g. in Turner's chapter 'Surviving sexual assault and sexual torture' and Coxell & King's 'The sexual assault of men in custodial environments').

Among the other issues that are highlighted, relevant to both female and male sexual abuse, is the question of what is meant when an attack is described as sexual or political. The authors conclude that the definitions depend on context, either in particular, such as in a prison, or in a wider sociocultural environment, such as a culture of homophobia.

Of particular interest is the chapter on sexual assault in prisons: research describes apparently low incidence and prevalence levels, and the discussion here addresses whether or not this is actual or a result of underreporting. What seems clear is that the *threat* of rape is in itself very important and the authors ask whether rape in prison is an institutional myth whose function is to control inmates. This is a topic I would like to see explored more fully.

The volume is impressive in its collation of the current literature on male victims of sexual abuse in a variety of contexts, but I thought there to be some thinness of discussion around understanding why men, in particular, sexually attack other men. There is a difficulty in divorcing this entirely from homosexuality, which this book does at several points, as if sexual desire plays no part at all. It is important to emphasise, as some chapters do, that homosexuality in itself does not make someone more likely to commit a sexual crime, but that sexuality plays some part in what occurs. This topic is always difficult, and of help was West's chapter on homophobia; this explores men's fear of homosexuality (an explanation for some attacks), which appears to be more powerful than women's fear of it. From an anecdotal point of view, working in a secure unit, I have noticed that men who suffer from schizophrenia often have delusions about being sodomised by other men, when particularly paranoid.

The authors do not explore the nature of gender and of male (*v*. female) sexuality, and their relation to violence, as extensively as I would have liked. It is noted that far fewer girls than boys become sexual abusers after having been sexually abused themselves in childhood, and that research suggests that males report feeling less damaged by their experience of abuse than do females. However, the paradox is not examined in depth. I am either being unfair to the authors and editors or paying them a tribute by saying that they left me wishing for more.

**Cleo Van Velsen** Consultant Psychiatrist in Forensic Psychotherapy, Maudsley Hospital, Denmark Hill, London SE5 8AZ, UK

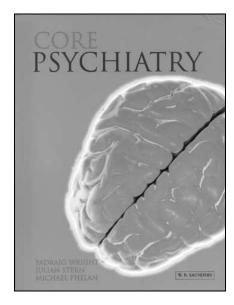
## **Core Psychiatry**

By Padraig Wright, Julian Stern & Michael Phelan. London: W. B. Saunders. 2000. 652 pp. £49.95 (pb). ISBN 07020 2490 2

Although an obituary has been written for textbooks more than once, they have proven to be a hardy breed which has survived despite being frequently criticised and even at times unloved. Indeed, rather than dying out new textbooks continue to appear and this is true in psychiatry no less than in other branches of medicine.

Core Psychiatry is one such volume. In the preface the authors tell us that, like many other textbooks, it has arisen from a teaching course, in this case one oriented towards individuals sitting Parts 1 and 2 of the MRCPsych examination. In line with this, the book is divided into three parts: Part 1 concentrates on the foundations of psychiatry, Part 2 on clinical psychiatry and Part 3 on diagnosis, investigation and treatment. The curriculum for the membership examination is wide-ranging, to say the least, and to attempt to cover the full range of knowledge in a single volume is ambitious. The authors do not claim to have produced a textbook for psychiatry per se; rather, they offer one specifically for exam candidates. They do, however, claim that it will be a reference volume for those who have passed the MRCPsych and others in medicine and related professions.

By and large, the authors have succeeded in their aim of producing a core textbook that is particularly useful to those who are required to absorb large amounts of information over a short period of time



for the purpose of passing examinations. Nevertheless, there are deficiencies. The foundations of psychiatry are inadequately covered (although this must be almost inevitable given that psychiatry draws from so many different disciplines). However, I would think that no trainee psychiatrist, even one cramming for exams, would go through psychiatric training without reading about fundamental issues such as diagnosis and classification, adumbrated so well by Robert Kendell in the Companion to Psychiatric Studies (Kendell & Zealley, 1993). Other parts of the book are perhaps weaker than rival volumes such as the Oxford Textbook of Psychiatry (Gelder et al, 1996), and I found the coverage of neuropharmacology particularly disappointing, as was the coverage of affective disorders and psychopharmacology. It is notable that the other textbooks mentioned above deal with these particular areas much more completely.

Upon taking a straw poll of the few local trainees who have attended the course and used the textbook, I found that the direct consumers were very positive about both the course and the textbook. Nevertheless, any potential purchaser will have to consider very seriously whether they will spend their limited amount of cash on this or would prefer one of the more established textbooks.

Gelder, M., Gath, D., Mayou, R., et al (1996) Oxford Textbook of Psychiatry (3rd edn). Oxford: Oxford University Press.

Kendell, R. & Zeally, A. K. (1993) Companion to Psychiatric Studies (5th edn). Edinburgh: Churchill Livingstone.

**Allan Young** Professor of Psychiatry, Department of Psychiatry, Royal Victoria Infirmary, Queen Victoria Road, Newcastle uponTyne NEI 4LP, UK