

to fully bring their minds into the present. This practice leads to the insight that our sense of having a unified self is an illusion and that this illusion causes us much psychological suffering. Harris aims to convince his reader of this using philosophical thought experiments, discoveries of contemporary neuroscience and personal experience. He also encourages his reader to test these hypotheses about human consciousness 'in the laboratory of your own mind', through meditation practices inspired by Buddhist Dzogchen and Vipassana teaching. He argues that these spiritual insights can be accepted independently of the metaphysical baggage of traditional religion, and laments that until recently they have been under-investigated by an 'impoverished' neuroscience.

The resulting book is an ambitious mosaic: part memoir, part neuropsychology text and part meditation guide. A key strength is Harris' clear, lively and personal writing style, which instils the prose with an endearing conversational air. Many readers will feel, however, that by focusing almost exclusively on solitary meditation practices and psychedelic drug-induced experiences, Harris has omitted important dimensions of human spiritual experience, such as the self-transcendence which may be arrived at when contemplating art or engaging in communal ceremonial practices. Moreover, the occasional barbed criticism of monotheistic religion will deter some readers, but play well to the Harris faithful.

*Waking Up* is a book for the general public and is not intended to have a clinical application. Why, then, is it being discussed in the pages of this journal? My answer is twofold. First, as psychiatrists we are interested in all dimensions of human experience. Consequently, the growing scientific interest in the mystical/spiritual experience and its potential therapeutic implications is of great importance for our specialty. Second, psychiatrists are humans and all humans may benefit from being reminded from time to time that our conventional sense of a unified self sitting some 2 inches behind the eyes is likely to be a pernicious illusion.

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## Deconstructing the OSCE

Duncan Harding  
Oxford University Press 2014, £19.99, pb, 128 pp.  
ISBN: 9780198704874

This volume contests that it is possible to develop a generic way to approach different Observed Structured Clinical Examination (OSCE) scenarios, regardless of medical specialty. Perhaps surprisingly, it is not filled with possible exam scenarios, but rather looks at the underlying barriers to good performance. In this regard, it provides a behavioural and psychological schema for approaching the OSCE. The book

makes no apologies for aiming at those who have already had a previous attempt at passing the OSCE, and given that pass rates for membership exams are generally around 50–60%, it is a resource available to a great number of doctors in training.

The initial chapters look at the common emotional and cognitive responses which typically follow an unsuccessful examination attempt – they do a good job of validating these experiences and feelings. Subsequent chapters aim to improve general exam strategy. These include the perhaps more neglected areas of good exam performance; for example, how to establish rapport with the actor or patient, and how to run a good study group and learning environment. An especially useful chapter is that which explores challenging scenarios such as 'the angry relative' or 'the crying patient'. Although these passages are brief, practical tips are given to aid communication in these often difficult situations.

In addition, there are worksheets that support the doctor in understanding that the way they think about the exam influences their emotions and, ultimately, their exam performance. The psychiatry trainee will be no stranger to this process; however, I wonder whether trainees from other specialties might find the experience alienating.

This work undoubtedly highlights that poor exam performance is often not related to lack of knowledge, but to cognitive and emotional barriers. As a result, it may provide a good starting point for ongoing study where examination performance has proven problematic.

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## Schizophrenics can be good mothers too

By Q. S. Lam  
Muswell Hill Press, 2015, £17.95, pb, 200 pp.  
ISBN: 9781908995155

To protect her children the author of this book chose to publish it under a pseudonym, Q. S. Lam. However, it's easy to break her anonymity and she accepts it can only be partial. She is a British Bangladeshi artist who has had several psychotic episodes, including postpartum. She has been diagnosed with schizoaffective disorder but prefers to describe herself as having a different sort of brain.

Her friend Stephen Fry has described the book as 'brilliant' – an endorsement displayed on the book cover – and Alastair Campbell has tweeted the same. Artwork and poetry complement the narrative of the author's personal and family history, which includes episodes of psychosis, and the description of the dissociated parts of herself and how she recovers. She does not take antipsychotic medication.

She makes remarks – not always very complimentary – about each mental health practitioner that she has seen over

the years, dating back to the time when she first sought help. Also discussed is the impact of her mental health problems on her husband and children. She moved to Brussels, as her husband works there.

The psychiatrist she has most identified with is Erik Thys, who is also an artist. He did not advise Q.S. not to have a second child; instead, he said it was 'doable'. Q.S. openly questions whether it was fair on her children that she became a mother and dedicates the book to them.

The strength of this book is its honesty. Q.S. has experienced multiple sexual assaults by men and considers whether her mental health issues are a sane response to an insane situation. She reveals her heart and mind, truthfully expressing what she feels and thinks, and I found the directness of the book attractive. As Q.S. notes, doctors

generally don't like their authority to be challenged. However, in my opinion there needs to be an open discussion about the stigmatisation of mothers with mental health problems.

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