Reviews

Management of Treatment-Resistant Major Psychiatric Disorders

Edited by Charles B. Nemeroff Oxford University Press, 2012, £55.00, hb, 400 pp. ISBN: 9780199739981

Treatment-resistant disorders are challenging for psychiatrists and the team, causing suffering for patients and their families and pushing up costs for healthcare services. This is something we psychiatrists come across quite regularly in our clinical day-to-day practice and surely more interventions and strategic options are needed. And so it was no surprise that the title of this book caught my attention — I opened it expecting it would show me the way ahead when the going gets difficult.

The book is divided into 15 chapters addressing almost all major psychiatric disorders. Although there already is an abundance of scattered literature pertaining to treatment resistance, collating it together in one book is welcome. Chapters on the usual suspects such as depression, bipolar disorder, schizophrenia and personality disorder were expected, but it has been quite informative to read on various anxiety disorders (which usually are addressed under one broad category) and alcohol and substance misuse. A detailed chapter is dedicated to treatment-resistant insomnia, discussing pathophysiology, assessment and management of insomnia comorbid with other psychiatric disorders and sleep disorder syndromes. Finally, there is a comprehensive chapter on childhood mood and anxiety disorders.

The information is concise and clear, with frequent references to the literature and interesting discussions on different treatment modalities and combinations. A wide range of treatment options are considered, encompassing both pharmacological and non-pharmacological treatments (psychological therapies and social interventions). Some of the novel therapies (e.g. transcranial magnetic stimulation, or invasive treatments such as vagus nerve stimulation, or deep brain stimulation for depression) may not be currently widely used in clinical practice in the UK or be recommended by the National Institute for Health and Clinical Excellence, but they give us a promising outlook on future management options.

There are no major criticisms for this book. All but one chapter are written by authors based in the USA and there are frequent references made to the US Food and Drug Administration (FDA). Would I recommend this book? It provides quite extensive, clear and updated information on the management of various treatment-resistant psychiatric disorders, highlighting future treatment options currently under research. I am sure psychiatrists will find it practical and useful.

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Schema Therapy in Practice: An Introductory Guide to the Schema Mode Approach

By Arnoud Arntz & Gitta Jacob Wiley-Blackwell, 2013, £32.99, pb, 276 pp. ISBN: 9781119962861

The continued proliferation of 'branded' psychotherapies can induce cynical beliefs that these are simply products of old ideas being repackaged as new, fuelling an inverted logic in which the dogma of evidence-based practice invades the therapy room to dictate and control the therapeutic relationship. A more optimistic view is of a creative and progressive evolution. As an integrative therapy, the schema approach has been developed with the hope of establishing an effective treatment for patients who may not be suited to classical cognitive—behavioural therapy (CBT) or analytic approaches alone. The newer schema mode approach covered in this text has been envisaged specifically for personality disorders but is here presented for more generic application.

Compared with the seminal texts by the pioneer Jeffrey Young, this book offers a distinct experience for the reader by keeping brief the theoretical background and assuming the reader's competency in generic approaches to therapy. Arntz & Jacob aim to provide an introductory guide for non-specialist practitioners who wish to incorporate schema therapy into their practice for a variety of patients rather than as a manual for specific psychiatric disorders.

The clearly narrated schema modes, which are linked to a set of specific clinical interventions, enabled me to feel that I was discovering a sufficiently novel and useful therapeutic approach. The authors provide a clear understanding of how a schema therapist adapts and integrates the familiar ideas and techniques of CBT and psychodynamic therapies but also how (and importantly, why) novel additional methods are incorporated, such as 'chair dialogues', 'imagery re-scripting' exercises and 'limited re-parenting' techniques. The writing style is concise and grounded in the clinical setting, the case examples are clear and informative and the FAQs at the end of each chapter are well conceived.

It is difficult for any textual account to portray the complexities of interpersonal processes which are operant in psychotherapies. Arntz & Jacob manage to provide a captivating insight into what we might observe if looking in on a schema therapy session, and I think go some way towards convincing us that these are some genuinely novel ideas and methods that may deserve a place in our own consulting rooms.

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