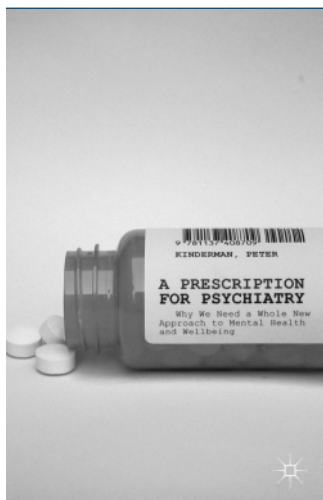


16 years' standing and for the past 10 years he has been working as consultant for a psychiatric intensive care unit in east London. He argues convincingly that a paradigm shift in our approach to mental distress is necessary and it is one which concentrates less on looking on patients as being 'diseased' and more on seeing them as experiencing a sense of disconnection from themselves, their community and life itself.

Razzaque explains that mindfulness-based psychological therapies can provide patients with the tools to learn how to manage their own mental state. These techniques are effectively a modern and secular equivalent to ancient methods of psychological healing based on meditational practice. He also calls upon new ideas, such as the open dialogue approach to patient care, acceptance and commitment therapy and the philosophical ideas of relational frame theory, to reinforce his argument. Approaching patient care in this way at least makes symptoms easier to bear and at best effects significant improvement, either without, or in combination with, drug treatments.

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A Prescription for Psychiatry: Why We Need a Whole New Approach to Mental Health and Wellbeing

By Peter Kinderman.
Palgrave Macmillan. 2014.
£18.99 (pb). 224 pp.
ISBN: 9781137408709

Psychiatrists could be forgiven for avoiding this apparent critique of their profession. However, such aversion would be a shame, for while familiar ground is trodden here, there is much that is new, positive and worthy of thought.

The book consists of nine chapters, the first three occupying just over half the space. In this half the focus is on the 'disease model', diagnosis and the use of medication. Some of this is wearily familiar and we must ask whether full due is given to all available evidence. The roles of trauma and 'life events' in schizophrenia are offered to raise our credence that this problem is best considered psychosocial. A major alternative theory, that some manifestations may best be considered a developmental disorder (not everyone who meets DSM criteria will have been abused or traumatised) is not even mentioned.

On diagnosis. It is right that psychiatry should face shameful aspects of its history. The tremendous damage wrought by pathologising homosexuality for decades and the odious debacle of drapetomania should remain stark lessons. However, Kinderman might have done more to explain why these despicable examples

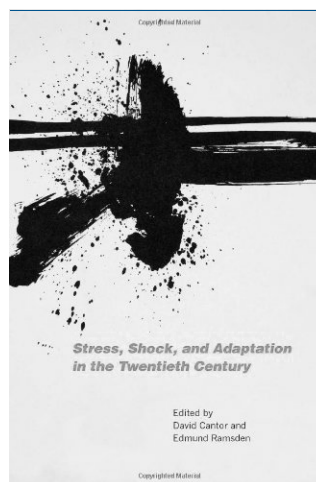
have a substantive bearing on the question of diagnosis in general. On medication though, his particular brand of caution seems more laudatory than incendiary.

More interesting territory lies beyond. Regardless of readers' prior commitments on the nature of mental health problems, Kinderman is going to find much agreement on the constructive thrust of chapters four to nine. A holistic approach to well-being; a proposal for comfortable, decent residential care for 'respite' rather than 'cure'. In a field where attitudes are so important, changing the basic mission of services could have revolutionary implications.

The biggest controversy will be around Kinderman's view of what psychiatrists' role should be (although he is good on linking his position to debates from within the profession itself). From the perspective of this reviewer (a trainee clinical psychologist), it is an exciting notion that many of the leadership and legal roles of psychiatrists could be performed by other professionals. However, a more radical suggestion that psychiatrists should have only a medical consulting role, may alienate many. Whatever your view, Kinderman could open constructive debates with his bold proposals.

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Stress, Shock, and Adaptation in the Twentieth Century

Edited by David Cantor & Edmund Ramsden.
University of Rochester Press. 2014.
£80.00 (hb). 376 pp.
ISBN: 9781580464765

This is the first major collection of historical studies on stress and its place in contemporary society. Read together, these 12 papers explore the concept of stress – a usefully elastic construct – and how it has been variously employed since the mid-20th century to reform and unite a broad variety of disciplines and activities in post-war USA and UK. This is no less the case for psychiatry, where stress has proved fundamental to the development of disease classification and modern notions of psychopathology.

Our modern understanding of stress originated from Hans Selye, who according to Mark Jackson was a prolific and media-savvy physiologist. He developed the 'general adaptation syndrome' which described a three-stage, non-specific response to environmental stressors: alarm, resistance and finally exhaustion. It is hard to overstate how influential this intuitive model was and not just in biomedical science, psychology and psychiatry. It soon found wider application in disparate disciplines such as sociology, politics, occupational health, ecology, animal