

Personality-Disordered Patients: Treatable and Untreatable

by Michael H. Stone, M.D. American Psychiatric Press, Inc.,
Arlington, Va., 2006, 269 pages, \$42.00 (paper).

Michael H. Stone's superb book, *Personality-Disordered Patients*, is subtitled *Treatable and Untreatable*. His clinical interest in treating individuals with personality disorders, especially borderline personality disorder, spurred the writing of this book. Dr. Stone asks 2 key questions: With which kind of patients is therapy likely to succeed? and With which is failure most likely a certainty? This book is his response to these queries.

For Dr. Stone, verbal psychotherapy is the cornerstone of treatment of personality disorders. Although pharmacotherapeutic agents have an important role in ameliorating symptoms of anxiety, mood fluctuations, and cognitive disturbances, it is the individual's amenability to psychotherapy that is paramount. One's psychological mindedness, mentalization, and ability to think about oneself and identify feelings are what he describes as the oil for the engine of psychotherapy. How smoothly and how well the engine works depend on the characteristics of this oil.

In the first chapter, Dr. Stone delineates those factors that he believes enhance, or conduce, an individual's amenability to psychotherapy. Positive factors include good character, likability, psychological mindedness, and openness. Candor, motivation, spirituality, and perseverance are additional enhancing characteristics. Dr. Stone also identifies the capacity for intimacy, favorable life circumstances, and the role of culture as potential enhancers to amenability.

The remaining 8 chapters are divided into discussions of personality disorders that range from those with the greatest amenability to those with intermediate amenability and low amenability to psychotherapy. Treatment of individuals with borderline personality disorders, for example, is discussed in 3 separate chapters, i.e., individuals with high, intermediate, and low amenability to treatment. The last chapter addresses personality disorders that Dr. Stone considers untreatable.

As a practicing clinician, I speak with colleagues about patients with personality disorders whom we treat who do not get better, wondering what to do differently to effect improvement. What this book provides are factors on the other side of the equation: What characteristics does the patient have that make him or her more or less treatable? As a practitioner himself, Dr. Stone understands these dilemmas all too well.

To illustrate his points, Dr. Stone provides many wonderful detailed clinical vignettes that illustrate specific factors of amenability to treatment in a lively, engaging fashion. Some vignettes include follow-up of patients 20 years later, with interesting outcomes.

The concluding chapter, which discusses the individual with an untreatable personality disorder, is hard to read because of the content of the chapter. Dr. Stone describes individuals at the extreme of the narcissistic spectrum, those with psychopathy. These persons lack empathy or compassion for others, are pathological liars, lack guilt, and are often predators. Often having grown up in families in which they were mistreated, they perpetuate the cycle. Dr. Stone discusses Charles Manson as but one example.

In summary, *Personality-Disordered Patients* is a terrific book for clinicians. It is well written with multiple clinical vignettes. I would highly recommend this book to all clinicians who work with challenging patients.

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Bipolar Disorders: Mixed States, Rapid Cycling, and Atypical Forms

edited by Andreas Marneros, M.D., and
Frederick K. Goodwin, M.D. Cambridge University Press,
New York, N.Y., 2005, 395 pages, \$120.00.

Consider a condition first described 2000 years ago and thought to be of high prevalence, its descriptive characteristics maintaining their relevance to present day, that somehow has escaped rigorous scientific examination. Such is the curious case of bipolar mixed states and their ostensible relatives: rapid-cycling and atypical mood disorders. The authors of this wonderfully detailed and intelligent treatise examine the consequences of nosology gone wild and chart a cogent course for correction.

One of the possible virtues of examining an underexplored topic is the ability to be both comprehensive and definitive, and that is certainly the case here. Chapter topics include diagnostic consideration of such competing categorical conditions as rapid-cycling and mixed-state disorders, recurrent brief depression and atypical and agitated depression, and schizoaffective mixed states and transient psychotic disorders, as well as bipolar presentations in children and adolescents and in old age. Etiology is also addressed in chapters on the genetics and neurobiology of mixed states, as is treatment.

Armchair historians will delight in quotations by Hippocrates and Aretaeus of Cappadocia that juxtapose the English translation with the original Attic Greek and charts that compare Kraepelin's original data with data from current collaborative studies of bipolar disorder course. More practically minded readers will appreciate the thoughtfully considered treatment chapters and the discussion of how different models of mixed states can lead to different predictions of what drugs to use or to avoid. How these different models might pertain to utilization of different psychotherapeutic approaches is one area not addressed, although the issue of "manic defense" is tantalizingly mentioned in passing.

The book is extensively referenced, although the most recent articles appear to be from 2002, with only the treatment chapter including a few articles from 2003. Given the topic, this lack of later articles is not generally a problem, although the chapter on genetics obviously suffers from the delay of the book's publication until 2005. The bottom line, though, is that this is a book to have and to read, appropriate for, and likely to be enjoyed by, both interested clinicians and learned "Bipolarologists" alike.

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