
**Cognitive-Behavior Therapy for Severe Mental Illness:
An Illustrated Guide**

Jesse H. Wright, MD, PhD; Douglas Turkington, MD; David G. Kingdon, MD; and Monica Ramirez Basco, PhD. Foreword by Judith S. Beck, PhD. American Psychiatric Publishing, Inc, Washington, DC, 2009, 354 pages, \$69.00 (paperback, with DVD included).

Cognitive-Behavior Therapy for Severe Mental Illness: An Illustrated Guide is a book whose time had come. I am not alone in this opinion. It was named "Mental Health Book of the Year" in 2009 by the British Medical Association. More psychiatrists than ever have been taught the basic principles of cognitive-behavioral therapy (CBT) in residency training, and most psychiatrists are responsible for the care of patients who have severe mental illness. Once psychiatrists have "the basics," this volume can guide them through the conceptualization and interventions that the use of CBT in more complex patients entails. This book is one in a series of books about CBT, edited by Dr Wright and published by the American Psychiatric Association. It, like the others, includes a DVD that illustrates key principles of the therapeutic techniques described in the text. (In the spirit of full disclosure, I am an author in the series' third publication and identified myself as such to the editors of this journal at the time they requested my review.)

The book begins with a series of chapters that describe how to use CBT with medication and plan treatment interventions regardless of the diagnosis, and then proceeds to detail very specific CBT interventions that are of benefit in all patients with severe mental illness, namely, engaging and assessing, normalizing and educating, and case formulation and treatment planning. The book focuses on schizophrenia, bipolar disorder, and severe treatment-resistant depression. As in the other books in the series, there are an abundance of tables and figures that provide readers with succinct and clinically relevant interventions. Therapy transcripts and clinical examples amplify the DVD case material. There is a strong emphasis on case and problem conceptualization and ample inclusion of educational materials for patients and families.

The next sections of the text are dedicated to CBT techniques that are helpful in the management of psychotic patients. Chapters on delusions and hallucinations will give practitioners a wonderful introduction to the use of CBT in psychosis. A number of recent studies have demonstrated the value of these interventions in addition to medication, which frequently produces an incomplete recovery. Learning exercises encourage readers to practice interventions with their own patients. The text continues with chapters on depression and mania. Extremely practical strategies make these chapters invaluable for clinicians—the depression chapter is filled with practical interventions to use with suicidal and hopeless patients; the chapter on mania presents specific behavioral strategies

to help patients avoid manic escalation. A chapter on negative symptoms provides a CBT conceptualization and behavioral interventions for these troublesome and often refractory symptoms.

Finally, 4 chapters address problems common to severe mental disorders that can derail progress—impaired cognitive functioning, interpersonal problems, nonadherence, and relapse. The DVD vividly illustrates work with thought disorders. Interpersonal issues are well described (like how and whether to disclose the illness to others), with specific techniques to use, particularly when skill development has been attenuated by the illness. The chapters on adherence and relapse prevention (maintaining treatment gains) describe methods to deliver long-term interventions to maintain gains.

As with the other books in this series, worksheets and checklists for clinical use are available in the book and online, as are lists of other resources for CBT education. This increases the practical usefulness of the text. The authors have made an enormous contribution to the literature. This book will be invaluable to help clinicians learn to implement CBT in working with severely ill patients.

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