Book Review

CBT for Adults: A Practical Guide for Clinicians

The best description of Dr Lynne Drummond’s CBT for Adults: A Practical Guide for Clinicians is provided by the author herself. In the preface, Dr Drummond writes that CBT for Adults “is designed for clinicians as a practical guide to treating adults with psychological and psychiatric disorders using cognitive and behavioural interventions” (p xv). The book is certainly a guide in that it features concise descriptions of cognitive-behavioral approaches to a broad array of presenting issues, ranging from depression and anxiety to psychosis and sexual dysfunction. CBT for Adults contains information on the research support for different therapies and covers the more recently developed “third generation” cognitive-behavioral approaches in addition to the more classic treatments. The book is also extremely practical in its extensive use of case illustrations that provide the reader with assessment, treatment-planning, and treatment examples. There is a minimum of jargon, and although each chapter explains the theoretical bases for the interventions discussed, the emphasis throughout the book is on concrete descriptions of the behavioral and cognitive treatments.

The book opens with a brief but thorough history of the development of behavioral and cognitive interventions, beginning with behaviorism’s early 20th-century roots and continuing through recent therapies such as acceptance and commitment therapy and mindfulness-based treatments. Drummond then provides an overview of cognitive-behavioral assessment, including general methods of case formulation as well as commonly used paper-and-pencil self-report instruments. The remainder of the book contains chapters on specific types of cognitive and behavioral interventions. The diversity of therapies described is truly impressive. Most providers trained in CBT are exposed to behavioral and cognitive approaches to anxiety disorders and depression. Drummond covers both of these areas but also includes in-depth material on cognitive-behavioral treatment of communication problems, social skills deficits, sexual dysfunction, eating disorders, and psychosis, among other presenting issues.

Perhaps the strongest feature of CBT for Adults is its organization. Each chapter begins with a brief overview, presents its material, and ends with key learning points, references, and other recommended reading. Chapters on specific therapeutic interventions also contain recommendations for assessment measures as well as reference information for treatment manuals. The therapy chapters are organized by complexity, starting with contingency-based behavioral interventions and progressing through combined cognitive and behavioral approaches.

Despite the wide range of cognitive and behavioral treatments Drummond surveys, some applications of CBT are missing from the book. For example, eye-movement desensitization and reprocessing is mentioned in the chapter on combining CBT with other forms of therapy, but exposure and cognitive therapies for PTSD are not described in significant detail. Insomnia is addressed only as an aspect of anxiety, and although sleep hygiene changes are described as a potential intervention, more effective cognitive-behavioral approaches for insomnia such as stimulus control and sleep restriction are not mentioned.

Drummond accurately notes in her preface that “no one should ever think any book will equip them to be able to apply all the therapies” (p xv). This is as true of CBT for Adults as it is of any other general book about CBT. Readers should not expect that reading the book will enable them to deliver the many therapies described in it, but they can expect to expand their knowledge of how CBT is applied to different presenting issues. CBT therapists who would like clear, basic descriptions of a variety of cognitive-behavioral interventions as well as recommendations for further reading or treatment manuals will find this book a nice addition to their collection.

Jason C. DeViva, PhD
jason.deviva@va.gov

Author affiliations: Yale University School of Medicine, New Haven, Connecticut.

Potential conflicts of interest: None reported.

J Clin Psychiatry 2015;76:7,e897
dx.doi.org/10.4088/JCP.15bk09889
© Copyright 2015 Physicians Postgraduate Press, Inc.