**BOOK REVIEWS**

**Dialectical Behavior Therapy in Private Practice**
by Thomas Marra, Ph.D.

Manualized therapies continue to gain in popularity among therapists. These “newer” therapies have a growing body of evidence documenting their effectiveness in treating mental illness. These burgeoning efficacy data and the typically limited number of treatment sessions have not escaped third-party payers. In fact, insurance pressure has contributed to the momentum enjoyed recently by therapies such as interpersonal therapy (IPT), cognitive-behavioral therapy (CBT), and dialectical behavior therapy (DBT).

Dialectical behavior therapy is the brainchild of Marsha Linehan, who created it to treat patients with borderline personality disorder. The central idea is that such patients have competing dialects that cause significant emotional stress. As a means of coping, these patients often engage in self-harm as a maladaptive means of regulating emotions. Traditional DBT requires significant resources as patients undergo both individual and group therapy during a course of treatment. The group component is psychoeducational and primarily didactic in nature. Several core modules of skill sets focusing on emotion regulation, distress tolerance, and mindfulness are presented to the patients. During individual sessions, parasuicidal behaviors are normally the primary target. Additionally, patients are coached in the application of skills taught during the group sessions with emphasis on practice to obtain skill mastery. Typically, a team of therapists skilled in DBT are required to coordinate both the group and individual sessions. These logistical challenges can restrict the practice of DBT to academic centers where educational or research subsidies are provided.

*Dialectical Behavior Therapy in Private Practice* challenges the above assertions. The book provides an argument that DBT is not beyond the reach of a solo practitioner. Breaking with tradition, the author suggests that DBT can be used in a more piecemeal approach where limited resources require such an adaptation. Moreover, extensive research is presented that documents DBT’s efficacy well beyond its original target of patients with borderline personality disorder. The book is designated for both seasoned practitioners and primarily didactic in nature. Several core modules of skill sets focusing on emotion regulation, distress tolerance, and mindfulness are presented to the patients. During individual sessions, parasuicidal behaviors are normally the primary target. Additionally, patients are coached in the application of skills taught during the group sessions with emphasis on practice to obtain skill mastery. Typically, a team of therapists skilled in DBT are required to coordinate both the group and individual sessions. These logistical challenges can restrict the practice of DBT to academic centers where educational or research subsidies are provided.

*Dialectical Behavior Therapy in Private Practice* challenges the above assertions. The book provides an argument that DBT is not beyond the reach of a solo practitioner. Breaking with tradition, the author suggests that DBT can be used in a more piecemeal approach where limited resources require such an adaptation. Moreover, extensive research is presented that documents DBT’s efficacy well beyond its original target of patients with borderline personality disorder. The book is designated for both seasoned practitioners and primarily didactic in nature. Several core modules of skill sets focusing on emotion regulation, distress tolerance, and mindfulness are presented to the patients. During individual sessions, parasuicidal behaviors are normally the primary target. Additionally, patients are coached in the application of skills taught during the group sessions with emphasis on practice to obtain skill mastery. Typically, a team of therapists skilled in DBT are required to coordinate both the group and individual sessions. These logistical challenges can restrict the practice of DBT to academic centers where educational or research subsidies are provided.

In the first 2 chapters, the theoretical underpinnings of DBT are compared with other psychotherapy frameworks and evidence for the DBT approach is presented. Chapter 3 examines the possible psychological and neurobiological factors underlying a patient’s emotional sensitivity. DBT’s central thesis that emotional sensitivity (high emotional arousal, delayed return to baseline, and hypervigilance to threats) leads to maladaptive avoidance and escape behaviors is developed in the next chapter. This is followed by a chapter that establishes the goal of DBT as balancing acceptance of emotional problems and pain with specific skill strategies to change them. The author then illustrates the generalizability of DBT by applying it to various mental disorders outside of the traditional personality disorders. The final 2 chapters focus on the nuts and bolts of the specific skill sets patients need to master in DBT.

Thomas Marra is obviously quite versed in the practice of DBT and has developed an exhaustive list of mnemonics aimed at assisting both clinicians and patients in remembering the specific skills. Typical patient dialects as well as excerpts of therapy sessions illustrating key conflicts are utilized to demonstrate how DBT can be used to understand a wide array of patients. These vignettes make the theory and practical skills much more understandable for the reader. Furthermore, the extensive citations to authority and research studies examining DBT across the mental health spectrum make the book a valuable addition to a reference library. However, these citations and instructional comments render the text quite dense and thus not appropriate for patients or individuals who want a brief introduction to DBT.

Perhaps one of the greatest assets of the book is that Dr. Marra has included a CD-ROM with PowerPoint presentations for all of the key modules, which are turnkey for those interested in implementing a group therapy component. This CD-ROM also provides worksheets and handouts for individual therapy sessions aimed at skill building. Although the PowerPoint slides appear “homemade,” lacking slick graphics or animation, and carry an admonition that they cannot be changed or adapted by the purchaser, for the novice therapist they serve as an invaluable starting point. The countless hours of preparation they save make it possible to initiate a DBT program with only minimal additional outlay in terms of materials and are well worth the price of the text.

**Christopher C. White, M.D., J.D., F.C.L.M.**
University of Cincinnati
Cincinnati, Ohio

---

*Editor’s Note: The following reviews by Dr. Andrade are not of “professional literature” but are of books that we believe would be of great interest to our readers. We encourage submissions and will publish from time to time a limited number of such reviews.*

**The Leap**
by Jonathan Stroud.

Teenagers Max and Charlotte are in love. Then, Max is taken away by spirits from another world, and Charlotte narrowly escapes their clutches. To the outside world, Max has drowned, and Charlotte (Charlie) is overcome with grief. *The Leap* is a tapestry of fantasy that describes how Charlie comes to terms with her loss.

Jonathan Stroud is better known for *The Bartimaeus Trilogy*, a series that surpasses J. K. Rowling’s books in literary skills and imagination. *The Leap* is not in the same class as the *Bartimaeus* books, and those with television-habituated attention spans may even find the tempo slow; yet, *The Leap* is a sensitive story that will captivate the cultivated reader, especially one with an interest in the psychological themes.

What psychiatric diagnosis should Charlie receive? Different readers will have different opinions, and the diagnoses could easily range from complicated grief to a psychotic illness. It matters little; even if the book is dismissed as fantasy, which indeed it is, the book vividly brings to life the anguish that the protagonist experiences in the pursuit of an increasingly elusive hope in a world that is becoming increasingly unreal.

Of equal interest is the portrayal of the anxiety in Charlie’s family as her contact with reality deteriorates.
First- and third-person narratives alternate between Charlie and her brother Jamie as the angst in each escalates in a reverberating loop. It is Jamie who reads Charlie’s secret diary, Jamie who rescues her during a fugue state, and Jamie who is the witness when Charlie appears to contemplate suicide at the climax of the book.

There are long passages that detail the responses of mental health professionals to Charlie and her symptoms. Although the clinicians are clueless about the mystery in the plot, they react with complete competence and concern. This portrayal is a reassuring change from books that depict the profession of psychiatry as bumbling and regressive.

Even if the genre is fantasy, this is a book with which every family with a mentally ill child can empathize.

Chittaranjan Andrade, M.D.
Department of Psychopharmacology
National Institute of Mental Health and Neurosciences
Bangalore, India

The Curious Incident of the Dog in the Night-Time

Most fictional depictions of mental disorders are distorted and pander to, encourage, or even exaggerate popular misconceptions. The Curious Incident of the Dog in the Night-Time is one of the few exceptions. The book presents the story of Christopher, a 15-year-old boy with autism.

The book is written in the first person and has 233 chapters (but this is only because Christopher used consecutive prime numbers instead of consecutive integers to number the chapters). In the first chapter, Christopher describes his discovery of the killing of Wellington, the poodle that belonged to his neighbor, Mrs. Shears.

It was 7 minutes after midnight. The dog was lying on the grass in the middle of the lawn in front of Mrs. Shears’ house. Its eyes were closed. It looked as if it was running on its side, the way dogs run when they think they are chasing a cat in a dream. But the dog was not running or asleep. The dog was dead. 97

The subsequent chapters describe how Christopher tries to find out who killed the dog. There are interesting digressions of all sorts interspersed throughout the text, ranging from astronomy to psychology and from mathematics to physics.

The book brilliantly portrays the mind and behavior of a person with autism without being sentimental or condescending and helps the reader understand the difficulties that such an individual has with information overload, social relationships, and emotional abstractions. The author describes the special school environment in which challenged children study and illustrates autistic responses to stress.

He was asking too many questions and he was asking them too quickly. They were stacking up in my head like loaves in the factory in which Uncle Terry works... I rolled back onto the lawn and pressed my forehead to the ground again and made the noise that Father calls groaning. I make this noise when there is too much information coming into my head from the outside world. 96

The book is entertaining and easy to read. A small downside is that the author never states that Christopher has autism. An uninformed layperson could then miss the message altogether.

This text is recommended to all mental health professionals, especially those who are likely to come into contact with patients with autistic spectrum disorders. Parents who must come to terms with a new diagnosis of autism in an offspring might find Christopher’s story particularly helpful.

The Curious Incident of the Dog in the Night-Time is highly acclaimed and has received the Whitbread Book of the Year Award, the Guardian Children’s Fiction Prize, the Booktrust Teenage Fiction Award, and many others. A caveat is that there are passages that are indelicate in language, as well as themes that are adult in content. Although the book has received several awards for children’s literature, it may not be appropriate for all children in all cultures.

Chittaranjan Andrade, M.D.
Department of Psychopharmacology
National Institute of Mental Health and Neurosciences
Bangalore, India