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**Clinician's Guide to Bipolar Disorder:
Integrating Pharmacology and Psychotherapy**

by David J. Miklowitz, PhD, and Michael J. Gitlin, MD. *The Guilford Press, New York, NY, 2014, 324 pages, \$40.00 (trade cloth).*

Bipolar disorder, as is often said about addiction, is a cunning and baffling malady. It can be very difficult to diagnose, particularly early in its course or in its subtler manifestations, and to treat, because of its protean nature and the fact that the target is so often a moving one. There are, of course, a plethora of good books on this subject: encyclopedic textbooks, exhaustively referenced reviews of psychopharmacologic treatment, and manualized guides to multiple evidence-based psychotherapies, individual, group, and family based. All are written by expert researchers and/or clinicians, and all add to our corpus of knowledge. What sets this work of Miklowitz and Gitlin apart is an emphasis on integrating psychopharmacology and psychotherapy as coequals and essential for maximizing treatment effectiveness and functional outcome. The authors are renowned researchers and clinicians who have collaborated for decades utilizing the knowledge and techniques they so cogently describe.

The authors enumerate 3 key themes to their work:

1. "the treatment of bipolar disorder must be individualized in an ongoing collaboration with each patient" (p 3),
2. "the need to continuously reevaluate a patient's situation—his symptoms, level of improvement, and functional capacity—such that treatment plans can be adjusted accordingly" (p 3), and
3. "family members are integral members of the treatment team" (p 5).

I would add an implicit fourth theme: the necessity of taking a longitudinal approach for each patient that is both personalized and tailored to the patient's stages of illness, from acute through maintenance to the goal of recovery. Specific chapters address these stages and somatic and psychological interventions for each. Throughout the text are clinical vignettes that help illustrate how

the authors have applied these concepts and recommendations that enliven the book and will resonate with any clinician who has worked with people who have bipolar disorder.

The book opens with the basics of the phenomenology of bipolar disorder and the bipolar spectrum, followed by a very thorough chapter on the intake evaluation. In addition, there are chapters about special situations such as the perinatal period, suicidality, comorbidities, and treatment adherence. I especially appreciated the latter, which is such a common and vexing problem in all of medicine but particularly in bipolar disorder. The text also contains a chapter on resources for both clinicians and patients. Miklowitz and Gitlin display how blended treatment works for them through case examples as well as comment explicitly about the nuances of the points of view of those who prescribe medications and those who provide psychotherapy and how best these providers can work together. I found this aspect of the book very well thought-out and valuable. The research literature is cited to be representative, not exhaustive, minimizing footnotes and making the book more readable. Where the evidence base ends, the authors render opinions based on best practices and their formidable experience.

This is as comprehensive a primer on bipolar disorder as one can find. It is well written by just 2 authors, leading to a uniformity of tone and lack of redundancy. It uniquely addresses blended treatment from the perspective of both a psychotherapist and a psychopharmacologist. If a clinician-in-training were to read only 1 book about this topic, they couldn't do better than this one, and even seasoned clinicians would learn much from it, as did I.

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