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Gabbard's Treatments of Psychiatric Disorders, DSM-5 Edition, 5th ed

edited by Glen O. Gabbard, MD. American Psychiatric Publishing, Arlington, VA, 2014, 1,140 pages, \$199.00 (hardcover).

Glen O. Gabbard's *Treatments of Psychiatric Disorders, Fifth Edition*, remains at the forefront of reference guides for clinicians interested in evidence-based approaches to the treatment of patients with psychiatric illnesses. Of note, the publication of this edition was purposely postponed so that the treatment summary would correspond with the diagnostic nomenclature of the *DSM-5*. Nevertheless, while the edition uses *DSM-5* diagnostic criteria, the evidence behind these treatment recommendations was developed from research designed within the context of *DSM-IV*.

The book is divided into 12 parts, each of which includes a series of disorders and related conditions, totaling 73 in all. Each part has a separate editor, and individual chapters were authored by leading clinicians and scientists in each area. Chapters are usually well organized, logical, and easy to navigate. Although sections may vary from chapter to chapter, general examples of areas covered include "Treatment Outcome Studies," "Pharmacotherapy," "Psychotherapy," "Adjunctive Treatment Modalities," and "Emerging Treatments," allowing for ease of use when looking for a particular reference or category of treatment. In addition, most chapters feature excellent reference tables, which frequently include major research studies and meta-analyses that provide evidence for the various treatment modalities for a given psychiatric disorder.

Parts I–IV

Part I, entitled Neurodevelopmental Disorders and Elimination Disorders, provides an overview of the complex, multidisciplinary evolution of psychiatric disorders in infancy, childhood, and adolescence. Notable highlights in chapter 1 include the shift in the identification of intellectual disability to an Axis I disorder as a result of the elimination of the multiaxial system in *DSM-5*. It is also important to note that the chapters on communication disorders and elimination disorders are entirely new to this edition. Communication disorders have been restructured in the *DSM-5* in order to parallel the classifications of these disorders designated by the American Speech-Language-Hearing Association and *ICD-10*. The chapter on elimination disorders focuses on disorders of urine and feces elimination as well as the evaluation and management of enuresis and encopresis.

Chapter 3 focuses on autism spectrum disorder, an umbrella designation that subsumes prior categorization in the *DSM-IV* of more discrete autism subtypes. This chapter highlights meta-analytic reports of autism treatment research outcome studies and summarizes findings in an easy-to-reference table. Another important section in this chapter provides a review of non-evidence-based treatments, such as auditory integration therapy, sensory integration, music therapy, animal therapy exercise, and massage therapy, all of which have not been empirically supported and/or have mixed reviews regarding efficacy.

Chapter 4, "Attention-Deficit/Hyperactivity Disorder (ADHD)," includes a table that lists all FDA-approved medications used in the treatment of ADHD and is an excellent and succinct reference for basic information on these medications. A useful adjunct would have been the inclusion of dosing guidelines.

Part II, Schizophrenia Spectrum and Other Psychotic Disorders, reviews the modest changes in *DSM-5* with respect to

these conditions, most notably the elimination of schizophrenia subtypes. In the "Early Stage Schizophrenia" chapter, there is an excellent table summarizing major studies of antipsychotic medications in first-episode psychosis. Perhaps the most striking feature of part II of the fifth edition is the emphasis placed on cognitive and psychosocial treatments of psychotic disorders, given the efficacy of these treatments in the setting of optimal psychopharmacologic management, which has led to increasing support for "plasticity-induced, use-dependent approaches for altering disease manifestations."^(p128) Chapter 10, "Psychosocial Treatment for Chronic Psychosis," provides a summary of the evolution of psychosocial treatments.

Part III, Bipolar and Related Disorders and Depressive Disorders, outlines several advances in both psychopharmacologic and nonpharmacologic treatments. Some of these advances include the emergence of new antidepressants (such as transdermal selegiline and vilazodone) and the use of nutraceuticals (such as L-methylfolate, N-acetylcysteine, and S-adenosylmethionine); data from multiple controlled trials supporting the short- and long-term use of several second-generation antipsychotics in mood disorders *without* psychotic features; and the expansion of new forms of brain stimulation (such as low-field magnetic stimulation and repetitive transcranial magnetic stimulation). There is a discussion of novel agents under study that target different neurotransmitters, including the antiglutamate drug ketamine. There is also a review of newer medications that may alleviate associated comorbid symptoms in mood disorders, such as gabapentin for anxiety and topiramate for binge eating.

Part IV, Anxiety Disorders and Obsessive-Compulsive and Related Disorders, reviews major changes in *DSM-5*, such as the subclassification of the various obsessive-compulsive disorders including trichotillomania, body dysmorphic disorder, excoriation disorder (a disorder new to *DSM-5*), and hoarding disorder. Chapter 16, "Panic Disorder," includes the role of benzodiazepines in the treatment of panic, and there is an entire section dedicated to the use of cognitive-behavioral therapy (CBT) to aid in benzodiazepine discontinuation.

Chapter 23, "Hoarding Disorder, Trichotillomania and Excoriation Disorder," reviews treatments for these relatively "new" disorders, including the potential use of selective serotonin reuptake inhibitors, N-acetylcysteine, habit reversal therapy, and other CBT treatments as adapted for use in these conditions.

Parts V–VIII

Part V, Dissociative Disorders and Trauma- and Stressor-Related Disorders, highlights the significant changes from *DSM-IV* to *DSM-5* regarding the diagnostic classification of various dissociative disorders, including the addition of a dissociative subtype of PTSD. The section includes evidence that emotion regulation, cognitive restructuring, and avoidance of danger may be useful adjuncts to the treatment of trauma-related memories with exposure-based therapies (the historical treatment of PTSD). An intriguing new section entitled "Resilience" within the "Adjustment Disorders" chapter discusses the need to better understand the psychobiology of resilience.

Part VI, Somatic Symptom and Related Disorders and Eating Disorders, reviews the reclassification of this section and includes binge-eating disorder as a specific diagnostic entity. This section highlights behavioral treatments and other CBT modalities.

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Part VII, Sleep-Wake Disorders, has been reorganized to reflect new diagnostic entities in *DSM-5* such as restless legs syndrome and rapid eye movement sleep behavior disorder, in part to reduce the use of “not otherwise specified” as a diagnostic classification.

Part VIII, Sexual Dysfunctions, Paraphilic Disorders, and Gender Dysphoria, includes psychological treatment modalities of female sexual interest/arousal disorder (FSIAD), a new diagnostic entity in *DSM-5*. Theoretical biological treatments for FSIAD are also reviewed.

Parts IX–XII

Parts IX–XII are Disruptive, Impulse-Control, and Conduct Disorders; Substance Related and Addictive Disorders; Neurocognitive Disorders; and Personality Disorders. The specific chapters within the sections cover different areas depending on their relevance to a particular condition. For example, for the impulse-control disorders, neurobiology and pharmacotherapy are reviewed along with psychosocial treatments, changes from *DSM-IV* to *DSM-5*, and the various comorbidities. For disorders involving children, such as oppositional defiant disorder and conduct disorder, recommendations for multisystemic and family therapy are included along with discussions of the diagnostic criteria and pharmacotherapy.

Part X, Substance Related and Addictive Disorders, provides a comprehensive review of the new diagnostic criteria (the elimination of abuse and dependence categories primarily) along with a listing of the multiple comorbid conditions that can be associated with substance abuse. There is an excellent table reviewing the clinical activity, patient characteristics, precautions, and adverse effects of the various antidipsotropic pharmacologic treatments, as well as protocols for detoxification, and clinical management in various settings as well as types of approaches such as abstinence. An entire chapter is devoted to antagonist treatment of opioid-related disorders, and subsequent chapters are devoted to the treatment of specific addictions such as those related to cannabis, club drugs, hallucinogens, nicotine, and stimulants, among others. This section includes chapters on individual therapy for substance use disorders

as well as group, network, and family therapy and motivational interviewing. A separate chapter addresses pain and addiction as a specific topic.

Part XI reflects the reclassification in *DSM-5* of delirium, dementia, and other disturbances of cognition and includes an overview of the various neurocognitive disorders and delirium. There are separate chapters on different causes of dementia such as Alzheimer’s and Parkinson’s diseases, frontotemporal neurocognitive disorder, and vascular neurocognitive disorder.

Part XII summarizes the controversial decision to retain the personality disorders section as it exists in *DSM-IV*. Specific chapters review the characteristics of the various personality disorders along with specific treatment modalities such as individual psychotherapy, group psychotherapy, CBT, and pharmacotherapy, as well as treatment challenges. The chapter on borderline personality disorder includes a comprehensive review of current evidence-based treatments. Other chapters include discussions of psychological defenses, object relations, and affects as they relate to each personality type.

In summary, *Treatments of Psychiatric Disorders, DSM-5 Edition*, edited by Glen O. Gabbard, is a thorough, comprehensive overview of the current diagnostic classification system and the state of the field with regard to the understanding of phenomenology and treatment options in psychiatry. It is a valuable reference resource that can serve as a useful guide for every practicing clinician in the mental health field.

Kristin Gill, MD
Lori Bennett-Penn, MD
Carol A. Bernstein, MD
 carol.bernstein@nyumc.org

Author affiliation: Department of Psychiatry, New York School of Medicine, New York.

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