edited by AndréS Martin, M.D., M.P.H., and Fred R. Volkmar, M.D. Wolters Kluwer/Lippincott Williams and Wilkins, Philadelphia, Pa., 2007, 1088 pages, $199.00 (hardcover with online access included).

The latest edition of Lewis’ historic textbook on child and adolescent psychiatry is both modern and classic. By renaming the text with the name of its founder, editors AndréS Martin and Fred R. Volkmar honor the late Melvin Lewis and pay tribute to the iconic nature of this evolving textbook. Melvin Lewis, editor of the previous 3 editions, has left us with a compilation of information prized by many practitioners. Following monumental shifts in the field, each edition has risen to the challenge of simultaneously providing historic continuity and cutting-edge, up-to-date science. In the fourth edition, Martin and Volkmar continue this tradition with finesse and sensibility.

Like modern-day electronic devices, the volume has slimmed down considerably while at the same time remaining thorough in this age of rapidly increasing knowledge. At first glance, the volume appears so slight that one wonders whether concise is a better descriptor than comprehensive. However, delving into the text reveals a thoughtful and complete treatment of the subject. Through the use of streamlining, modern editing techniques, and the available online version, the editors provide a manageable yet thorough text. Each page is packed full of valuable information, with judicious use of figures and diagrams. Some chapters from previous editions have been whittled down and a few cut out altogether. For example, there is now only 1 chapter on psychoanalytic psychotherapy, and the section on normal childhood development has been trimmed significantly. Although some readers of previous editions will lament the loss of detail on these topics, others will appreciate the careful treatment of these subjects as well as the more prominent placement of modern evidence-based practices such as cognitive-behavioral therapy. The availability of a searchable online version of the text is welcomed and has allowed the editors to seriously trim the index. Overall, topics are covered with sufficient depth and detail to satisfy the vast majority of practitioners interested in the art of child and adolescent psychiatry.

In a significant departure from its predecessor, which led off with a detailed section on normal development, the fourth edition begins with a section titled, “An Approach to the Discipline.” This section covers such diverse topics as the history of child psychiatry, ethics, money, and international issues and gives the reader an organizing framework for the field as a whole. Following this is a basic-science review of child psychiatry including research issues, epidemiology, genetics, neuroimaging, and neurochemistry. The section on normal development is slimmer and relegated to the third section. Nonetheless, it is a well-written, useful overview of the topic. The sections on diagnostic assessment, specific syndromes, and treatment cover the topics thoroughly and include excellent and concise discussions of modern controversies including antidepresant use in children and childhood-onset bipolar disorder. The text concludes with detailed discussions of the role of child psychiatry in consultation to pediatrics, schools, and the courts.

Lewis’s Child and Adolescent Psychiatry: A Comprehensive Textbook should be an integral part of the library of any practitioner involved in the evaluation and treatment of children and/ or adolescents. It is a comprehensive yet readable overview of child psychiatry, ideal for medical students and general psychiatry residents interested in the field. Child psychiatry residents will find the text invaluable as a reference and in preparation for the board examinations. Established child psychiatrists will benefit from an updated and comprehensive review of the field that is quick and easy to access. Finally, by providing an organizing framework that maintains a focus on child development, this text will aid practitioners in many allied fields, including social workers, psychologists, counselors, pediatricians, and pediatric specialists.

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Clinical Handbook of Psychotropic Drugs, 17th revised ed.

As the practice of psychiatry in the new millennium incorporates ever more sophisticated biological treatments into the classical therapeutic paradigm, the font of new information can deluge busy practitioners. Here is a timely text that serves as a flow valve, providing the reader a quick, fact-filled reference. Into a spiral binder that hearkens to our earliest educational primers, the editors have organized a wealth of information. The book is divided into chapters on traditional medication classes (e.g., “Antidepressants”) and clinical indications (e.g., “Agents for Treating Extrapyramidal Side Effects”) as well as other somatic treatments (e.g., “Bright-Light Therapy”). The editors update the prior edition through continuous review of the published literature that spans basic science data, controlled clinical trials, and, when applicable, the clinical expertise of the editors and readers. Indeed, readers. The editors welcome critical input to the content and format.

The format succeeds as a user-friendly reference through easy-to-read tables, charts, and bulleted prose; the chapters are tabbed to aid quick access. Nothing is lost to fine print or interpretation as information is presented in a large font and landscaped (horizontal layout). Subsections for each particular agent or treatment separate the information into practice-based categories, including “Indication,” “Pharmacology,” “How Supplied,” “Dosing,” “Pharmacokinetics,” “Contraindications,” “Precautions,” and “Toxicity” as well as specific management situations, including “Pediatric Considerations,” “Geriatric Considerations,” “Use in Pregnancy,” and “Nursing Implications.” Large tables reference critical information for prescribers about adverse effects and drug interactions.

Chapters include evidence-based augmentation strategies, clinical cautions regarding switching agents, and more in-depth review of neurotransmitter effects. The editors adopt a clinical strategy throughout the text that provides comparison of various agents for a given condition, e.g., a comparison of different benzodiazepines in the treatment of anxiety. Beyond the scope of approved treatments, the editors tackle off-label uses of many other drugs including anticonvulsants, adrenergic agents,
and hormones. Data regarding over-the-counter agents (e.g., "Herbal and ‘Natural’ Products") are included in recognition of their increased use and impact on providers’ therapeutic interventions. The text includes a glossary and suggested references (subdivided by chapter heading) that the reader can further explore.

Additional strengths of the book include (1) integrated references to a companion book by the editors, Clinical Handbook of Psychotropic Drugs for Children and Adolescents,1 for in-depth review of pediatric considerations, and (2) sample pages of “Patient Information” for 31 different treatments; these pages can be copied for patients and give answers to commonly asked questions, such as, “What is the drug used for?” “How quickly will it start working?” “What side effects may happen?” and “Is this drug safe to take with other medications?” More importantly, these pages prompt the questions that were not asked.

The book is suitable for the busy practicing psychiatrist, and the aim of the editors, themselves pharmacologists, is to aid an even wider range of readers. It is a valuable reference for pharmacists, advanced practice nurses, residents in psychiatry, medical students, researchers, and other professionals allied to psychiatry. The handbook is easy to use, comprehensive in scope, and up to date—a winner!

REFERENCE


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The Rosetta Stone of the Human Mind:
Three Languages to Integrate Neurobiology and Psychology

Dr. Sanguineti has been involved in scholarly studies on consciousness, subjectivity, and modern neuroscience for more than a decade. A clinician, founding member of the Philadelphia Jungian Professional Club, and editorial board member of the journal Neuropsychiatry, his most recent book does many things brilliantly. This book is aimed at psychiatrists, psychoanalysts, and neuroscientists.

Curiously, and appropriately, the book begins with 4 elegant forewords from scholars of diverse scientific fields representing (1) the departments of psychiatry, neurobiology, pharmacology, and biotechnology; (2) the departments of mathematics, informatics, and mathematical modeling; (3) the department of critical and cultural studies; and (4) an institute of advanced spiritual research.

For starters, Dr. Sanguineti presents a succinct history of theories of the mind from the Edwin Smith papyrus to Plato, Galen to Descartes, Kant, Freud, and Jung. Next, he provides a quick summary of neuroscience advances from William James, Sherrington, and Hebb. Then, he gives an overview of relevant works on how the brain gives rise to consciousness according to molecular biologist Gerald Edelman and neurologist and neuroscientist Antonio Damasio.

In order to help readers begin to understand the mind, the author explains that there are 100 billion neurons in the brain, with 10,000 to 100,000 synapses per neuron, or a potential for 1010 assemblies, each of which can be organized differently per each experience. This leads to a hyper-immense number of configurations (which is greater than the number of atoms in the universe multiplied by the age of the universe in picoseconds). With such numbers, linear Newtonian physics may not readily apply, thus the need for either quantum or nonlinear physics. Simply put, the brain is a highly complex, nonlinear, and parallel information processing system. Fortunately, the author introduces these concepts in clear terms for the non–mathematically inclined.

Sanguineti tries to help the reader get beyond William James’s statement, made more than a century ago in his Principles of Psychology, in which he characterized the mind-brain enigma: “Thought stuff is different than atom stuff.” Hence, Sanguineti introduces the reader to the theories of consciousness from the perspective of 2 neurobiologists, Edelman and Damasio. Nobel laureate neuroscientist Gerald Edelman’s findings of developmental selection (neural Darwinism) are associated with strengthening of joint firing by neurons. Experiential selection leads to synchronization of activities in the neural network of different brain mechanisms. As Edelman put it, “Thought is a materially based process but is, itself, not material.” Underscoring the complexity of having to interface simultaneously a biological domain and a cognitive domain, Edelman’s primary focus is on neural buildups, some of which then emerge into consciousness. Edelman also postulates that islands of activity in the thalamo-cortical system may coexist with the core, influence its behavior, and yet not be incorporated into awareness. As such, Sanguineti the psychoanalyst uses Edelman to help us see the underpinnings of what we call the unconscious.

In contrast to the bottom-up model of Edelman, Damasio the neurologist approaches the biological basis of the mind in a 2-step, top-down process. In the Damasio model, affectivity plays a major role. The primary level of organization is a coherent collection of neural patterns that map, moment by moment, the state of the physical structure of the organism in its many dimensions in a multiplicity of sites, from the brain stem to cerebral cortex by way of interconnected neural pathways. In order for selected bits from this neural pattern to emerge into a mental pattern, there is processing of data from the hypothalamus as well as the insular and somatosensory 2 cortices. Interestingly, the role of the cerebellum and the hippocampus differs in the Edelman and the Damasio models.

Both Edelman and Damasio envision a primary consciousness and a higher-order consciousness (including a sense of self and an ability to construct and connect past and future scenes), i.e., the consciousness of being conscious. How did consciousness emerge? Perhaps it evolved with the advantage that humans could know life.

This book is not for light summer reading at the beach. The prose is clearly put and the numerous footnotes are often fascinating. My copy is now full of underlinings, dog-eared pages, and elliptical notes, and I have had to do much rereading.

The first 11 chapters would be a good text for an 11-week seminar for nonspecialists, while the last 2 chapters, on the psychotherapeutic dialogue and intersubjectivity, plus the role for the psyche upon society and culture, seem targeted at a psychoanalytic audience.

In summary, this book focuses on the 3 languages used to describe scientific approaches to the understanding of consciousness. The first language is that of physics and mathemat-
ics, with its linear system of rules. The other 2 languages relate to nonlinear systems of neuropsychobiology: similar languages but with “different alphabets.” There is the objective, observer-related language of neurobiology and neurology, which focuses on neural patterns that come into awareness. Then there is the subjective language of the psychology of the individual mind. These 3 languages support each other in conveying information about the conscious and the unconscious mind. Hence, the metaphor of the Rosetta Stone (with its 2 languages and 3 different alphabets) is indeed applicable.

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Clinical Handbook of Psychotropic Drugs for Children and Adolescents, 2nd revised ed.

The first edition of this handbook was based on the very successful Clinical Handbook of Psychotropic Drugs by the same editors, currently in its 17th edition. It gave a concise overview of child psychiatric disorders and treatment, followed by a series of chapters describing the different drug classes, including indications for use, available drug strengths, dosing, pharmacokinetics, adverse effects, contraindications, and even a chapter on herbal products. It stood out thanks to its format, ease of use, and practicality.

The current edition not only is updated, it also underwent a cosmetic change. While the first edition was clear, concise, and easy to use, the editors were able to significantly improve the current edition by changing font, background colors, and layout. The most obvious layout change is the movement of paragraph headings from the text body to the margin. This change provides a cleaner look, but more importantly, it allows users to quickly find what they need by just scanning the margin rather than searching for subheadings in the text body.

Another improvement is found in the table of contents, in which the first chapter, “Psychiatric Disorders in Children and Adolescents,” is now subdivided by DSM-IV-TR disorders, making it easier for the user to find a description of a specific disorder in the text. The content of this chapter has significantly improved thanks to the addition of prevalence statistics and updated treatment options, while at the chapter’s end, one now finds a section of references and selected readings that was previously found at the end of the book.

Other improvements include, in the chapter on psychostimulants, separate tables with dosing schedules for short- and long-acting preparations, as well as a helpful paragraph with pretrial and ongoing monitoring guidelines. This addition can also be found in subsequent chapters. In the antipsychotics chapter, a section titled “Other Uses” was added. The latter is helpful since antipsychotics are frequently, and not always judiciously, used off label. The editors also chose to include antipsychotics in the list of available medications in the chapter on mood stabilizers. This was a prudent decision—most antipsychotics are approved for use as mood stabilizers in adults, while aripiprazole recently received U.S. approval for use in adolescent bipolar disorder and other applications for approval are pending.

Still missing from the chapter on drugs of abuse is a paragraph on dextromethorphan hydrobromide, a compound found in many over-the-counter cough medications such as Coricidin (Triple C). Due to ease of access, it is widely abused by adolescents and is, in combination with other ingredients found in the cough medicine, potentially lethal.

In summary, the editors have succeeded in improving on their first edition, already a “must have” for those prescribing psychotropic medications in children and adolescents. It remains by far the most user-friendly and comprehensive handbook available for prescribers, teachers, students, and others working or interested in the field of child and adolescent psychopharmacology.

REFERENCES


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