Beginnings: The Art and Science of Planning Psychotherapy

Beginnings is an ambitious and, for the most part, highly successful effort to describe a process approach system of diagnosis and treatment planning using universal variables and resulting in a “therapy specific formulation.” As such, the work is consistent with the current movement toward integrative and multimodal therapies that are based on researchable phenomena, are less reliant on theory, and are more compatible with the patient’s learning style. The author joins other current voices in calling for a paradigm shift in psychotherapy efficacy research away from defining techniques for particular symptoms and toward principles of therapeutic efficacy that cut across theoretical lines.

Beginnings emphasizes the importance of encouraging patient activity and collaboration in the formulation process and of paying ongoing attention to the alliance between therapist and “impatient” (a nice take on the semantic struggle of “client” versus “patient”). The desired result of this process system is a therapy that is case specific and extends beyond symptoms to address the underlying disturbance, which is seen as 1 of 4 types: deficit, characterologic dysfunction, conflict, and trauma. A chapter is devoted to each in an especially effective middle-book sequence. These conceptualizations allow the therapist, argues Peebles-Kleiger, to know where to begin, how to involve the patient, and what factors could interfere with or interrupt the work.

Beginnings’ greatest strength may be its research base, but this may also be seen as the work’s most problematic aspect. The author, whose background of training is in several disciplines, including both biofeedback and psychoanalysis, attempts to be comprehensive. In so doing, she sometimes ranges beyond the realm of what is typically understood as psychotherapy into any therapeutic armament, for any condition that one might encounter, for which there is a research base. The author index contains over 600 names, and there are over 500 references, which makes the book a valuable resource; the reader will find a wealth of direction to the literature (e.g., the neuropsychobiology of complex trauma, hardness factors and positive psychology, the psychophysiology of attunement). The reader may, however, find this a bit overwhelming and react by feeling the need to narrow rather than broaden his/her individual scope of practice. Few, if any, clinicians will have a working knowledge of all the techniques discussed by the author (e.g., neurofeedback training for alcoholism and attention-deficit/hyperactivity disorder) or the facilities available to apply them. In fact, the author notes, regarding mediating severe reaction to the anatomy behind these categories explains how one stand the different types of memory—episodic and semantic, procedural and declarative, implicit and working. An introduction to the anatomy behind these categories explains how memory problems vary depending on which brain region is affected.

For reasons cited above, the intended readership of this overall quite remarkable book is unclear. Some sections (e.g., the chapter on history taking) will be of considerable value to a beginning therapist such as a resident in psychiatry. Alternatively, the experienced clinician will find the book a research-based roadmap to the wide variety of conditions encountered in a “take all comers” practice setting. Perhaps there is a problem with the title. A more descriptive, albeit impossibly long, title might be, “Beginnings: The Art and Scientific Basis of Optimal Initial Treatment Planning for (Im)Patients Encountered in a Mental Health Practice Setting.” Perhaps the ideal audience includes the advanced student of psychosocial treatments and teachers and supervisors of psychotherapy.

Beginnings is a challenging, thought-provoking, and forward-thinking work. It rewards study, and the author deserves thanks for the scholarship.

James L. Nash, M.D.
Vanderbilt University School of Medicine
Nashville, Tennessee

Memory Disorders in Psychiatric Practice
edited by German E. Berrios, and John R. Hodges. Cambridge University Press, Cambridge, United Kingdom, 2000, 520 pages, $64.95 (paper).

Memory is at the core of human experience. Without it, we are not ourselves. It is thus surprising that teaching the science of memory is not central to psychiatric clinical training. Now comes a book that fills holes for those of us who need either an introductory or a refresher course on this important topic.

Berrios and Hodges gathered an international group of scholars on the subject of memory who produced 23 papers on topics ranging from the history of memory studies to the impact of memory disorders on the legal system. In between are chapters that cover the mechanisms of memory, the proper evaluation of memory complaints, the subjective experience of memory, and the relationship between memory and psychiatric illness.

Memory is a fine lens through which to view our field. It is the organizing point of view for the book. The editors outline the issues—scientific and semantic. They give us information about modern concepts of memory derived from neuroscience. We are brought up to date on the latest ideas about how memory is encoded, stored, and retrieved. We are also helped to understand the different types of memory—episodic and semantic, procedural and declarative, implicit and working. An introduction to the anatomy behind these categories explains how memory problems vary depending on which brain region is affected.

The book contains much practical information. The sections on common problems like dementia and the pseudodementia of depression are comprehensive. On narrower topics, like amnesia or subjective memory complaints, it would be hard to find a
more detailed reference. The chapters devoted to the history of memory science make appealing reading. Any topic you can think of in connection with memory is given attention in this book, including déjà vu, jamais vu, confabulation, flashbulb or flashback memory, dissociative amnesia, recovered and false memories, and functional memory complaints.

A first-rate chapter is devoted to the work of a multidisciplinary memory clinic. Though few of us are in this business, much here is useful for general practice, including a description of the use of self-reports, objective measures, and family reports; the evaluation of IQ; and the clinical description of different types of memory impairment.

Instruction about how to conduct a comprehensive evaluation leads to better treatment; the treatment of memory difficulties is also thoroughly reviewed. Readers will find a helpful description of the neurochemical basis of memory and practical strategies for the pharmacologic enhancement of memory. Rehabilitation is also discussed. Recommendations about how patients should be taught are based on knowledge about how the brain learns. Evidence is presented for the kinds of practice routines that best facilitate the attainment of new memories and new skills. Where the brain's function is limited, there is advice about how to help a person adapt to memory loss.

As in many edited books, this volume does read more as a collection of papers than as a unified work. There is not much hand-holding provided to the reader, so it requires jumping in at the deep end to get the most out of it. Readers are more likely to use it as a reference than to read it straight through. One does sometimes wish for livelier prose. But the book is replete with valuable information and resources, including an extensive bibliography at the end of each chapter. The editors have provided a fitting companion for the clinician looking for a memory aid.

Michael Craig Miller, M.D.
Harvard Medical School
Boston, Massachusetts

Brain Circuitry and Signaling in Psychiatry: Basic Science and Clinical Implications

Experts in neuropsychiatry, who are already knowledgeable about the material in this book, have given high praise for its accuracy and comprehensive coverage. Their opinion is reassuring only if the book is also useful to someone who has an elementary knowledge of the material. For a clinician dedicated to keeping up with current concepts in diagnosis and treatment, the primary literature on circuits (neuronal pathways) and signaling (inter- and intracellular biochemistry) is generally too daunting to digest because of its complexity and frequently conflicting data sets. This book is comprehensive without being daunting; it does not assume that you know the difference between the accumbens and the amygdala and where they meet. It explains it all—gently. For research fellows in training, or an advanced course in residency, this could be an excellent source book. For a clinical researcher dedicated to a relatively confined area, this book concisely and clearly explains the other 95% that we wish we knew as well as our own area. It’s all in here. This volume will be a timely addition to a clinician’s or researcher’s desk library. It has become an essential companion to my daily reading time, helping me keep straight on the paths of the midbrain and basal forebrain. Without a similar reference to slightly simplify and clearly explain the basic relationships between structure and function, it is difficult to assemble and maintain perspective on the rapidly expanding intricacies of information processing in the brain.

This volume achieves its educational goals admirably. As part of the Progress in Psychiatry series, it provides a portal through which people who are not deeply immersed in an area can access the informative discussions of intensive meeting symposia. The writing style maintains an exciting, consistent, and densely compact but balanced approach to the presentation of an enormous amount of information without becoming pedantic or dry. The editors have organized a collection of spirited, exciting descriptions of our current knowledge that are highly relevant to clinical practice and understanding current research.

There are 8 chapters in total. The chapter contributors, all leaders in their areas, give the insiders’ views with zeal. A few top authors can’t be singly extracted to mention here (the list would be too long). Two introductory chapters, respectively on “Neural Circuitry” and “Neural Signaling,” provide the roadmaps for the subsequent diagnosis-focused chapters. Each of the clinical chapters is uniformly structured, which makes it easier to incorporate and compare the information. Within each chapter there is always a first section subtitled “Clinical Presentation,” which summarizes our complex diagnostic views of each disorder. Clinical situations are discussed in a real-world context, not one that is confined to an ivory-tower view of non-existent, idealized constructs. The clinical picture is followed by “Neural Circuitry” and then finally by “Signaling Pathways.” The literature relevant to the pathophysiology of each disorder is described with helpful commentary.

The clinical chapters are titled, “Schizophrenia,” which covers mechanisms of psychosis; “Addiction,” which includes compulsive practices (e.g., eating, sex, and Internet browsing, but not reading psychiatry literature); “Anxiety,” which presents the most coherent data on panic disorder, posttraumatic stress disorder, and obsessive-compulsive disorder; “Depression,” which stresses unipolar major depression; “Bipolar disorder,” which reviews data unique to actions of lithium and anticonvulsants on intracellular signaling pathways; and finally “Dementia and Alzheimer’s disease,” which presents a groundwork for understanding an extremely complex group of pathological events that contribute to the clinical assessment and treatment of the major dementing processes.

I would recommend this book to anyone who knows how to use a 40-page index. What I mean is that this book is extremely useful, not only for concerted study, but as a way of seeking clarifications as one is wading through an Archives of General Psychiatry article. There are about 180 pages of actual text, including the ample, carefully selected illustrations that depict all levels of concepts. The text marks one major literature citation at a time, usually at the end of paragraphs, in a way that is not disruptive to the reader’s eye. The literature citations ending each paragraph total about 48 pages. All this is to say that if a helpful guide to neuropsychiatry is needed, here it is. No fear factor, just clarity and accuracy in a compact handbook, written so well that any amygdala will be pleased.

Ronald M. Salomon, M.D.
Vanderbilt University School of Medicine
Nashville, Tennessee