CBT for Psychosis: A Symptom-Based Approach

edited by Roger Hagen, PhD, PsyD; Douglas Turkington, MD; Torkil Berge, PsyD; and Rolf W. Gråwe, PhD, PsyD. In book series: The International Society for the Psychological Treatments of the Schizophrenias and Other Psychoses. Routledge/Taylor & Francis, New York, NY, 2011, 278 pages, \$130.00 (hardcover), \$35.99 (paper).

This volume is one in a series of books sponsored by the International Society for the Psychological Treatments of the Schizophrenias and Other Psychoses. A large number of the chapters were published in 2007 by the *Journal of the Norwegian Psychological Association* and have been updated, and new chapters have been added. Many of the chapters' contributors are distinguished leading international experts in the area of cognitive behavioral therapy (CBT) for psychosis. Topics range from the understanding and treatment of psychotic symptoms using a cognitive behavioral approach, assessment and formulation of psychotic symptoms using a dimensional approach based on discrete symptoms rather than a strictly *DSM* diagnostic approach, CBT for specific comorbid conditions, and CBT for bipolar disorder. Because the book is an edited work, there are inevitable redundancies and overlap among the various chapters.

The content of CBT for Psychosis follows a logical progression in learning about the subject and is divided into 4 parts, each focusing on different aspects. Part 1 discusses the cognitive models of psychotic symptoms and their assessment, including an update on the cognitive models of auditory hallucinations and delusions. Part 2 focuses on how to treat psychotic symptoms using CBT, including the important issue of early intervention in the treatment of psychotic disorders. A strong emphasis is placed on the establishment of a therapeutic alliance between the patient and therapist as a crucial first step in the treatment process, as is emphasized by other psychological therapies. At the core of the alliance is the degree to which the patient and an empathic therapist are engaged in collaborative goal-oriented work. Part 3 discusses CBT for comorbid conditions such as substance abuse and trauma and how CBT can be tailored to work with families and employment. Part 4 concentrates on CBT for bipolar disorder, focusing on the importance of understanding bipolar symptoms and their underlying mechanisms in psychological terms. Throughout the book, case examples are presented that help illuminate the issues presented.

There has been a trend in the United States toward downplaying the importance of psychological therapies for psychotic individuals and relying solely on pharmacotherapy, with its limited benefits on outcome. While much future research is needed, this volume points out that available evidence indicates that CBT can be of benefit for seriously mentally ill patients through reducing distress related to maladaptive beliefs and behaviors and enhancing coping skills by providing new skills. It is a treatment that can be widely adopted and readily taught and, in the long run, may be more cost-effective than pharmacotherapy alone. To some extent, this book's orientation is psychological therapy versus pharmacotherapy, while the key issue should be the integration of these modalities in a comprehensive treatment approach.

Mental health professionals and administrators who are involved in the treatment and management of psychotic individuals would profit from reading this volume.

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