Psychological Aspects of Women’s Health Care: The Interface Between Psychiatry and Obstetrics and Gynecology, 2nd ed.  


Psychological Aspects of Women’s Health Care, 2nd edition, is an extraordinarily readable, scholarly, and comprehensive resource book, updated from the classic 1993 edition. You will want to have this book in your own library and recommend it to hospital and university libraries. You will want to use this book to inform medical students, residents, primary care physicians, nurses, psychologists, social workers, and other health care providers who may wish to have it in their own libraries. Here is why.

The 28 chapters in this book are the products of cross-fertilization of 34 faculty and specialists from 22 different settings in the United States and Canada, edited, introduced, and contributed to by psychiatrists who are experts in the interface between psychiatry and obstetrics and gynecology. This edition has 3 new chapters and 6 new authors.

The book is divided into 3 sections:

Pregnancy:
“Normal and Medically Complicated Pregnancies,” “Fetal Anomaly,” “Psychiatric Disorders During Pregnancy,” “Psychotropic Drugs and ECT,” “Adolescent Pregnancy,” “Postpartum Disorders,” and “Prenatal Loss.”

Gynecology:

General Issues:

The overall style of these chapters is quite consistent in that most authors have put the subject of their expertise into comprehensive historical contexts, added recent epidemiologic findings, and contemporized assessments and family/psychosocial, surgical, and pharmacologic interventions. The historical contexts are especially valuable in 2 ways: (1) they expose the reality that many physicians, by choosing to remain behind in a past era, have contributed to the long delay in bringing women’s health care to the forefront, and (2) they help the younger generation realize that the scientific and societal advances in women’s health care have largely been pioneered by women physicians, for women, during the past 2 decades, and that women today are themselves currently the primary contributors to the advancement of women’s research.

One of the new chapters, “Psychopharmacology in Women,” emphasizes advances in gender differences in pharmacokinetics and pharmacodynamics in general and particularly with the newer medications used by clinicians. Another new chapter, “Psychological Aspects of Lesbian Health Care,” gives essential guidance to clinicians to modify their interviews and medical history forms, which are biased toward heterosexual lifestyles, to more neutral language in order to improve access and quality of lesbian health care.

Most authors have referenced their chapters with exceptional care to inform the clinician of evidence-based practices and the many remaining controversies. For example, the chapter “Women and Violence,” with well over 300 references, is encyclopedic; the chapter “Women and HIV Infections” has over 100 references; and the chapter “Alcohol and Substance Abuse,” over 70 references. The author of the chapter “What Is a Minority?” gives the reader a well-balanced international perspective.

The author of the chapter “The Male Perspective” (new author in the 2nd edition) shares his clinical experiences generously, mainly in anecdotal fashion. A male perspective of the impressive increase in numbers of practicing women obstetricians and gynecologists over the past decade, their stressful subjugation to male model practices, the need for women professionals as models and mentors, and the need for true partners at home would have been a very important contribution. The author of the chapter “Collaboration Between Psychiatry and Obstetrics and Gynecology” brilliantly remedies this omission with her most articulate, reality-oriented, and comprehensive overview in which she advocates strongly efforts at collaboration but also questions and clarifies the barriers to collaboration. The many barriers that stand in the way of collaboration in psychiatry and obstetric and gynecologic practice, research, and educational arenas can be partly attributed to the still prevailing economic, political, and professional hierarchies. The clearly conceptualized, well-balanced chapter “Ethics and Women’s Health” reflects the years of dedication the author has given to these issues in her many successful efforts to empower professional women to have improved control over their environment to enhance quality of life. In the chapter “Reproductive Choices and Development: Psychodynamic and Psychoanalytic,” the authors make a valiant effort to modernize concepts of the 1960s, 70s, 80s, and 90s and bring them into the changing lifestyles of the 21st century.

The chapters on pregnancy are outstanding, and each informs with sensitivity and well-referenced clarity. The section on gynecology has the same qualities. The chapter on menopause would be greatly enriched by inclusion of the many post-
menopausal years (for some women half a lifetime!) for which the patient population is rapidly increasing and the research base is slowly growing.

The chapter on gynecologic surgery helps us understand the complex issues of hysterectomies and alternatives and other surgeries our colleagues in gynecology are called on to perform.

With this book nearby as a handy reference to many of the conditions and situations our colleagues in obstetrics and gynecology face, we can be of great help to them and to their patients and families at times in their lives when they ask for our time and expertise.

Marion Zucker Goldstein, M.D.
School of Medicine and Biomedical Sciences
Buffalo, New York

Psychotherapy for Personality Disorders (Review of Psychiatry series, vol. 19)

Personality disorders, once a mainstay of psychiatry, have been relegated to the background. Training programs and managed care companies have focused on Axis I disorders, training rapid symptom resolution and positive prognosis. The carefully researched empirical evidence of the treatment efficacy of personality disorders has been largely ignored. Editors Gunderson and Gabbard remedy this situation with a well-documented, data-based, easily read book that deals with treatment for personality disorders. They address the empirical outcomes for research literature and then present psychodynamic therapy for borderline disorder, the combination of medication and psychotherapy treatments for personality disorders, cognitive therapy, and, lastly, the responsibility of antisocial personality disorder to psychosocial treatments.

The authors document that personality disorders improve with treatment and that the positive effects of treatment are 2 to 4 times greater than that seen in controls. Given the prevalence of personality disorders (13%–18%) in the population and the amount of impairment that ensues, this quality volume is required reading for mental health practitioners and trainees.

Joel J. Silverman, M.D.
Medical College of Virginia
Richmond, Virginia

Clinical Assessment of Child and Adolescent Behavior

The assessment of psychiatrically ill children and adolescents has progressed dramatically in the last decade. This timely edited volume chronicles many advances and will prove a handy resource for psychiatrists and other mental health professionals interested in the assessment, diagnosis, and related treatment of children and adolescents. The book is divided into 3 sections: “Processes and Techniques,” “Disorders of Behaviors, Emotions, and Communications,” and “Special Interventions With Children and Adolescents.” For a quick yet adequately comprehensive approach to assessing a particular disorder, the book is useful to have at hand. Descriptions of treatment strategies used to address the deficits found during the assessment are equally helpful. Most individual chapters add body to extant treatment guidelines such as the practice parameters established by the American Academy of Child and Adolescent Psychiatry.

There is something to learn from each chapter, but the reader who is interested in diagnosis and assessment will find section I of greatest value. Overviews of behavioral assessment, functional behavioral analysis, focal assessment, and the special role of psychological assessment provide a guide to evaluation. The consideration given to issues often ignored in the current preoccupation with categorical diagnoses (e.g., readiness for change, potential to resist therapeutic influences, coping styles, and nuances of the mental status examination found) in the assessment process is refreshing. Readers will find guidance in conducting an evaluation for custody or other forensic areas. They will also find references to specific instruments not generally described during typical training for the core mental health disciplines.

Section II, with its focus on specific disorders, will help the reader become more familiar with current scales that are valid and reliable. Many detailed case studies illustrate assessment that employs standard instruments familiar to most readers, newer instruments, and novel analyses (e.g., shared-ability composites). As appreciation widens for the role that learning and communication disorders play in the development and maintenance of childhood psychopathology and its treatment, chapters on these topics will be treasured. Instruments are listed for evaluating possible learning disorders by cognitive, visual motor, academic/achievement, behavior, and attention/master domains. Communication disorder assessment is divided into protocols for birth to 3 years, preschool, and school age. Each protocol considers the reason for assessment and suggests test measures for cognition, language, speech, and hearing. The direction provided will be invaluable for clinicians faced with caring for disturbed youngsters, particularly those who have comorbid developmental disorders.

Readers interested or engaged in the public sector will find this book is useful to have at hand. Descriptions of treatment strategies used to address the deficits found during the assessment are equally helpful. Most individual chapters add body to extant treatment guidelines such as the practice parameters established by the American Academy of Child and Adolescent Psychiatry.

Theodore A. Petti, M.D., M.P.H.
Indiana University School of Medicine
Indianapolis, Indiana
Guide to Assessment Scales in Schizophrenia

The rating scales that are currently in use for various psychiatric symptoms have been developed primarily for clinical investigations to accomplish thorough and consistent evaluation of clinical syndromes that are under investigation. This book describes the usefulness of various rating scales in routine clinical practice to monitor changes of clinical conditions over time, in a systematic way, to help clinical management. Specifically, this book covers assessments of psychopathology as well as assessments of other essential clinical features, such as suicidality, violence, substance abuse, side effects of antipsychotic drugs, and functional outcomes, in patients with schizophrenia or schizoaffective disorder. Furthermore, differentiation of symptoms, such as negative symptom and depression, has been addressed. The collection of rating scales is comprehensive, and the description of each rating scale is concise yet informative, with helpful comments on some rating scales.

The author categorizes rating scales into 11 groups: rating scales of broad-based psychopathology, negative symptom, depression, mania, cognitive function, global impression/function, extrapyramidal side effects, quality of life/social performance, insight, substance use, and potential for violence/risk assessment. Each chapter consists of briefly mentioned scales and (1 or more) featured scale. For the featured scales, the author explains how to conduct an interview to obtain the necessary information, gives descriptions of anchor points, and provides templates. For the briefly mentioned scales, information about how to obtain them has been provided for most. In addition, a comprehensive list of references is provided for each chapter.

One group of rating scales not covered separately in the book is positive symptom rating scales. Although positive symptoms have been described as a part of the broad-based psychopathology ratings, it would have been useful to cover them in a separate section, since different domains of symptoms of schizophrenia change independently, as well as dependently, in response to treatment or over the course of illness.

This book would be a useful reference for people who are learning to conduct a psychiatric interview, recognize symptoms, and manage patients, as well as for routine use by clinicians. Such subjective documentation of psychopathology is very useful in this era of managed care and external review of clinical documentation in patient charts. It may also increase the quality of observation, which may result in better care and influence subsequent treatment decisions.

Myung A. Lee, M.D.
Vanderbilt University School of Medicine
Nashville, Tennessee

At the Side of Torture Survivors: Treating a Terrible Assault on Human Dignity

This book seemed to elicit a sort of countertransference reaction in this reviewer, who is similar to what torture survivors often encounter in their efforts at recovery. It was harder to get started writing this review than most. As I began to read the book, it was clear why: Focusing on what the editors characterize in their subtitle as “a terrible assault on human dignity” is unpleasant. The first tendency is to avoid the reality of the rupture in human community that torture involves. Most of us would rather deny the existence of torture and the intentional, systematic goal of torture—to destroy personality and annihilate identity,” as stated in the book’s foreword (p. xi).

The book is multi-authored by specialists at the Berlin Center for the Treatment of Torture Victims. It covers a wide range of topics, but mostly the psychopathological mechanisms and manifestations of torture and various individual, group, and social treatment interventions. A theme throughout most chapters in the book is that torture produces a particularly virulent and intransigent form of posttraumatic stress disorder. The condition is compounded by the human intentionality of the trauma, the sustained and severe intensity of the trauma, and the frequent secondary feelings of shame and guilt that interfere with the trauma victim’s seeking and receiving assistance in a long and difficult requisite treatment process.

Chapter 1, “Foreign Bodies of the Soul,” sets the tone of the book. It emphasizes that traumatic experiences persist far beyond their temporal existence and cause various sufferings until they are removed. The removal process is not an exorcism but a sharing. The difficulties of that sharing process are articulated well in this chapter. The profound powerlessness of the torture experience itself and its reenactment in the therapeutic relationship as a potential projective identification producing therapeutic paralysis are particularly well articulated by Ferdinand Haenel, M.D. Haenel also emphasizes the importance of avoiding traumatization of the healer by the use of case supervision. Such communication allows the therapist of torture survivors to maintain a useful, albeit very painful, intimacy in the therapeutic relationship.

Chapter 2 by Norbert Gurris is useful in that much specific therapeutic exchange is included. The advantage of specific quotations is that the reader has an opportunity to understand the specific application of the “integrative psychotherapy” recommended by the author and also gleans some idea of the emotional toll of this work.

A chapter by Mechthild Wenk-Ansohn, M.D., articulates a conceptual model of the development of the psychosomatic symptoms that often are the initial presentations of torture survivors. That torture survivors may not even initially mention the traumatic episode is worth attention in our increasingly diverse society, with huge numbers of recent immigrants who have had experiences the U.S.-born and -reared therapist can hardly imagine.

A chapter by Sibylle Rothkegel represents itself as “Gestalt Therapy Dreamwork,” but it is actually a mixture of psychoanalytic, Jungian, and Gestalt concepts. The author seems to rely on a bit heavily on “universal symbols.” The chapter provides an interesting view of therapeutic actions, which are not taught in most current U.S. psychiatry residencies or psychology internships.

A short chapter on the power of storytelling was a bit disappointing. The author advocates the therapist’s telling stories to make various points rather than helping the patient to articulate his or her own stories. Storytelling in this context seems aimed at indirectly shoring up cognitive abilities and making subtle exhortations to the recovering victims to do or be better. There seems to be some risk of making the torture victim feel ashamed or manipulated if this technique is relied on too heavily.

Overall, this 241-page book is an interesting and helpful introduction to a topic we wish were less important and prevalent than it is.

James W. Lomax, M.D.
Baylor College of Medicine
Houston, Texas

Ethnicity and Psychopharmacology, divided into 5 chapters, is a systematic and thoughtful review of what is known about ethnicity in the field of psychopharmacology. In the first chapter, Keh Ming Lin, M.D., and Michael Smith, M.D., begin the book with an overview of ethnopsychopharmacology. The second chapter, written by William B. Lawson, M.D., is a review of ethnopsychopharmacologic issues as they relate to African Americans. Similarly, in the third chapter, Ricardo Mendoza, M.D., and Dr. Smith review those issues as they relate to Hispanic persons. Like the two chapters that precede it, chapter 4, by Edmund Pi, M.D., and Gregory Gray, M.D., discusses those same issues as they relate to Asian persons. Roy Varner, M.D., Pedro Ruiz, M.D., and David Small, M.D., round out the book with chapter 5, which is about differential prescription of psychotropics in the public sector.

Taken alone, each of the first 4 chapters is interesting, but the material presented in each is highly repetitive. Each chapter cites more or less the same studies and highlights more or less the same pharmacokinetic differences between ethnic groups, such as CYP isoenzyme alleles, which have potential consequences for drug levels and are all differentially distributed in various ethnic groups. In addition, these chapters point to emerging data that suggest possibly significant pharmacodynamic differences due to polymorphisms in genes coding for receptors, transporters, and other mechanisms of signal transduction in neurons. The 4 chapters also highlight cultural factors such as health beliefs, differential diets, and differential use of herbal medications, as well as sociological differences related to access to health care.

Any one of these chapters would make an excellent reading assignment for a resident. The most difficult aspect of resident training is teaching residents how to engage in lifelong learning and how to incorporate new knowledge. Undoubtedly, the future will lead to increased understanding of ethnopsychopharmacology, for which we all need to be ready.

The most disappointing aspect of this book, however, is that it does not really suggest many specific implications for clinical practice today, given what is already known. For example, chapter 3, with 104 references and much thoughtful discussion, offers only the following "pertinent tips": (1) make the correct diagnosis, (2) obtain culture-specific information and a list of current medications, (3) provide practical medical education, (4) assess adherence, (5) take into account the patient's pharmacy benefit package, and (6) consider polypharmacotherapeutic approaches.

In summary, this volume provides a comprehensive overview of an area of increasing importance to psychiatric practice and prepares the reader to understand and benefit from future research advances as they occur.

J. Randolph Hillard, M.D.
University of Cincinnati College of Medicine
Cincinnati, Ohio

Drug and Alcohol Abuse: A Clinical Guide to Diagnosis and Treatment, 5th ed.

The treatment of alcohol abuse, along with other substance-related illnesses, constitutes 25% of the U.S. national health care budget. More than 50% of incarcerated individuals have been estimated to have a significant alcohol and/or other substance use problem that contributed to their arrests, with unknown emotional and social costs. These and other substance-related issues are highlighted by Marc A. Schuckit, M.D., in his text Drug and Alcohol Abuse: A Clinical Guide to Diagnosis and Treatment, 5th edition, and provide an appropriate emphasis for the importance of the subject matter.

The first chapter in the book is an overview that explores the topics of drug abuse, dependence, intoxication, and withdrawal. This is followed by a review of the clinical facets involved in patient care: collection of a history, physical signs/symptoms, laboratory tests, acute emergency care, etc. In chapter 2, central nervous system depressants are examined. A brief introduction of the subject is followed by discussion of the pharmacology, epidemiology, diagnosis, emergency issues, treatment, and medical problems associated with this class of drugs. This is a general outline that the author utilizes in subsequent chapters for other groups of drugs, and it provides exceptional consistency in the clarity and content of the material presented.

Additional strengths of the text are the inclusion of chapters on over-the-counter drugs (including a subsection on misuse of some prescription drugs), a chapter on xanithines (e.g., caffeine) and nicotine, and a chapter on multidrug abuse and dependence. Chapter 14, "Emergency Problems: A Quick Overview," instructs the reader on a general approach in dealing with drug emergencies, while earlier chapters provide more extensive resources for specific situations. Chapter 15 concerns rehabilitation. It features a helpful flow diagram on alcohol treatment, as well as some encouragement for the clinician in what can often be a very challenging process. A new addition to the fifth edition is the inclusion of a separate chapter on prevention (chapter 16). These features alone would make for a very good text. What distinguishes this book as an outstanding work in the field of substance-related disorders is the ability of the author to share his clinical skill with his audience. The emphasis placed by Dr. Schuckit on presenting the material in a step-by-step fashion approaches the level of personal supervision.

In summary, this text continues to be a classic contribution to the field of substance-related disorders. It is especially valuable as a reference source for emergency room physicians, primary care doctors, and general psychiatrists who seek to participate more fully in the care of these interesting and challenging patients.

David D. Weinstein, M.D.
Vanderbilt University School of Medicine
Nashville, Tennessee