diagnosis and reimbursement. It grates, at times, that the authors refer to DSM as though it were the only way that psychiatrists think about anxiety. However, their critique could apply equally to ICD. It is also curious that the authors use the word 'design' when discussing the outcome of unplanned effects of natural selection. Although I am sure they do not mean it, it suggests that there is an 'ideal' evolutionary solution to every predicament. The very range of characteristics within a 'normal' population suggests a more scattergun process.

The central idea is that many anxiety problems should not be labelled as disorders because, at one time in our evolutionary history, these characteristics were adaptive. The problem is that evolutionary psychology offers plausible explanations that are not falsifiable. So, the idea that we can clearly identify characteristics that have had evolutionary survival value, and so should be seen as normal, is not as clear-cut as the authors propose. Indeed, the mismatch between the current environment and certain characteristics surely suggests that these characteristics have become maladaptive.

As a non-specialist in anxiety disorders, I found this book informative and illuminating, if not finally convincing. I would, though, recommend it to any psychiatrist as a provocative survey of this difficult area.

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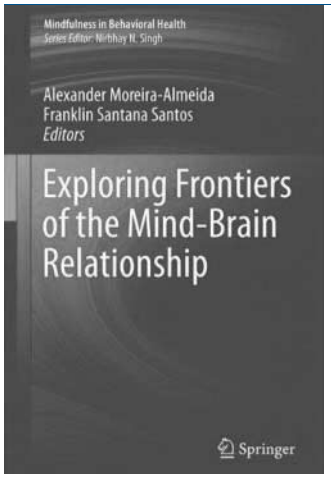

Exploring Frontiers of the Mind–Brain Relationship

Edited by
Alexander Moreira-Almeida
& Franklin Santana Santos
Springer. 2012.
£53.99 (pb). 243 pp.
ISBN: 9781461460206

This is an unusually good post-conference book and would be an excellent way into the relevant concepts and literature. An underlying theme is that a reductionist, materialist approach is inadequate to explain certain experiences – mind is more than a product or epiphenomenon of the brain. Most scientists adopt a materialist view or so-called 'promissory materialism' (that this belief will be scientifically demonstrated in the future), but we are reminded here that science should not be conflated with materialism. With modern investigative methods such as scanning, much of the content and function of mind can be related to brain location or function. Consciousness, however, the active facility for experiencing in an individual system, remains mysterious, although delved into non-verbally by religious adepts, particularly Buddhists, over thousands of years. Field theorists, for example William James, propose that while the brain ordinarily reduces our cognitive perception, in certain states a change in this filter mechanism extends the field of the mind to consciousness produced elsewhere.

Materialism does not explain acquisition of information when a person is physically isolated from the source or when clinically dead (as in near-death experiences). Descriptions of near-death experiences, out-of-body experiences, end-of-life experiences, mediumship and reincarnation have accumulated with intriguing consistency of content. Some described features defy a reductionist, materialist explanation. For instance, in near-death experiences accurate reports of what could only have been seen during out-of-body experiences: typically, the person claims to have been hovering just below the ceiling looking down on his or her resuscitation. The AWaRE study is currently attempting to determine, with ingenious method, how veridical such accounts are.

The first two chapters present the major conceptual and philosophical issues. The third is an overview of 19th- and 20th-century literature on parapsychological phenomena. Imaging and neurobiological correlates of meditation and spiritual experiences are well described. I found two chapters on conceptions of consciousness, in terms of models of quantum physics, heavy going, but perhaps the most fascinating in proposing how experiences of non-local consciousness, while incompatible with classical physics, may be explicable in terms of quantum physics.

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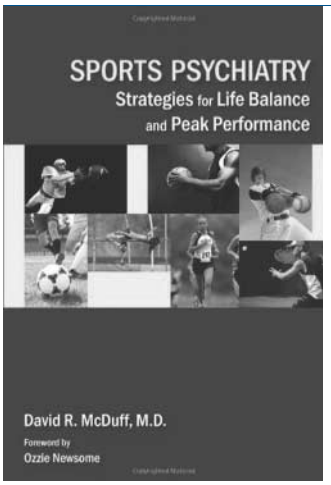

Sports Psychiatry: Strategies for Life Balance and Peak Performance

By David R. McDuff.
American Psychiatric Publishing.
2012. £39.00 (pb). 310 pp.
ISBN: 9781119953548

The first National Lottery draw on 19 November 1994 began a revolution in British sport that has seen Team GB climb steadily from 36th in the Olympic medal table in 1996 to 3rd at the London 2012 Games. Thanks to lottery funding there is now a level of technical and logistical support for elite performers unimaginable a generation ago. Yet, in the UK at least, this seldom includes ready access to high-quality psychiatric expertise; certainly not in the manner envisaged by David McDuff in *Sports Psychiatry: Strategies for Life Balance and Peak Performance*.

From the first chapter, McDuff sets out the scope of sports psychiatry practice where the emphasis is not only on a set of competencies (he lists and describes eight) but also on a style of working. This style is a recurring theme throughout the book where therapies must be tailored to fit the circumstances of high-performance sport and where an on-site psychiatric presence guarantees accessibility and secures engagement.

There are fascinating chapters on stress recognition and control and energy regulation, which are rich with practical