

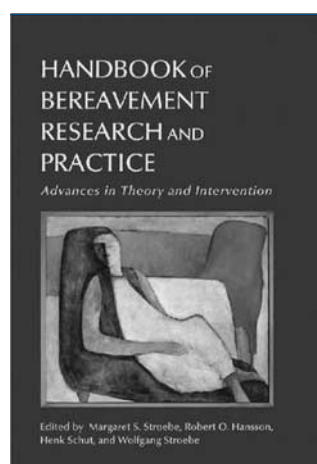
writing history. He points out that as a 'player' in the debate about the role of medication in mental illness, he inevitably has his own agenda. He asks the reader to decide whether this agenda distorts the story he tells. The warning is an apt one, because Healy's book, rather than being a short history of mania, is actually more concerned with recent developments in pharmacotherapy. The book races through two millennia to arrive at the 1950s and the advent of lithium. One senses that Healy is really more interested in recent events than the distant past. This is a pity, because his account of medical ideas about mania in classical Greece is revealing. He points out that many clinical accounts of manic-depressive illness begin by claiming an ancient lineage for the condition, reaching back to Hippocrates. By looking at the original documents, Healy convincingly shows that other authors have quoted selectively from Hippocrates and omitted the crucial detail that symptoms suggestive of 'mania' occurred in individuals who were also experiencing 'fever'. He suggests that what was actually being described was some kind of organic, confusional state. Healy refers to that master of the linguistic archaeology of psychiatric terminology, German Berrios, who emphasised that the meaning of clinical terms can change over time and we cannot assume that when the ancient Greeks used the word 'mania', they meant the same as we do.

Thereafter, Healy proceeds to 17th-century England to consider Thomas Willis' work on the brain, before travelling to Paris in the 1850s where the new category of *folie circulaire* was being outlined independently by Jules Baillarger and Jean-Pierre Falret. This concept was taken up by Karl Kahlbaum and then Emil Kraepelin who by the end of the 19th century was delineating a condition he called 'manic-depressive insanity'. According to Healy, the disease remained a rarity until the 1960s when clinicians began to ask whether it might respond to lithium. Healy devotes nearly two-thirds of the book to subsequent developments in psychopharmacology. He is clearly fascinated by the subject and over the years has interviewed many of the leading figures in the field, the fruits of such labour being published in his three volumes of *The Psychopharmacologists* (Altman, Chapman & Hall, 1996). This has been a valuable and illuminating project in oral history, but do we need quite so much of this material in a short book on bipolar disorder? The average reader may find accounts of who said what to whom at a succession of medical conferences and what happened behind drug company walls a bit wearying.

Nevertheless, what Healy has to say about recent trends in the treatment of mood disorders is deeply disturbing, particularly the case of 'Alex', a 2-year-old baby girl who was treated with antipsychotic medication for a supposed bipolar condition and subsequently dropped dead. Hers was not an isolated case: Healy reveals that in the USA young children and infants are routinely being treated with antipsychotic medication for psychiatric conditions they almost certainly do not have. In the final section entitled 'Coda', Healy strikes an apocalyptic note which veers between the allusive and the opaque. The pharmaceutical companies' push to sell their product, Healy asserts, has transformed the way we see ourselves and how doctors practise medicine. We are at risk from what Healy styles a 'pharmaceutical Pied Piper' who connives to have our children administered unnecessary and potentially fatal doses of psychotropic medication. Despite the imbalances in the book, Healy continues to provide a probing and challenging commentary on the state of contemporary psychiatry.

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Handbook of Bereavement Research and Practice: Advances in Theory and Intervention

Edited by Margaret S. Stroebe, Robert O. Hansson, Hank Schut, & Wolfgang Stroebe.
American Psychological Association, 2008.
US\$69.95 (hb). 658pp.
ISBN: 9781433803512

This wonderful, heavyweight volume draws together a cast of eminent contributors who review and provide expert commentary on the latest developments in bereavement research. It is the third handbook edited by Margaret Stroebe and colleagues, the first having been published in 1993. It should not, however, be seen as an updated edition, as it is a new work and like its predecessors provides a masterly state-of-the-art overview.

One of the most impressive features of this book is the way it sweeps across the field of bereavement. The editorial stance conveys respect for a spectrum of knowledge, from evolutionary and biological analyses through to social constructionist and sociological perspectives. This open-minded attitude must surely have played a part in enabling the editors to gain contributions from virtually all the leading thinkers and researchers in the field. It covers topics that are relevant across the lifespan, considers differing family, societal, religious and cultural contexts, and pays attention not only to the current state of the field but also to implications and applications.

A number of chapters challenge and push the boundaries such as those by Archer, Fisher and Luecken that focus on findings from functional magnetic imaging and animal studies, in a discipline that is currently dominated by 'softer' ideas. The two chapters that pose arguments for and against the inclusion of prolonged grief disorder in the next edition of the *Diagnostic and Statistical Manual of Mental Disorders* are explicitly controversial, with Prigerson and colleagues working hard to convince us that the time is ripe, whereas Rubin and colleagues argue for greater caution. Chapters that highlight growth and resilience (Davis' on post-traumatic growth; Sandler *et al's* on theory-based interventions for children who have lost a parent) in an area that is more used to considering the devastating consequences of grief, might also be seen as disturbing usual understandings.

As with many edited volumes, the chapters vary in style, and it is a joy to see the different ways that topics are approached and to hear the voices of the authors' commentaries. Some, such as Parkes in his excellent chapter on bereavement following disaster, and Doka on disenfranchised grief, draw on huge personal experience, centring on their own research and lessons learnt. Others, such as Field writing on continuing bonds and Schulz *et al* writing on caregiving and bereavement, provide evaluative, systematic reviews of research publications. It is perhaps trite to say, but it seems unfair to mention these yet not other contributors, as so many deserve mention.

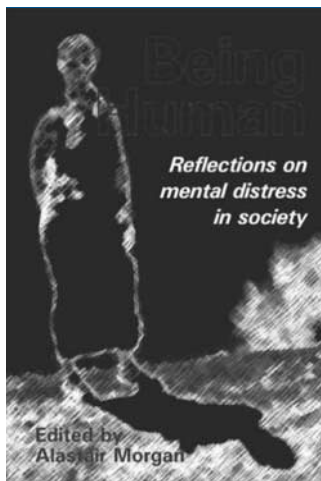
The book is unashamedly and, one could say unfashionably, focused on a scientific approach that propounds the need for sound research while also paying attention to the need for research to influence practice. In this regard, part VI on the development and efficacy of interventions is particularly welcome. This

provides an impressive account of painstaking work, including impressive longitudinal studies, to develop theoretically driven and empirically tested interventions.

This volume cannot be used as a manual for clinical work but it definitely can and should be used to inform our thinking about how to understand and work with those at risk or struggling with bereavement-related distress.

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Being Human: Reflections on Mental Distress in Society

Edited by Alastair Morgan.
PCCS Books. 2008.
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ISBN: 9781906254063

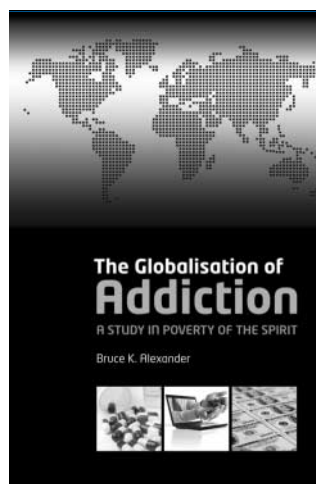
This is a bravely written book. Deriving from a series of seminars presented under the auspices of the HUMAN Research Project at Nottingham University, it consists of 13 chapters reflecting on 'the interface between mental health, mental distress, and the humanities, broadly conceived'. Contributors mainly derive from the fields of psychotherapy and psychology, but include a neurologist, a mental health nurse and those trained in philosophy and humanities. The editor, Alastair Morgan, has a particular interest in critical theory and has trained as a philosopher. In his introduction, he fears for psychiatry disappearing as a discipline, 'as it fragments into a number of subspecialties, and as it eats its own diagnostic categories, only for them to be functionalised as specific behavioural disorders'.

The topics in themselves indicate the breadth and thoughtfulness of the contributions. For example, Ian Parker's 'Constructions, reconstructions and deconstructions of mental health' is a fascinating exploration of names, images (e.g. animals, samurai, orcs), whereas Dave R. Wilson's 'A phenomenological encounter: prelude to a mental health assessment in a magistrate's cells' is a startlingly unique outline of the practical processes of working in mental health reflected in the light of true phenomenology and the psychology of interpersonal communication. More historical outlines are provided by Christopher Ward in 'Symptoms in society: the cultural significance of fatigue in Victorian Britain' and by Susanna Wilson in 'Writing from the asylum: a re-assessment of the voices of female patients in the history of psychiatry in France'. The former considers the relationship between neurasthenia and chronic fatigue syndrome, looking at the real distress and disability generated (regardless of the label) and the social relationships in which such symptoms occur. The latter studies two particular cases from French treatises, suggesting that their 'partially delusional accounts are not meaningless' and that there was an apparent failure of medical professionals 'to place any value on what they had to say'.

As in any multi-authored volume there are of course infelicities in terms of the language used, the approach taken or the sense of psychiatrists being criticised just for being psychiatrists. What work like this does show is the need for all of us to spend more time thinking about, perhaps talking about, and perhaps describing (to the powers that be) the real nature of our task. As noted by David Smail in his final contribution on 'Clinical psychology and truth', we need to understand that 'the service of truth, philosophically complex though it may be and deeply unfashionable though it is, is no minor cause'. One can only recommend reading at least some of this multi-textured volume, which in the main serves its purpose very well.

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The Globalisation of Addiction: A Study in Poverty of the Spirit

By Bruce K. Alexander.
Oxford University Press. 2008.
£34.95 (hb). 396pp.
ISBN: 9780199230129

Several years ago I was asked to participate in a Royal College of Psychiatrists' debate for young people. I was proposing the motion that 'we are all a nation of addicts', and a show of hands before the debate started revealed a strong majority in my favour. Unfortunately, an articulate description of the ICD-10 definitions of dependence by the opposition allowed the audience to re-evaluate their excesses as falling below the 'addictive' threshold defined by scientific medicine, and the motion was soundly defeated. Had I read this scholarly and extremely entertaining book before this debate, the result might have been different.

Here the term 'addiction' is reclaimed from its current use in reference to alcohol and drugs and instead defined as an 'overwhelming involvement with any pursuit whatsoever that is harmful to the addicted person and his or her society'. This change of emphasis is crucial, as the author then goes on to present a thesis every bit as bold as his title suggests. His central argument is that 'psychosocial integration' is a 'profound interdependence between individual and society' that 'reconciles people's vital needs for individual autonomy and achievement'. An enduring lack of such psychosocial integration is called 'dislocation' and is both individually painful and socially destructive. Free-market society undermines this and 'addiction' is a way of adapting to this dislocation, thus explaining why huge numbers of people are addicted to destructive habits in the 21st century.

The author is a psychologist with many years experience in the addictions field and has drawn on an impressive array of materials to support his theory. Evidence from clinical and scientific sources is supplemented by historical and anthropological studies, case