

## BOOK REVIEW

ment in general, there is no place to turn. This reflects a trend in American psychiatry toward focusing on the application of treatments to specific disorders - a move away from the earlier interest in the theoretical underpinnings of the treatments. It is closely linked to the current, immense interest in diagnosis and diagnostic systems. This format sheds greater light on some treatments (mostly pharmacotherapy or behavior therapy) but may obscure important aspects of others (psychoanalytic treatments, social rehabilitation, self-help programs). The result is an excellent reference if one wants to know the profession's current views on the treatment of any specific disorder, but not the best resource for learning about the treatments, their history, their development or their broad domain of relevance.

Of course, there is no single right way to organize this kind of book, and any solution brings problems with it. For example, the first edition had a comprehensive review of the treatments of dysthymic disorders by James Kocsis. The second has reduced the number of chapters on mood disorders from 22 to 9, and the one on dysthymic disorders did not survive. There are scattered references to the syndrome in the index, but no full review. On the other hand, the new format does provide an excellent chapter on the strategy of treating depression by John Rush and David Kupfer - a beautiful example of how to analyze an extensive, and as yet incomplete, data base and to apply the findings to difficult clinical problems in the treatment of patients.

As the discipline evolves, its focus of interest shifts. Thus the first edition, with more than 25 chapters on childhood disorders, barely mentioned post-traumatic stress disorder in children, unlike this edition which, with only 14 chapters, dedicates one to the subject. It is written by Leonore Terr, one of the pioneers in the field. Systematic controlled studies of treatment are not yet available, but she reviews the state of the art in individual and group therapies, medication and even mass prevention.

The decision to organize the discussion of psychiatric treatments around the official diagnostic categories is most problematic in the section on personality disorders. Edited by John Gunderson and Gabbard, there could not be more expert guidance. Yet the categories here are so artificial that the failure to deal with the basic issues that cut across multiple categories is glaring, and the reader who is not an expert may be misled. For example, the discussions of psychoanalytic psychotherapy for borderline personality by Gunderson and Links, of histrionic personality by Horowitz, and of narcissistic personality by Groopman and Cooper are each excellent, and each by leading authorities in the field; but the differences among them have more to do with the differing perspectives and styles of the individual authors than with the different diagnostic categories. It would be more enlightening to have three parallel discussions of the psychoanalytic psychotherapy of personality disorders from three distinct points of view.

Psychiatric treatment has become increasingly scientific, with empirical data replacing anecdote, folklore and clinical tradition as the source of treatment guidelines. Unfortunately, we still know too little about most psychiatric disorders to be able to recommend treatments based on thorough scientific understanding of the etiology and pathogenesis of the disorders. At this point in the evolution of the discipline, the science upon which treatment is based is primarily a clinical science that is the systematic and rigorous study of response to therapeutic interventions. Fortunately, our progress in this area has been dramatic.

The well-known conflicts among the several "schools" of modern psychiatry have diminished considerably in the past few years. The individual schools persist, but there is growing acceptance that the best treatment for a disorder, or for a patient, is the one that is safest, most effective and least expensive, regardless of ideology. In the final analysis, this is an empiric question. Until the data are available, the field depends upon the wisdom of the most experienced clinicians and teachers in the profession. This work has identified them and collected their thoughts into a single reference that provides the definitive statement on psychiatric treatment in 1995.

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Edited by Barry R. Bloom

# **Tuberculosis**

#### PATHOGENESIS, PROTECTION AND CONTROL

Edited by Barry R. Bloom American Society for Microbiology Press, Washington, DC, \$79.00 ISBN: 1-55581-072-1, 1994

**REVIEWED BY WILLIAM ROM** Department of Medicine Division of Pulmonary and Critical Care Medicine New York University Medical Center New York. New York 10016

The heart and soul of Tuberculosis: Pathogenesis, Protection and Control is on the genetics, physiology, immunology and pathogenesis of disease caused by Mycobacterium tuberculosis. This is a required textbook for microbiologists and researchers of mycobacteria. This compendium provides a provocative approach to the recent explosion in molecular biology of mycobacteria.

The book is a perfect reflection of the several dozen millions of dollars invested in basic research on the *Mycobacterium* by the National Institutes of Health since 1993. It is truly state of the art. It has as its main deficiency a lack of any treatment on basic mechanisms of tuberculosis in patients — the so-called "patient-oriented research" (POR) — that is so underappreciated at NIH. POR is defined as research into the