

Clinical Handbook of Psychotropic Drugs for Children and Adolescents

edited by Kalyna Z. Bezchlibnyk-Butler, B.Sc.(Pharm.), and Adil S. Virani, B.Sc.(Pharm.), Pharm.D. Hogrefe & Hubner, Gottingen, Germany, 2004, 306 pages, \$49.95 (softcover, spiral-bound).

The use of psychotropic drugs in children and adolescents has grown exponentially in the past decade, with most drugs used not approved by the U.S. Food and Drug Administration for use in the pediatric population. Few studies exist showing the effects of these drugs in children and adolescents, and prescribers rely on efficacy and safety data obtained through studies in adult populations. Based on published literature including basic science, clinical trials, case reports, and clinical experience, the *Clinical Handbook of Psychotropic Drugs for Children and Adolescents* is a recent addition to the small armamentarium of available handbooks assisting in informed decision making when prescribing psychotropic drugs for children and adolescents. The editors set out to compose a user-friendly handbook, providing quick access to relevant and practical information for trainees as well as experienced clinicians, and the book's binder format indeed makes it easy to perform a quick search.

The book starts with a concise overview of child psychiatric disorders, including incidence, age at onset, risk factors, comorbidity, course, diagnosis, and treatment, followed by a series of chapters describing the different drug classes and indications for use. Available drug strengths are described as well as indications for other use, dosing and pharmacokinetics, adverse effects, and contraindications. These issues are also incorporated in extensive charts in each chapter that compare all available drugs in a given class, making it easy for the reader to quickly review and decide on which drug to prescribe. Each chapter also contains an extensive drug-drug interaction table.

This book stands out thanks to several topics usually not covered in other available handbooks. Firstly, for each drug class, the book describes nonresponse issues and factors complicating response and follows with concisely written descriptions of augmentation strategies and their possible drawbacks as well as strategies for switching medication classes. Secondly, although electroconvulsive therapy (ECT) is not often used in children and adolescents and technically falls beyond the scope of this handbook, the book includes a useful, comprehensive chapter on ECT following the chapter on antidepressants. This chapter is similar in format to the chapters on pharmacotherapy and includes a drug interaction table describing clinically significant interactions between medication classes and ECT. Since ECT is a last resort to be used after several pharmacologic treatment strategies have failed, the addition of this chapter seems appropriate. Thirdly, the book contains an excellent chapter on available drugs of abuse, including their many street names and their effects on prescription drugs. Unfortunately, this chapter lacks a description of the latest craze—the widespread, potentially lethal abuse of dextromethorphan hydrobromide (DXM), found in over-the-counter cough syrups. Following the chapter on drugs of abuse is a chapter on treatment of substance use disorders. Lastly, a chapter on frequently used herbal products ends the description of psychotropic medications. The last part of the book contains helpful patient and caregiver information on each drug class in the form of a hand-out that can easily be copied.

Released in 2004, this book does give a warning concerning the risk for self-harm and suicidal thoughts with the use of anti-

depressants, but is not up to date on the black box warning for antidepressants. Neither does it include descriptions of the more recently marketed drugs tiagabine (Gabitril), duloxetine (Cymbalta), and the olanzapine-fluoxetine combination (Symbyax).

Overall, this is an excellent handbook; indeed, it is appropriate for both trainees and experienced clinicians, and it can be a useful aid for teaching psychopharmacology.

Pieter Joost van Watum, M.D., M.A.
Yale University School of Medicine
New Haven, Connecticut

Neuropsychiatric Assessment

edited by Stuart C. Yudofsky, M.D., and H. Florence Kim, M.D.
In book series: Review of Psychiatry, vol. 23, no. 2.
Oldham JM, Riba MB, eds. American Psychiatric Publishing, Inc., Arlington, Va., 2004, 208 pages, \$34.95 (paper).

This volume is part of a series designed to instruct students, residents, and physicians in aspects of the new specialty of neuropsychiatry. The volume concerns the assessment of neuropsychiatric patients, comprising only 5 chapters covering the physical and neurologic examination, neuropsychological testing, laboratory studies, electrophysiological measures, and brain imaging.

In the interest of full disclosure, I should state at the outset that I am a neurologist, not a neuropsychiatrist, which may color some of my impressions. In their introduction, the editors state that neuropsychiatry is a specialty that considers both the “cognitive, behavioral and mood” aspects of neurologic disorders and the known neurobiological underpinnings of traditionally psychiatric conditions such as schizophrenia and bipolar affective disorder. At least the first of the 2 foci of the specialty, therefore, involves the purview of a behavioral neurologist.

The first chapter, on general physical and neurologic examinations, is the weakest part of the book. It is a free-form listing of findings to be derived from the examination, without use of tables or figures. It omits many aspects of the neurologic examination such as other papillary and extraocular motor abnormalities or the cranial nerves VIII through XII. Some rare neurologic conditions are mentioned; some common ones omitted. The chapter might be useful to remind an experienced practitioner what aspects of the examination to attend to, but it would make a difficult introduction for the inexperienced reader.

The second chapter, on neuropsychological assessment, provides an excellent summary of formal neuropsychological testing. My only criticism is that the section on the bedside examination is very brief, seemingly restricted to the bedside testing a neuropsychologist might conduct as part of the testing. It deals only with the Mini-Mental State Examination (MMSE), which has many limitations in bedside diagnosis. I would have liked to see more space devoted to the bedside mental status examination, with examples in which more detailed testing than that provided by the MMSE is helpful.

Chapter 3, on electrophysiology, is clearly written and understandable. It covers some very controversial topics, such as “14 and 6” positive spike activity, “temporal lobe syndrome,” and the relation of panic attacks to epilepsy, all concepts that most neurologists have abandoned as unreliable.

Chapter 4, on laboratory testing, is the antidote to Chapter 1, in that most of it consists of tables, with a small amount of text.

The tables serve as an excellent reference document for lab testing in neuropsychiatric and many neurologic disorders.

The final chapter, on brain imaging, restricts its discussion to traditionally psychiatric diagnoses such as schizophrenia, depression, and obsessive-compulsive disorder. Most of these findings, while exciting, are preliminary and often conflicting from one study to another. Since the editors included behavioral aspects of traditional neurologic disorders in their definition of neuropsychiatry, perhaps the more solid information of imaging findings in these disorders should have been included, at least briefly.

Taken together, the chapters do provide a good summary of assessment methods for neuropsychiatric patients, and they should serve, with the exceptions noted, as an excellent introduction for the medical student or resident and as a refresher for the more experienced practitioner.

Howard S. Kirshner, M.D.
Vanderbilt University School of Medicine
Nashville, Tennessee

Manual of Psychiatric Care for the Medically Ill

edited by Antoinette Ambrosino Wyszynski, M.D., and Bernard Wyszynski, M.D. American Psychiatric Publishing, Inc., Arlington, Va., 2005, 385 pages, \$64.00 (softcover spiral-bound binder).

The Wyszynskis have done it again! The *Manual of Psychiatric Care for the Medically Ill* is a practical, concise, case-based approach to the medicine-psychiatry interface—a fitting update to their highly regarded 1996 manual *A Case Approach to Medical-Psychiatric Practice*.¹ As a declared companion to psychosomatic textbooks, most notably the 2005 *American Psychiatric Publishing Textbook of Psychosomatic Medicine*, edited by James Levenson, M.D.,² the manual does not aim to be exhaustive, but rather a condensed guide highlighting a patient-centered approach.

Chapters are primers on central issues in psychosomatic medicine, categorized by common clinical presentations (e.g., “The Delirious Patient,” “The HIV-Infected Patient”) and by the organ involved (e.g., “The Patient With Cardiovascular Disease,” “The Patient With Kidney Disease”). Initial chapters adopt a case vignette approach, supported by boxed text to highlight teaching points or as a quick reference for review.

With its primarily clinical focus, the manual serves as a guide to patient management from diagnostic assessment at the

bedside to pharmacotherapeutic practice and standard of care. The potential for drug interactions and side effects confounding the clinical presentation is amply addressed. Seminal journal references are utilized throughout to give the reader a scientific, and at times historical, frame of reference for the field of psychosomatic medicine. Specialized topics are highlighted in the final chapters, including decision-making capacity, discussing the spiritual with patients, and end-of-life care. The editors garner an array of experts in each area to instruct the reader, yet maintain an integrated text that flows smoothly. The entire text is supported by over 50 pages of appendices, including worksheets on acid-base imbalances, reference data, rating scales, and selected practice guidelines. Over half the appendices are dedicated to more case vignettes and chapter-related test questions with answers.

The manual is suitable for medical students, residents, and fellows in psychiatry; it is also a useful study and practice guide for psychiatrists preparing for the board examination in psychosomatic medicine. The primary disadvantage is that the book is not a general review text, omitting many areas in the medicine-psychiatry interface such as pain disorders and endocrine disorders; however, the introduction clearly defines the intent to provide a sampler of topics that are prominent and succeeds on these grounds. The strengths of the manual are that it takes a balanced approach to clinical assessment and pharmacotherapeutic intervention, is well-organized as an introduction to psychosomatic medicine or as a review, and gives thoughtful consideration to the doctor-patient relationship (e.g., “Psychological Issues in Medical Illness,” “Physician as Comforter”).

In summary, the *Manual of Psychiatric Care for the Medically Ill* is a useful study guide that is well-organized; it utilizes patient-centered chapters and common presentations in psychosomatic medicine, with helpful review techniques such as worksheets and test questions. It is directed to students, from medical students to psychiatrists who are honing their skills for the boards.

REFERENCES

1. Wyszynski AA, Wyszynski B. *A Case Approach to Medical-Psychiatric Practice*. Washington, DC: American Psychiatric Press; 1996
2. Levenson JL, American Psychiatric Publishing, eds. *The American Psychiatric Publishing Textbook of Psychosomatic Medicine*. Arlington, Va: American Psychiatric Publishing, Inc; 2005

Catherine Chiles, M.D.
Yale University School of Medicine
New Haven, Connecticut