

## Book Reviews

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Michael H. Ebert, M.D., Editor

### **Psychotherapy: Indications and Outcomes**

*edited by David S. Janowsky, M.D. Washington, D.C., American Psychiatric Press, 1999, 410 pages, \$49.95.*

This volume is a compendium of papers first presented at the 86th annual meeting of the American Psychopathological Association, held February 29 to March 2, 1996, in New York City. Its stated purpose is to review the status of psychotherapy in the 1990s, emphasizing existing evidence of its efficacy and of those underlying mechanisms that are related to outcome, both positive and negative. The principal authors are all leaders in the field of psychotherapy research, and the book certainly succeeds in providing the reader with a level of understanding about the current status of that field. Taking the book as a whole, the citations are extensive. Because of publication delays, however, the research cited is generally no more current than 1996.

To this reviewer, the 17 chapters sort themselves into 3 categories and suggest 3 different types of readers. Several of the chapters are general enough that an experienced practitioner of psychotherapy of any persuasion will find them informative and thought provoking. Chapters by Marsha Linnehan and coworkers ("Dialectical Behavior Therapy for Borderline Personality Disorder: Efficacy, Specificity, and Cost Effectiveness"), Myrna Weissman ("Interpersonal Psychotherapy and the Health Care Scene"), and Steven Sharfstein ("Psychotherapy and Managed Care: Compatible or Incompatible?") are examples. Other examples are those by David Spiegel ("Psychotherapeutic Intervention With the Medically Ill") and Ira Glick ("Family Therapies: Efficacy, Indications and Treatment Outcomes"). All these chapters provide a useful overview of the therapies in question, in addition to the extensive reference lists of the research basis for their effectiveness that are typical of the volume.

An intermediate category of chapters includes those that go into considerable detail (e.g., research design, selection of subjects, demographics, statistical correlations) regarding the existent research on the particular psychotherapies. Examples include chapters by Sidney J. Blatt and by M. Tracie Shea, Irene Elkin, and colleagues, which focus on extended analyses of outcome findings from the National Institute of Mental Health Treatment of Depression Collaborative Research Program. In a similar vein, the chapter by Melanie M. Biggs and A. John Rush ("Cognitive and Behavioral Therapies Alone or Combined With Antidepressant Medication in the Treatment of Depression") is 52 pages long and cites 189 works. If the reader is a practitioner with a serious interest in the scientific basis for his or her particular brand of psychotherapy, this is the place to find it. The more general reader will find the going tedious or difficult.

A third category of 2 chapters amounts to a dialogue between Steven D. Hollon and Donald F. Klein regarding methodological considerations pertaining to comparative evaluations of psychotherapy and psychopharmacotherapy. Thoughtfully written by esteemed experts, these chapters are intended for a scientific audience, as they attempt to establish a standard for design of studies of the future.

This volume is a most welcome contribution. Its chapters provide a serious sampling of the world of psychotherapy research, both current and recent past. And what an alive world it is! Those in the field with a vital interest in preserving the soul of psychiatry will be encouraged not only that psychotherapy can be demonstrated to be effective, but also that we may soon discover how and when psychotherapy works. Issues of managed care notwithstanding, the future of psychotherapy is perhaps brighter now than ever before. The contributors to this volume are among those whom we have to thank for that.

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### **Psychotherapy With the Arab Patient**

*edited by Kutaiba S. Chaleby, M.D., and John Racy, M.D. Tucson, Ariz., Shawn McLaughlin, 1999, 175 pages, \$25.00.*

Imagine yourself in this situation: you are an M.D. who has recently completed residency and fellowship training in psychiatry at a prestigious university in the United States. You have recently accepted a position as psychiatrist-in-chief at a leading university hospital in an Arab country. You have major responsibilities as a clinician, educator, researcher, and administrator. You are young and ambitious. You are ready for your first patient. . . . Here comes the surprise: a 22-year-old veiled married woman, poorly educated, who stopped eating when her husband, who is also her cousin, took on another wife. The husband, who is wealthy and educated, refuses to be seen. The pressure is mounting. This is the moment you have been waiting for. Suddenly, you realize that your intensive training never prepared you for this. There are no quick references to read, nobody to consult with. You are on your own. What do you do?

This situation, although admittedly an overdramatization, is not that uncommon for international medical graduates who get their training in psychiatry in a western country (United States, United Kingdom, or Canada) and then return to their homeland to practice. The homeland is usually a developing country where culture, religion, and tradition differ vastly from the country where they trained. For those people, *Psychotherapy With the Arab Patient* may be a career saver. It offers practical adaptations of western psychotherapeutic techniques to suit the Arab and Islamic cultures. The book is divided into 2 sections: the first 5 chapters deal with general issues of transcultural psychiatry, with special emphasis on psychotherapy and the Arab world. I particularly enjoyed the section on cultural aspects of the interview with the Arab patient, including the presentation of specific interview techniques that seem to work well in this part of the world. I also enjoyed the chapter on Arab cultural psychiatry, with a brief presentation of belief systems (including the "evil eye"), family structure, and illness behavior characteristic of this region. The following chapters cover specific

therapeutic approaches with the Arab patient, including behavioral, psychodynamic, marital, family, and group psychotherapies. The final chapter discusses the use of Islamic teaching in psychotherapy, an area very dear to the hearts (if not the minds) of many Arabs and Muslims.

The book is in many ways unique. It is probably the only available textbook that addresses psychotherapy in the Arab world for an international audience. It is clear, concise, and comprehensive. It tackles sensitive issues, like the role of women in Arab culture and the influence of the Islamic faith on different aspects of the Muslim life, in an objective, easy-to-read style with plenty of illustrations in the form of case vignettes. I strongly recommend this book to mental health professionals contemplating a practice in the Middle East and to anyone who is interested in transcultural psychiatry or simply Middle Eastern culture. It is quite informative and sometimes shocking, but definitely a pleasure to read.

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### Postpartum Mood Disorders

edited by Laura J. Miller, M.D. Washington, D.C., American Psychiatric Press, 1999, 262 pages, \$38.50.

The existence of postpartum mood disorders has been recognized at least since ancient Greece. The introduction to *Postpartum Mood Disorders* opens with a quotation from Hippocrates:

In Cyzicus a woman gave birth with difficult labour to twin daughters, and the lochial discharge was far from good. . . . *Sixth day* Much wandering at night; no sleep. About the eleventh day she went out of her mind and then was rational again.

The story repeats itself over the years, yet remains relatively unexplored and unpublicized. Women with postpartum "blues" or depression still think they are alone and wonder if they are going crazy. In postpartum psychosis, dramatic stories of the death of mother and/or infant abound. Yet, despite the long history of awareness of these disorders, we have only recently begun to study their etiology and treatment.

Interest in postpartum depression and psychosis arose during the beginning of the women's movement in the 1970s; the medical literature reflects this shift. A MEDLINE search under the topics of *postpartum depression*, *postpartum blues*, and *postpartum psychosis* revealed only 4 entries for the 15 years be-

tween 1960 and 1975, with the numbers increasing exponentially since then. There were almost 200 articles and reviews published from 1996 through 1999 on these topics, with many more exploring aspects of basic science generated by them.

*Postpartum Mood Disorders*, published in early 1999, attempts to synthesize knowledge regarding the etiology of these disorders and present some of the many approaches to their treatment. Section I, "The Nature of Postpartum Mood Disorders," explores their biological underpinnings and some of their effects on families and children. Chapter 1 is a thoughtful summary of hypotheses on the etiology and phenomenology of postpartum "blues" that includes relevant research and predictions generated by the hypotheses. Three chapters are devoted to postpartum depression. Of these, the most useful is chapter 3, which discusses the often contradictory research findings comparing hormonal shifts with subsequent mood changes. Two chapters explore the relationship of the depressed mother to society and family, documenting the protective roles of culture and strong social support networks, as well as the negative effects that postpartum mood disorders can have on children's cognitive and social development. Chapter 6, "Postpartum Psychoses," discusses the strong links between personal and family history of psychoses, especially bipolar disorder, and the development of such symptoms postpartum. Intriguingly, postpartum psychoses also include a strong element of confusion or delirium, which may set these disorders and their etiology apart from other psychoses.

Section II focuses on the treatment and prevention of postpartum mood disorders, with chapters on recognition of risk factors and primary prevention, pharmacotherapy and electroconvulsive therapy, interpersonal and couples therapy, and self-help techniques, all of which can play their part in a multifaceted treatment approach.

*Postpartum Mood Disorders* is a valuable book for those who wish an overview of the issues, past research, and treatment modalities used in this field, and it is valuable in documenting how far our knowledge has progressed since the early 1970s. It also quite strikingly highlights how little we still understand about these disorders. However, the work of the past is leading to more and better clinical and basic research; for scientists, this book plays its part by emphasizing many of the questions that remain unresolved. For the clinician, it highlights awareness of these disorders and the multifaceted nature of their treatment.

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