

**The Clinical Manual of Anxiety Disorders**

edited by Dan J. Stein, M.D., Ph.D. American Psychiatric Publishing, Inc., Washington, D.C., 2004, 187 pages, \$32.00 (paper).

*The Clinical Manual of Anxiety Disorders*, edited by Dan J. Stein, M.D., Ph.D., is a collection of chapters on the diagnosis and treatment of anxiety disorders with a focus on recent clinical research of interest to the practicing clinician. It is organized by specific DSM-IV-TR diagnostic categories, and each chapter follows the same sequence: Phenomenology (including symptoms, associated features, and epidemiology), Assessment (including differential diagnosis and assessment measures), Pathogenesis (including neurochemistry, neuroanatomy, and genetics), Pharmacotherapy, and Psychotherapy. The chapters are authored by experts in each anxiety diagnostic category. The chapters are consistent in their organization and focus on the clinical evidence for diagnosis and treatment. The book is quite readable and requires no special expertise, but it contains information that the practicing clinician, some years postresidency, will find new and useful. The epidemiology, pathogenesis, and clinical outcomes sections will very likely offer the most recent information to readers who are not current in these areas.

This manual provides a current, "evidence-based" overview of the anxiety disorders in one brief, readable, consistent volume. It is not clear, however, if the book fills a particular void in reference texts or adds anything that offers unique knowledge or benefit to the practicing clinician. Its greatest virtue is a summary of the current clinical evidence for treatment. This current evidence will quickly become dated but will remain a reference point for the state of clinical research in early 2004. The comparable chapters in the major general textbooks of psychiatry offer similar expositions of the diagnosis and treatment of the anxiety disorders.

Both a virtue and limitation of this volume is the almost sole focus on the clinical research evidence to guide clinicians in their diagnosis and treatment decision making. It is very important for the field of psychiatry to be clear about what our research can and cannot tell us at this time. Basing our practice on the best available evidence is increasingly important as our clinical research expands and improves. If research evidence is the only determinant of clinical practice, however, clinicians are left with few or no options when their patients do not respond to the standard treatment algorithms. This book offers little to clinicians who want to turn to a text when first- or second-line standard approaches fail. Sections in each chapter that address these complex and "real world" situations would greatly enhance the utility of this volume. Some of our clinical psychopharmacology and psychotherapy texts are more useful in those situations.

Since the evidence-based treatment of the anxiety disorder spectrum is very consistent, there is a lot of repetition from chapter to chapter. Pharmacologic treatment with selective serotonin reuptake inhibitors (SSRIs) and psychotherapy with cognitive-behavioral therapy (CBT) and interpersonal psychotherapy (IPT) are, with few exceptions, the therapeutic options presented for each disorder. Specific phobias, in which CBT is the primary intervention, and obsessive-compulsive disorder, where exposure-response prevention is the main psychotherapy model used in conjunction with SSRI treatment, are the exceptions. This book would benefit from a more rigorous set of chapters on psychopharmacology (highlighting SSRIs and relevant neuropsychopharmacology) and psychotherapy (highlighting cognitive-behavioral techniques and IPT). That would provide a foundation from which each subsequent chapter could then elaborate. The chapter on obsessive-compulsive disorder

provides the best example of a treatment algorithm as well as the most useful description of a specific psychotherapeutic intervention.

In summary, this is a useful reference book for residents, mental health workers, and practicing psychiatrists who want an overview of the anxiety disorder spectrum from the standpoint of the clinical evidence and treatment options. It is unclear if the manual offers anything beyond the DSM-IV-TR, chapters on these disorders in general psychiatry texts, and information in the best texts on clinical psychopharmacology and psychotherapy. However, it does have a place as one concise volume on the anxiety disorders from an evidence-based perspective.

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**Autism Spectrum Disorders:  
A Research Review for Practitioners**

edited by Sally Ozonoff, Ph.D.; Sally J. Rogers, Ph.D.; and Robert L. Hendren, D.O. American Psychiatric Publishing, Inc., Arlington, Va., 2003, 275 pages, \$35.50 (paper).

A definitive study<sup>1</sup> has established that the prevalence rate for autism spectrum disorder is 3.4 per 1000 people. It is no longer a rarity seen by only a few developmental specialists; many pediatricians and mental health specialists can expect to be asked to see persons with autism in their routine practice. Also, there have been major advances in our understanding of the nature, diagnosis, and treatment of the condition in the past 2 decades. In my experience, too few front-line clinicians are up to date on the subject of autism or can provide expert services within the scope of their practice for persons with the disorder.

The authors and editors of the book are faculty members of the Medical Investigation of Neurodevelopmental Disorders Institute at the University of California at Davis. Their goal is to provide clinicians with timely information on how to evaluate and diagnose children and adolescents with autism and how to discuss the nature of the condition and its treatment with parents. The book generally succeeds in providing detailed information, but readers may need to work hard at times to weed out the practical from the esoteric and to determine exactly how they will use the information in their work. Almost all of the most important clinical studies are presented, and almost every major hypothesis is discussed, but not always with the critical review that would enable readers to easily decide the issues for themselves.

Two chapters are outstanding: Chapter 6—Nonmedical Interventions for Autism and Chapter 8—Alternative Theories: Assessment and Therapy Options. The former is a well-organized, succinct description of almost every important behavioral treatment that is currently proposed for autism. It lists the goals for each of the interventions and discusses their strengths and weaknesses. It is one of the best compilations that I have seen on the subject. The latter chapter presents, in a dispassionate manner, many of the more popular "alternative" ideas about the nature and treatment of autism. Most of these approaches lack scientific validity, but it is essential that practitioners know why this is so: what studies have been inadequate, what studies have disproved the hypothesis, and what might still be open to belief. Otherwise, one cannot expertly discuss these issues with parents.

The authors have been careful not to stray from a conservative approach to their subject matter. Unfortunately, this has

resulted in a somewhat unimaginative presentation of autistic disorder as described in the DSM-IV. The DSM approach may be great for research investigators, but it is inadequate for clinicians who must deal with what appears to be a spectrum rather than a categorical disorder. How does one diagnose a person who lies on the autism spectrum but does not meet the stringent diagnostic criteria found in the DSM-IV? There is no unanimous opinion as to how to handle this problem, but a discussion of the nature of social communication and how it may illuminate our understanding of the autism spectrum would have been helpful.

Chapters on the contributions of child psychiatry, genetics, and pediatrics to evaluating persons with autism are replete with detailed information about medical disorders whose symptoms may occasionally resemble those of autism or gene abnormalities that have occasionally been associated with autism, but, with a few exceptions, these antecedents apply to too few autistic children to be clinically important in everyday practice. However, the information may be helpful in answering parents' questions, as is the chapter delineating what psychological and

language instruments are useful in evaluating children with developmental disabilities.

The chapter on pharmacotherapy correctly emphasizes that aside from treating emotional lability, hyperactivity, and aggressive behavior, there is a very limited role for medication in autism. There is an excellent discussion of the side effects of the more frequently used medications.

I recommend this book for those who wish to learn more about autism. For those who wish to learn even more, there is an excellent list of additional sources of information in the appendix.

#### **REFERENCE**

1. Yeargin-Allsopp M, Rice C, Karapurkar T, et al. Prevalence of autism in a US metropolitan area. *JAMA* 2003;289:49-55

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