

**Clinical Handbook of Schizophrenia**

edited by Kim T. Mueser, PhD, MD, and Dilip V. Jeste, MD. The Guilford Press, New York, New York, 2008, 650 pages, \$80.00.

*Clinical Handbook of Schizophrenia* is a timely, up-to-date, and comprehensive book addressing all aspects of schizophrenia. The editors, who are highly prominent health professionals, include a psychologist (Dr Mueser) and a psychiatrist (Dr Jeste). They have done an outstanding job of gathering a total of 91 clinicians from universities throughout the United States, the United Kingdom, Canada, Australia, and several other countries to contribute a total of 61 chapters to this excellent book.

The chapters are categorized under 8 divisions: Core Science and Background Information; Assessment and Diagnosis; Somatic Treatment; Psychosocial Treatment; Systems of Care; Special Populations and Problems; Policy, Legal, and Social Issues; and finally Special Topics.

While all of the chapters of this highly readable book are written by recognized clinicians and scholars, I will briefly discuss some that I especially enjoyed. Being a basic scientist and clinician, I naturally began reading the chapters on the biologic, neuropathologic, genetic, and environmental factors that affect the etiopathogenesis of schizophrenia. For example, Drs Downar and Kapur discuss the various biologic theories behind the genesis of schizophrenia such as environmental factors (prenatal infections, famine, hypoxia, Rh factor incompatibility), enlargement of ventricles, atrophy of neurons, neuronal migrational abnormalities, genetic factors (monozygotic twin concordance rate of 40%–50%, involvement of important genes, such as *COMT*, *RGS4*, *DISC1*, and *neuregulin*), and neurochemical hypotheses (the dopamine and glutamate hypotheses). It would have been helpful, however, if additional details had been provided about the serotonin hypothesis, the GABA hypothesis, and, more importantly, the neurodevelopmental hypothesis of schizophrenia.

In the chapter discussing the neuropathology of schizophrenia written by Drs Stewart and Davis, the presence of pervasive gray and white matter pathologies is discussed, covering all important brain sites (prefrontal cortex, temporal lobe, parietal lobe, cerebellum, thalamus, basal ganglia). The authors also discuss whether schizophrenia is a progressive disease and the limitations of the methods used in investigations of the neuropathology of schizophrenia.

In the chapter on the genetics of schizophrenia, Dr Glatt summarizes important concepts such as familiarity of schizophrenia, contributions of genes and environment, mode of transmission, and localization and identification of responsible genes. Furthermore, he summarizes major findings from family studies, twin and adoption studies, segregation and linkage analyses, and association analyses related to schizophrenia. Again, it would have been better to use more recent literature in the reference section, especially as our knowledge of potential responsible genes for schizophrenia presently appears to exceed several hundred genes.<sup>1</sup>

The chapter on environmental prenatal and perinatal influences in the etiology of schizophrenia by Drs Ellman and Cannon discusses the importance of obstetric complications, fetal hypoxia, and pregnancy-related infections and the neurodevelopmental model of schizophrenia. While the chapter is elegantly written, limited coverage is given to details of the neurodevelopmental model, mechanisms behind viral versus bacterial infections, and recently evolving animal models supportive of the environmental contributions to schizophrenia.<sup>2</sup>

Because this book will most likely be read by clinicians who may not be as interested in the basic science behind the disease, I will now touch on some of the clinical chapters of relevance to the reader. Dr Kutscher's chapter on antipsychotics discusses pharmacologic treatment goals, medication decision making, classification of antipsychotics, and treatment recommendations. In this regard,

the chapter is quite up to date and includes all of the atypical antipsychotics available at the time the book was published, including paliperidone. The tables are quite useful for the busy clinician. In Dr Dolder's chapter on side effects of antipsychotics, he quite ably discusses the important neurologic side effects such as dystonias, tardive dyskinesia, and neuroleptic malignant syndrome, as well as other important side effects that are associated with atypical antipsychotics, such as weight gain, dyslipidemia, glucose intolerance, and diabetes. He also discusses other side effects of antipsychotics, such as cardiac, hematologic, and endocrine side effects.

An important section of the book covers psychosocial treatment, with several important chapters spanning the spectrum of environmental support, family intervention, cognitive and social skills training, rehabilitation, illness self-management training, group therapy, housing, and self-help issues. The chapter on cognitive-behavioral therapy by Dr Morrison is quite well written and discusses applications of this important and well-replicated treatment modality in schizophrenia treatment. Among other interesting chapters that attracted my attention were those focusing on the treatment of the schizophrenia prodrome, the concept of suicide in schizophrenia, involuntary commitment, and the idea of schizophrenia in developing countries. Last, but not least, the section addressing special topics discusses important issues such as remission, recovery, gender, quality of life, sexuality, schizophrenia in African Americans, and ethics.

This is a well-written, well-organized book that I highly recommend to all clinicians involved in the scientific, rational, and humane treatment of this disabling illness. The editors should be congratulated on an excellent job done in editing this book.

**REFERENCES**

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