

Critical Issues in the Treatment of Schizophrenia

edited by N. Brunello, G. Racagni, S. Z. Langer, and J. Mendlewicz. New York, N.Y., Karger, 1995, 205 pages, \$174.00.

This book, the 10th volume in a series from the International Academy for Biomedical and Drug Research, is a compilation of presentations from a Workshop on Critical Issues in the Treatment of Schizophrenia held in Florence, Italy, March 10–12, 1995. Leading experts constituting a veritable who's who in schizophrenia research from Europe and the United States converged and presented studies in epidemiology, genetics, neuropathology, neurochemistry, and economic analysis.

The 23 papers include a combination of overviews of particular research topics and preliminary results of ongoing studies. They adhered to an average length of 8 pages, each ending with a conclusion, followed by references. At the end of the volume is a 5-page subject index. The research world truly spread out its jewels in the field of schizophrenia research: Nancy Andreasen and colleagues lead off with the topic "Clinical Presentation and Cognitive Dysfunction in Schizophrenia." They summarized and beautifully categorized the multitude of attempts, past and present, to conceptualize the heterogeneity in schizophrenic symptoms—"the subtype strategy, the symptom strategy, the dimensional strategy, and the unitary strategy" (p. 1). While they concede that they have "not yet solved the riddle of schizophrenia" (p. 7), their review of progress in the area of subtypes was a joy to read.

Robin M. Murray and colleague review "Genetic and Environmental Risk Factors for Schizophrenia." The 17 pages of text are followed by 9½ pages of references. The treatment of the subject was indeed interesting and scholarly, but, curiously, did not include the work of Böök and Modrzewska and their Swedish isolate study.^{1,2} Neither was Margit Fischer's seminal study of schizophrenia transmission in monozygotic twins discordant for schizophrenia referenced.³ Neither was information included in a way that readily lent itself to patient and family counseling of risks for genetic transmission. This would have been facilitated had they used and referenced Fuhrmann and Vogel's *Genetic Counseling*,⁴ which contains a wealth of practical information for genetic counseling. Dr. Murray's report on the incidence of schizophrenia in Afro-Caribbean emigrants to Camberwell, South London, that is 4 to 8 times that of their Caucasian counterparts, is intriguing, however, and forces some conclusions similar to those of the Swedish isolate study.

Drs. Crow and Done have a fascinating contribution in their chapter "Neurodevelopmental Aspects of Schizophrenia: The Genetically Determined Trajectory to Hemispheric Indecision." Their report on an excess of the schizophrenic patients manifesting "ambiguous handedness" is enthralling.

Various chapters address such medications as clozapine, risperidone, remoxipride, raclopride, olanzapine, and ziprasidone as well as such topics as dopamine D₃ receptors, all manner of morphologic and radiologic studies, expressed emotion, outcome measures, dopamine D₂-like receptors, and even the economic assessment of neuroleptic strategies in schizophrenia.

We can imagine that this book would be of interest to M.D. and Ph.D. researchers in schizophrenia, medical school libraries, a clinician who wishes a quick update on the "cutting edge" of schizophrenic research, or a medical student or resident preparing for a seminar. These potential readers would discover:

First, the traditional subtype diagnostic strategy is no longer of much interest to researchers and is being replaced by dimensional and symptom-based approaches. It seems likely that the next revision of DSM will include a system of schizophrenia diagnosis along three separate dimensions (psychoticism, disorganization, and negative symptoms).

Second, clinical findings continue to drive basic research rather than (as is often assumed) the reverse. The demonstrable superiority of the new generation of atypical neuroleptic agents has forced investigators to a radically different understanding of dopamine receptor activity in schizophrenia. The atypical neuroleptics have focused attention on the interaction of dopamine receptor subtypes and the involvement of previously neglected neurotransmitter systems (such as serotonin) in the increasingly complex dopamine ecosystem. The net result is both the opening of a new line of research in the neurochemistry of schizophrenia and the advent of a generation of medications that are both more effective and better tolerated than the traditional neuroleptics.

Third, there is a growing body of evidence supporting the relationship between structure and functional deficits in hemispheric specialization and the development of schizophrenia. Crow's unified hypothesis may account for the diversity of morphological anomalies found in schizophrenia patients.

Fourth, the progress in anatomical, neurochemical, and pharmacologic approaches is not antagonistic to a renewed interest in psychosocial issues. To the contrary, better medications, which not only improve positive symptoms but improve (rather than worsen) negative symptoms as well, appear to be resensitizing the field to the real problems of schizophrenia: the profound psychological and social deficits that have a disastrous impact on the quality of life of far too many patients. These concerns are addressed in chapters on psychoeducation, expressed emotion, outcome measures, and economic impact.

Overall, the book is professionally edited and printed. Though there were a few typographical errors, including those on pages 1, 7, 17, and 145, the graphs, tables, and images of brain sections were very professional. In summary, it's one of the more readable and enjoyable publications on schizophrenia, just full of energy and ideas!

REFERENCES

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