

## Book Reviews

Michael H. Ebert, M.D., Editor

### **Cultural Assessment in Clinical Psychiatry (GAP Report 145)**

formulated by *The Committee on Cultural Psychiatry*.  
*American Psychiatric Publishing, Inc., Arlington, Va., 2002,*  
*240 pages, \$38.00 (paper).*

In 2001, the U.S. Department of Health and Human Services released a report titled "Mental Health: Culture, Race, and Ethnicity." That document made it clear that although the science base on racial and ethnic minority mental health was inadequate, the best available research indicated that these groups have less access to and availability of care and tend to receive poorer quality mental health services compared with the majority culture. In the preface, the Surgeon General called for researchers to "fill gaps in the scientific literature regarding the exact roles of race, culture, and ethnicity in mental health" (p. iii) and for mental health systems to "take advantage of the direction and insight offered by the research already conducted" (p. iii).

On the heels of that report comes *Cultural Assessment in Clinical Psychiatry*, a book formulated by the Committee on Cultural Psychiatry, a subset of the Group for the Advancement of Psychiatry (GAP). The 17-member committee includes some of the leading names in the field of cultural psychiatry including Ezra Griffith, M.D., (Chairman) and Renato Alarcon, M.D., (Project Coordinator). In the introduction, the authors state that the purpose of the book is no less than "to provide a contemporary, pragmatic understanding of how culture intertwines with and relates to mental health and mental illness" (p. 2). Although only a thin volume (170 pages of text), the book intends to guide the mental health clinician to improve cultural competence in clinical practice.

The first chapter presents a brief historical perspective of cultural psychiatry over the last several decades and defines 5 dimensions of cultural psychiatry as a clinical endeavor. These include the use of culture as (1) an interpretive and explanatory tool of behaviors; (2) a pathogenic or pathoplastic agent; (3) a diagnostic and nosologic factor; (4) a protective and therapeutic instrument; and (5) an element in the management and structuring of clinical services.

The second chapter elaborates on the first by including a thorough description of the main cultural variables influencing clinical work including gender, sexual orientation, age, religious and spiritual beliefs, myths, traditions, folklore, and dietary habits and patterns. This chapter also emphasizes the conceptual connections and clinical relevance of these variables to the 5 dimensions previously outlined. The authors consider the complexity of these variables by analyzing the roles of socioeconomic status, cultural identity, country of origin, education, and language.

The third chapter is an historical account and a detailed analysis of the cultural formulation presented in the appendix of DSM-IV and DSM-IV-TR. Practical examples, as well as an analysis of the items included in each of the 4 specific areas of

the cultural formulation, provide the reader with a useful tool for the cultural assessment of a variety of clinical events.

The heart of the book is the presentation in the fourth chapter of 5 cases reflecting a wide variety of clinical situations and the role of cultural factors in their causation, course, management, and outcome. In this chapter, the authors had the opportunity to bring to life the more conceptual points made in the first 3 chapters by delineating how to apply the DSM cultural formulation with actual cases. Unfortunately, the authors' depictions of culture often come across as flat and unidimensional. Instead of approaching cultural formulations as a set of hypotheses to be tested and then guiding the reader as to how evidence from the case supports or does not support their initial cultural hypotheses, the authors appeared to use ethnic, gender, and religious labels to guide and support their cultural formulations. The authors give the reader limited access to how they considered the particulars of the patient's social world to support or reject their initial cultural understanding. Cultural competence is an ongoing, unfolding process. In the cultural formulations, the authors provided few glimpses of this important process.

Despite limitations in the cultural formulations of the cases, we believe that this book provides a useful guide to the historical and conceptual underpinnings of the DSM cultural formulation and in so doing, takes a step in the direction suggested by the Surgeon General. We recommend it to mental health clinicians as an introduction to cultural assessment in clinical psychiatry.

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### **Everyday Biological Stress Mechanisms**

edited by *Töres Theorell*. In book series: *Advances in Psychosomatic Medicine*, vol. 22. *Wise TN, ed. S. Karger AG, Basel, Switzerland, 2001, 156 pages, \$98.25.*

This volume is based on the international symposium "Scientifically Based Biological Assessment of Long-Term Stress in Daily Life," which was held April 12–15, 2000, in Stockholm, Sweden. It consists of an introduction and 10 chapters by numerous authors from the United States, Canada, Europe, and Japan. Theoretical, epidemiologic, physiologic, and clinical aspects of long-term stress are discussed, and the discussions vary from highly technical to a level comprehensible to most scientific readers.

In the introduction, Theorell clearly lays out the need for objective stress markers and discusses their necessary qualities. This need is further amplified in the chapter that follows by Kelly and Hertzman. The chapter titled "Regulatory Disturbance of Energy" by Cleare focuses mainly on chronic fatigue

syndrome. It is an excellent discussion of the putative etiologic factors and the current state of therapy for this condition. The chapter should be of considerable interest to both researchers and clinicians. The following chapter focuses on endocrinologic assessment of extreme stress. The authors present a wealth of data, but the focus is mostly on physical stress, especially that associated with triathlon. There is some reference to psychic stress (as found in posttraumatic stress disorder), but only in passing. This chapter should be of special interest to exercise physiologists.

The chapter on systems approach to stress by Sudakov and Glazachev, comprehensible only to readers with a significant mathematical and statistical background, exemplifies the highly technical end of the symposium. The chapters on epidemiologic applications of long-term stress in daily life from a socio-epidemiologic perspective should be of interest to sociologists, epidemiologists, and clinicians. They focus on social characteristics that influence health and disease, i.e., the "social gradient" in disease and hypothalamic-pituitary-adrenal axis function. The chapter on endocrine-immune interface has a great deal of data of interest to clinicians, especially the data on the effect of chronic stress on immune response to influenza vaccination and wound healing.

The volume concludes with 2 excellent chapters on work place factors in hypertension and the role of chronic stress in atherosclerosis. Both chapters are clearly written, easy to read, and contain a wealth of data that should be of great interest to both clinicians and researchers.

In summary, this book would be a significant addition to the personal library of academicians and researchers, while one would hope that medical school and hospital libraries would obtain this book for the more general use by clinicians, residents, and students.

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### **Schizophrenia: Comprehensive Treatment and Management**

by *Marvin I. Herz, M.D., and Stephen R. Marder, M.D.*  
*Lippincott Williams & Wilkins, New York, N.Y., 2002,*  
*308 pages, \$59.95.*

Two universally respected experts in the field of clinical treatment of schizophrenia, who are not only acknowledged researchers but who also possess vast personal clinical experience, have given us this gem of a book. It is authoritative enough to go into meaningful detail, appropriately referencing an extensive scientific literature and sustaining the evidence-based approach, and yet remains straightforward, succinct, and user-friendly enough not to be overwhelming to the curious but less experienced reader. The book is well conceived, well organized, and well written in a way that allows for a truly broad target audience. As a result, it is a worthwhile read both for psychiatric clinicians (psychiatrists, psychologists, nurses, social workers, and rehabilitation specialists) and for more general practitioners and students in these disciplines. This book is also appropriate for consumers and their families who are interested in learning more about schizophrenia, and, hopefully, it is a volume that will also be read by health care executives and administrators interested in knowing what the suitable parameters are for quality care in schizophrenia, based on what both empirical research and extensive clinical experience can provide.

This book has several important strengths. First, it is entirely written by Drs. Herz and Marder. It is not an edited collection of presentations from a conference fitted together to try to make a coherent book. Rather, it is a direct distillate of 2 thought leaders in the field, written in a consistent style and with a consistent orientation. Second, this book has a unifying organizational concept: the stress/vulnerability model of schizophrenia. Issues relevant to the course and treatment of schizophrenia are understood as part of a diathesis of biological vulnerability interacting with stressors that may come from the biological, psychological, or social domains, and leading to a variety of understandable biopsychosocial outcomes. Third, this book is comprehensive and balanced. Biological, psychological, and social aspects of treatment are given appropriate weight and consideration. In addition to the crucial but commonly presented issues of psychopharmacologic management, psychosocial rehabilitation, substance abuse, and family education, less frequently addressed but pivotal issues such as therapeutic alliance, housing, other community interventions, health, and legal issues are also refreshingly emphasized.

Additionally, the authors usefully subdivide schizophrenia into various aspects of its course: first episode, acute psychotic exacerbation, stabilization phase, and stable phase. Although this may result in a bit of redundancy between parts of the book that discuss similar issues in the context of various phases of illness, this organization benefits the student by allowing him or her most readily to access what he or she wants to know without being constantly referred to other parts of the book. In addition, by repeating critical information as it relates to different contexts, the text prevents the student from overlooking essential concepts. The less-clinically trained reader, especially, will benefit from the clear and skillful use of case examples that are sprinkled through the text, illustrative of the didactic material and suitable for further in-class discussion if this book is used for teaching purposes. Similarly, this book is user-friendly to readers not yet familiar with the nuts and bolts of clinical research, as it reproduces a number of clinical rating scales. The inclusion of such material usefully demystifies issues of clinical observation, practice, and research for the interested student reader, and well-placed summaries reinforce critical points.

The one aspect that seems somewhat out of place about the book is its cover. On it, there appears an eerie depiction, looking something like a distorted photo negative, of an agonized woman holding her head in her hands. This is far too obscure and too grotesque an image to introduce this sensitive and sensible book, which, we're sure, will be a source of clarification and healing. Certainly, this is not a book to be judged by its cover, but rather by its laudable content.

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### **Anxiety and Its Disorders: The Nature and Treatment of Anxiety and Panic, 2nd ed.**

by *David H. Barlow, Ph.D.* Guilford Press, New York, N.Y.,  
2001, 704 pages, \$75.00.

The 9/11 tragedies, emerging hostilities between cultures and countries and religions and regions, and financial scandals in the corporate world and their impact on economy as well as dreams of retirement have given rise to an unprecedented

global ethos of angst. Stress, burnout, anxiety, worry, fear, dread, fright, phobia, terror, panic, apprehension, nightmare, and trauma have now become part of common parlance. The protean manifestations of anxiety are often missed or dismissed due, in part, to a casual interpretation of these characterizations. Early diagnosis and treatment can only help meet the challenge of a growing epidemic of a group of crippling disorders, called anxiety disorders. Toward this end, the book *Anxiety and Its Disorders: The Nature and Treatment of Anxiety and Panic* is a welcome tool from a well-known craftsman and editor of the book, David H. Barlow, Ph.D.

Dr. Barlow, a psychologist now at Boston University, has been a career researcher in the field of anxiety disorders and wrote the first edition of this book in 1988. Due, apparently, to an explosion of knowledge during the interval, Dr. Barlow refers to his own anxiety in the preface of the book, as he sought to do justice with the exacting task of revision: instead of writing the text anew, Dr. Barlow wisely chose to edit it, and yet was behind schedule! In so doing, he has chosen 8 career researchers with whom he has coauthored 7 of 15 chapters of the book, ensuring thematic consistency. I find the first half of the title—*Anxiety and Its Disorders*—clearly revealing the book's theme; anxiety is the main stem and its branches are various disorders—specific phobia, obsessive-compulsive disorder, panic, generalized anxiety disorder, and posttraumatic stress disorder. However, the second half of the title—*The Nature and Treatment of Anxiety and Panic*—appears to reveal some inconsistency due to the book's seemingly disproportionate emphasis on only 2 of 13 types of disorders related to anxiety.

A major strength of the book is a comprehensive review of theory and relevant literature that ushers each chapter. Almost the first half of the book is devoted to elucidating various theoretical, including biological, aspects of anxiety and is entirely authored by Dr. Barlow. Any research-oriented reader will particularly appreciate this feature, as one gets a nice bird's-eye view of the etiology and epidemiology of anxiety disorders. Two chapters particularly examine the overlapping relationships of anxiety disorders with other disorders, especially mood disorders. For clinicians, these chapters will offer new insights into oft-missed comorbidities and help correct the diagnostic myopia. Chapter 9 goes on to comment on the nosologic shortcomings and usefulness of the DSM system and shares a futuristic view of the classification systems. Chapters 10 through 15 deal with specific types of anxiety disorders and are coauthored by Dr. Barlow together with contributors, all psychologists, who are active researchers in their respective areas. However, the book lacks a proportionate commentary on the vast advances in pharmacotherapy of anxiety disorders. Likewise, the lack in the book of a terse comment on the causal or contributory role of substances of abuse, medical illnesses, and personality stands out.

Overall, the book represents a monumental work, is authoritatively and clearly written, and includes almost 125 pages of references. It will be an invaluable resource for researchers and clinicians alike.

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