## **Book reviews**

### EDITED BY SIDNEY CROWN and ALAN LEE

#### **Anxiolytics**

Edited by M. Briley & D. Nutt. Berlin: Birkhäuser. 2000. 192 pp. DM 188 (hb). ISBN 37643 6032 I

The drug treatment of anxiety, if not exactly in the doldrums, is being propelled by a very light wind indeed. Despite much activity in the research department, there is little evidence of major clinical gains being made with any of the new compounds. This book is one of a series, extravagantly entitled Milestones in Drug Therapy, and, despite having little to shout about, is welcome to illustrate the poverty of advance. The contributors range across three continents and include luminaries such as Rudolf Hoehn-Saric, Graham Burrows, David Baldwin, Stephen Stahl and Trevor Norman. Their contributions are well-knitted by Briley & Nutt, who introduce the book with the dilemma of the therapist wishing to treat anxiety with drugs, that "there are few clinically satisfactory alternatives to the benzodiazepines for the treatment of acute anxiety" and other drugs for more chronic anxiety "are still far from being ideal".

The chapters that follow give a good indication of why the wind no longer fills the sails of the anxiolytic barque. For the vessel to keep scudding across the waves you need a steady and reliable wind with no sudden changes in direction, a combination of excellent efficacy (anxiolysis implies a penicillin-like destruction of anxiety) and negligible adverse effects. We read that the powerful gusts created by benzodiazepines provide efficacy at the expense of potential dependence, that the absence of dependence with buspirone and other 5-HT<sub>1A</sub> agonists is associated with uncertain efficacy despite "very active clinical research", that the reasonably steady wind generated by tricyclic antidepressants and selective serotonin reuptake inhibitors takes rather too long to fill the sails, and that neuropeptides, despite their revolutionary design, have hardly got our barque out of port.

It is sad to report that all this was known some years ago, and recent research has only clarified pharmacological and pharmacokinetic details. Two chapters on 5-HT<sub>2C</sub> receptor agonists and drugs that are subtype-selective with regard to benzodiazepine and GABA receptors give some possibilities for development, but the data are not inspiring. Where development might have led to real improvements, such as the introduction of reversible monoamine oxidase inhibitors (RIMAs) in place of irreversible ('suicide') inhibitors, we really have only a pale imitation of the original impressive anti-anxiety effects of phenelzine and iproniazid, and it is a shame that this therapeutic line has not been pursued more actively.

One major omission is discussion about the anxiolytic properties of venlafaxine and related selective serotonin and noradrenaline reuptake inhibitors. These may have more powerful anti-anxiety effects than other antidepressants and really deserve a separate chapter in a book of this nature. We surely need something to get the ship moving again, and while it is becalmed the psychological treatment alternatives are advancing rapidly, powered not only by natural winds but by the hearty puffs of our consumer society.

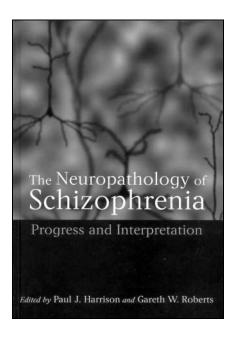
**Peter Tyrer** Professor of Community Psychiatry, Department of Public Mental Health, Imperial College School of Science, Technology and Medicine, Paddington Outreach Rehabilitation Team, Paterson Centre, London W2 IPD, UK

# The Neuropathology of Schizophrenia: Progress and Interpretation

Edited by Paul J. Harrison & Gareth W. Roberts. Oxford:
Oxford University Press. 2000. 374 pp. £65.00 (hb). ISBN 0 19 262907 7

The subtitle of this book sums up the situation well. Immense progress has been made in delineating an association between schizophrenia and a multitude of neuropathological anomalies, yet much of the evidence is inconclusive and the essential abnormality remains unknown. The excellent review of structural brain imaging studies by Hopkins & Lewis in Chapter 1 concludes that the median decrease in brain size in schizophrenia is 3%. Despite the fact that a decrease of brain tissue volume is reliably found in groups of patients, gross brain structure in most patients is within the normal range. A variety of microscopic anomalies have been reported, but too few of the observations have been replicated. The balance of evidence does not demonstrate a widespread loss of neurons, although there is tantalising evidence for loss of particular groups of neurons, such as interneurons from the anterior cingulate cortex. There are also many reports of abnormalities of the microstructural components that support neurotransmission (axons, synapses and synaptic proteins) but different investigators report different anomalies at different cerebral locations.

In the foreword, Janice Stevens expresses the hope that the studies described in the book might be a springboard for segregating patients into pathologically distinct cohorts. I remain sceptical that this will prove a fruitful path. The magnitude of virtually all reported anomalies in schizophrenia reported in this book, whether it be size of brain ventricles, density of neurons in the cingulate cortex or concentration of synaptic proteins, is distributed unimodally. This observation supports the alternative view that a variety of different pathoplastic factors generate multiple dimensions of variation in brain structure and function in schizophrenia. But this formulation



leaves us with the task of identifying the core abnormality that defines the illness. Although the contributors to this book are appropriately cautious in drawing conclusions, the evidence they present indicates that the strongest candidate for the essential abnormality is a defect that disrupts the development of normal connections between neurons.

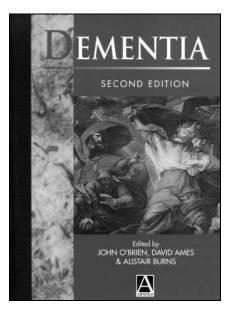
Overall, the book presents a comprehensive review of the data from many sources, with excellent tables that summarise much of the literature in important areas. This is a book that schizophrenia researchers should have on their bookshelves. Students or clinicians seeking an authoritative review of the current state of knowledge regarding the neuropathology of the condition will also benefit from reading it.

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## Dementia (2nd edn)

Edited by John O'Brien, David Ames & Alistair Burns. London: Arnold. 2000. 940 pp. £155.00 (hb). ISBN 034075916 X

When this book arrived on my doorstep my heart sank at the size of it and I wondered how I would ever find time to review it properly. However, it is very user-friendly. Starting with a section on general aspects of dementia, followed by chapters on its



specific causes, the book is easy to use as a reference. Questions arising from the first part are answered in the later, more detailed sections.

The book is impressive in its breadth of content. There are comprehensive chapters on diagnostic criteria, rating scales and investigations, all of which are increasingly important to clinicians owing to the introduction of cholinesterase inhibitors and the need to make an early diagnosis. Of equal importance and interest are sections on services for dementia in Europe and worldwide, including those provided by support groups. The Japanese government's recent introduction of a 'long-term insurance

system' will be observed closely by other countries with rapidly ageing populations. The financing of dementia services may deserve a chapter of its own by the time the third edition of this book is published. Alzheimer's disease and other specific dementias are covered in particular detail. The authors are international experts and the information is, unusually for a textbook, extremely up to date.

The first edition of Dementia was published in 1994 and the changes in this new edition reflect the great leaps in our knowledge and in public awareness of the disorders. Those working in the dementia services will particularly welcome the chapters on the moral, ethical and legal aspects of dementia, as well as the psychosocial and psychological management of dementia and cognitive impairment. Budding researchers will find this a useful navigational guide through the vast amount of scientific literature on the subject. It is unusual to find a book that is a good source of reference for all of the various bodies interested in dementia but, in this case, the editors have achieved their aim of producing a textbook that is comprehensive, current and accessible to researchers, clinicians and allied professional groups.

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