

patients are offered, tying their illnesses to the soldiers' battlefield experiences. Specific chapters explore themes of desertion, suicide and the short-lived opportunities offered to women doctors. Linden also presents a nuanced view of Lewis Yealland, the junior doctor commonly accused of the brutal treatment of servicemen. Although the application of electric shock is not denied, she argues that Yealland integrated its use with suggestion, demonstration of preserved function and the communication of a physiological illness model. This compelling narrative is driven by the clinical records, which demonstrate beyond any doubt the capacity of war to ruin the lives of young men.

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Can't You Hear Them? The Science and Significance of Hearing Voices

By Simon McCarthy-Jones.
Jessica Kingsley Publishers. 2017.
£13.99 (pb). 376 pp.
ISBN 9781785922565

This book sets out to examine the nature of 'voice-hearing', both distressing and uncomplicated 'voice-hearing'. It emphasises the importance of context in the experience of verbal hallucinations by illustrating how verbal hallucinations are experienced in context, and how the experience is given meaning and value. So, for example, for one person voices may be understood as arising from overwhelming emotions and for another person, voices may be a consequence of sex assault or trauma.

The biological underpinnings of verbal hallucinations are not ignored nor minimised but there is always an undercurrent of criticism of psychiatry: 'To be clear, the issue here is not that psychiatrists prescribe antipsychotic drugs to help with voice-hearing. As we have seen, for some people this is indeed helpful. The issue is why some psychiatrists still tell their patients that antipsychotic drugs correct a chemical imbalance' (p. 231). The goal seems to be to make both a metaphorical and pragmatic space for the Hearing Voices Movement's approach to verbal hallucinations. In order to further this aim a distinction is also drawn between psychological therapy for verbal hallucinations and the approach of the Hearing Voices Movement. This distinction is described as having 'a more explicit focus on any emotional problems that may underlie the voices and in emancipating and empowering voice-hearers' (p. 283).

This book is not exactly a Hearing Voices Movement manifesto but in the latter sections it becomes more explicitly a crusading text. It challenges what counts as evidence, makes the point that psychological services are starting to take account of the Hearing Voices

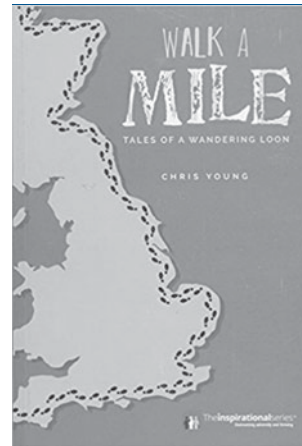
Movement's ideas but that psychiatrists are slow on the uptake. And asks what the relationship of the Hearing Voices Movement with biology will be in the future given the belief that voice-hearing ought to be celebrated.

In summary, this book fully summarises what we know about the biological underpinnings of verbal hallucinations. It makes a cogent case for psychiatrists taking far more seriously the values and views of people who hear voices whether or not the experience is embedded within signal features of severe mental illness.

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Walk A Mile: Tales of a Wandering Loon

By Chris Young. Trigger Press Limited. 2017. £11.99 (pb). 321 pp.
ISBN 9781911246534

Walk a Mile: Tales of a Wandering Loon is the story behind ex-social worker and mental health campaigner Chris Young's Walk-a-Mile campaign. The memoir charts the build-up to his decision to set off on foot in his kilt and sporran with merely a tent and a plan to rely only on the kindness and generosity of strangers to propel him on his journey around the outskirts of the UK.

We open with Chris on his first placement as a qualified social worker. Mounting pressures result in a breakdown that leads to him being detained and admitted to hospital. The details of his admission are relayed with amusement and bewilderment as he observes the power imbalances and questionable practices he is subjected to as 'poacher turned gamekeeper.'

After this, the laughter stops. He returns to his childhood, the raw grief of losing his mum at 12 years old and his brief descent into brutality after being left to fend for himself as his dad retreated further into alcoholism. We follow him into his early years as a rebellious yet well-meaning social worker. The tenderness that is apparent in his description of his clients makes it clear that he'd be the kind of social worker who would go the extra mile for you. We can all relate to how someone like Chris would struggle to survive and maintain his personal integrity working amid the cut-throat system he had to answer to, and how this quickly leads to burnout.

The story raises important questions about how people cope with what life throws at them and the impact this has on those around them: 'Some people face up to their problems, while others pretend they never happened.'

He ponders, 'what part's me and what part's loon and can they ever be separated?' reminding us that when we give someone a diagnosis we can fail to offer a way of recognising their strengths and

resources, and the disorder becomes a filter through which they begin to see all aspects of who they are.

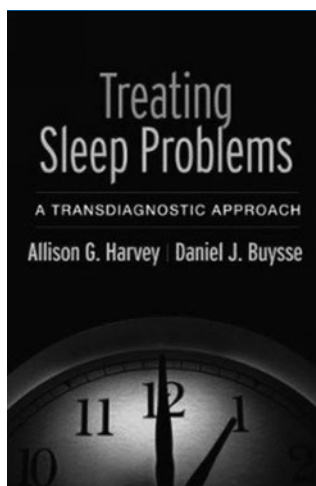
Despite the wit, humour and honesty that permeate this memoir, what moved me most was the compassion the author extends towards his abuser. We see the confused child within him as he compulsively circles around the question of whether what happened to him 'counts' as abuse.

The book shifts a gear once he sets off on foot around the coast of Scotland, and it is here we bear witness to the daily reality of how the symptoms of borderline personality disorder affect Chris, long after his journey through therapy.

Walk A Mile is a brave and unflinching book that offers hope and solace for anyone who has ever felt sidelined as a result of their mental health. I have placed it firmly at the top of my list of reading materials to recommend to both colleagues and patients, up there with my favourites *I Hate You – Don't Leave Me* and *Don't Let Your Emotions Run Your Life*.

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Treating Sleep Problems: A Transdiagnostic Approach

By Allison G. Harvey and
Daniel J. Buysse.
Guilford Publications. 2017.
£22.99 (pb). 192 pp.
ISBN: 9781462531950

This book is an excellent practical manual presenting a novel modular approach to subclinical and clinical insomnia and circadian rhythm disorders using the Transdiagnostic Sleep and Circadian Rhythm Intervention (TranS-C).

The authors emphasise the health benefits of good sleep and propose TranS-C as a pathway to promote sleep health and cite evidence that treating sleep problems in a range of mental health conditions improves both sleep problems and the comorbid mental and physical health conditions. The authors define sleep health as a multidimensional pattern of sleep and wakefulness adapted to individual, social and environmental demands that promote physical and mental health and well-being. Good sleep health is reflected by subjective satisfaction, appropriate timing, adequate duration, high efficiency and sustained alertness during waking hours.

A major premise is that most research and treatment approaches focus on insomnia; whereas in clinical practice sleep problems are often complex with features of insomnia, circadian misalignment, hypersomnolence and sleep-wake irregularities. However, TranS-C draws on a range of existing evidence-based treatments. The content of the proposed treatment modules will be familiar to sleep

clinicians and include cognitive-behavioural therapy for insomnia; behavioural therapy for delayed sleep phase presentations, which includes chronotherapy and timed light exposure; interpersonal social rhythm therapy, which has a focus on irregular sleep-wake schedules, e.g. during periods of unemployment; imagery rehearsal therapy for nightmares; and evidence-based treatments promoting adherence to continuous positive airway pressure (CPAP) treatment. Motivational interviewing is used throughout.

The sleep-health framework underlies and guides TranS-C. This approach incorporates the medical model of identifying and treating specific sleep disorders but also incorporates a health-promotion perspective, which emphasises the universal attributes of sleep that can be optimised to promote well-being.

The authors state that the approach is informed by four perspectives on sleep and health: the medical model, which emphasises the treatment of sleep disorders; a World Health Organization approach, which encompasses health and well-being in physical, mental and social domains; integration of mind, body and spirit as incorporated into wellness and role-performance models; as well as models that incorporate the importance of being able to adapt to challenges in the physical and social environment.

The sleep-health framework encourages clinicians to work towards improving sleep health along the following six dimensions: regularity of sleep, subjective satisfaction, alertness during waking hours, timing within a 24-hour cycle, sleep efficiency and sleep duration.

TranS-C therapy utilises four cross-cutting modules consisting of case formulation, sleep and circadian education, behaviour change, and motivation and goal setting. These modules are introduced in the first treatment session and addressed in every subsequent session as rolling interventions. There are also four core modules consisting of establishing regular sleep-wake times, improving daytime functioning, correcting unhelpful sleep-related beliefs and maintenance of behaviour change. Optional modules include improving sleep efficiency, reducing time in bed, dealing with delayed or advanced sleep phase, reducing sleep-related worry and vigilance, promoting compliance with CPAP, negotiating sleep in complicated environments and reducing nightmares. Therapy sessions last 50 minutes and four to ten sessions are typically sufficient, depending on the complexity of the presentation and number of modules to be delivered.

The evidence base for effectiveness of this modular approach to promoting sleep health is currently limited to several small trials. Although the interventions are empirically derived and drawn from existing evidence-based treatments, there is a need for a large-scale evaluation of the approach by independent research groups comparing the effectiveness and health economics of TranS-C with existing approaches.

This book serves as a manual for delivering TranS-C and it provides comprehensive guidance and exemplars. The appendices provide a very useful range of handouts and other useful resources.

This book is a must for all clinicians interested in the psychological aspects of sleep medicine. It is not only useful for those practicing sleep medicine but also for those working in mental health and managing long-term physical health conditions with comorbid sleep issues.

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