

Book reviews

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Handbook of Tourette's syndrome and Related Tic and Behavioural Disorders (2nd edn)

Edited by R. Kurlan.

New York: Marcel Dekker. 2004. 534pp.

£110.00 (hb). ISBN 082475316X

This new edition thoroughly deserves its title of handbook, being an authoritative summary of current understanding of these disorders. The preface mentions the increasing interest in Tourette's syndrome at the time of the first edition in 1993. This interest has continued to increase since then, together with interest in associated and parallel disorders, such as attention-deficit and hyperactivity disorders, and these are well covered in the present volume. The book is multi-author, each one dealing well with a particular aspect of Tourette's and its associated disorders. The authors are distinguished in their field and give definitive, contemporary accounts of the disorders they describe. I was impressed by the chapter on premonitory sensory experiences in Tourette's tics. This reviews the increasing appreciation of sensory phenomena as part of tic disorder. Traditional divisions of phenomena into motor and sensory, or objective and subjective, are too simplistic. This realisation will become increasingly important in understanding other neuropsychiatric disorders such as somatoform disorder. Another impressive chapter was that on the natural history of Tourette's. This reviews how the same genetic disorder can be differently expressed according to age at onset, and considers factors leading to protracted disorder or spontaneous remission in different individuals with the syndrome. The chapter on drug-induced tics is a model of clarity, crystallising our current understanding of neurotransmitter function and thought provoking for future understanding in this field. That on rating tic severity allows the non-mathematical reader to understand the statistical concepts underlying such ratings. I found a few chapters,

such as treatment of obsessive-compulsive disorder, to be superfluous to the main theme of the book, but others, such as the neurosurgical treatment of Tourette's, including deep brain stimulation, were quite exciting and those on genetic counselling and on children and adolescents with Tourette's are very thoughtful. Oliver Sacks' contribution ('Tourette's syndrome, a human condition') and that of the Tourette's syndrome association (promoting research into the disorder) provide a fitting finale to this handbook, which can be thoroughly recommended.

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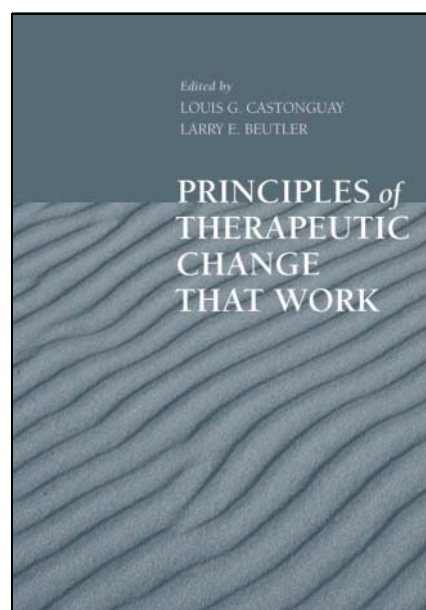
Principles of Therapeutic Change that Work

Edited by L. G. Castonguay & L. E. Beutler.

Oxford & New York: Oxford University

Press. 2006. 464pp. £35.99 (hb).

ISBN 0195156846



The null hypothesis of this review is that it will be of no possible interest to UK psychiatrists. HO1: British psychiatrists are no longer concerned with working long-term with patients, viewing themselves primarily as advisory consultants and managers of 'complex cases'. HO2: British psychiatrists have little interest in the role of 'relationship factors' in producing good outcomes for patients. HO3: British psychiatrists avoid examining their own personal characteristics as relevant to their efficacy, focusing exclusively, as the medical model dictates, on *what* is delivered rather than how, or by whom.

All this, if true, is very sad, since this book should be required reading for all mental health workers. It is the result of a fascinating intellectual evolutionary process in the American Psychological Association. In the mid-1990s a group of psychotherapy researchers in the Association initiated an Empirically Supported Treatment (EST) movement. This resulted in the publication of the *Guide to Treatments that Work* (Nathan & Gorman, 2002) focusing on evidence-based psychotherapeutic treatments for major psychiatric disorders. This inevitably showed short-term, researchable and fundable treatments such as cognitive-behavioural therapy in a favourable light, downplaying the inescapable 'equivalence paradox' of psychotherapy research, which suggests that the change agent is the therapeutic relationship itself, rather than specific therapeutic techniques. That led to a second volume, informed mainly by psychodynamically minded researchers: *Psychotherapy Relationships that Work: Therapist Contributions and Responsiveness to Patients* (Norcross, 2002).

The present volume, comprising collaborative review articles by top US psychotherapy researchers, integrates the findings of both camps and identifies superordinate principles applicable across different psychotherapy schools. It focuses on psychotherapeutic treatments for four major groups of disorders: dysphoric disorders, anxiety disorders, personality disorders and substance misuse. The result is a measured, balanced, open-minded, scholarly, readable and inspiring compendium. Here are a few findings relevant to the reviewer's interest: in working with people suffering from personality disorders, long-term (minimum 1 year) intensive treatments (minimum twice a week) are better than short-term ones; focusing on the therapeutic relationship is an important vehicle for change;