

Books review

Βιβλιοκριτική

Schizophrenia: Biopsychological approaches and current challenges

**Eds.: Kasper S, Papadimitriou GN
Informa Healthcare, London, 2009
ISBN-13:978-1-4200-8004-9**

We introduce here the second edition of this book aiming to present, in five units and twenty nine successive chapters, the acquired knowledge and current challenges on diagnosis, psychopathology, neurobiology, pharmacological treatment of schizophrenia, as well as its role in society. The chapters are obviously written by leading experts all over the world.

The editors underline that, "...patients with schizophrenia are overwhelmed by the complexity of the problems emerging with the disease, so are their relatives and caregivers". In consequence "the chapters (of this book) aim to reach an audience comprising of physicians and basic scientists in various psychiatric specialties as well as doctors of neurology and aim to be of importance in public health considerations. The book should also be of interest to policy makers...". We think that the book achieves to satisfy a major challenge, which is to preserve scientific rigueur and, in the same time, be useful to people who need to familiarize with these issues.

Issues on neurobiology, genetic and epigenetic studies, brain abnormalities and biochemical alterations are expected to enrich substantially clinical approaches. Pharmacological advances are also described in corresponding chapters. Biological research is obviously the field of special interest of the majority of the contributors, but no one is willing to underestimate the complexity of psychological and

social phenomena related to schizophrenia, developed in the units on Non pharmacological Treatment and Schizophrenia and Society.

Titles and authors of the chapters are the following:

Schizophrenia: Historical roots and brief review of recent research developments, C.N. Stefanis and N.C. Stefanis/Epidemiology and gender, J. Wancata, M. Freidl, A. Unger/Interviewing the patient with schizophrenia, F. Thibaut/Evaluation of symptomatology on schizophrenia, J. Bobes, M.P. Garcia-Portilla, P.A. Saiz, M. Bousoño/Clinical characteristics of first episode schizophrenia, L.P. Henry, P.D. McGorry, M.G. Harris, P. Amminger/Schizophrenia: Differential diagnosis and comorbidities, C.A. Altamura, F. Dragogna, S. Pozzoli, M.C. Mauri/Neurocognition and schizophrenia, G. Sachs/Genetic and epigenetic factors in schizophrenia, A. Schosser, P. McGuffin/Brain abnormalities in schizophrenia, B. Bogerts, J. Steiner, H.G. Bernstein/Imaging in schizophrenia, W. Cahn, N.E.M. Van Haren, R.S. Kahn/Biochemical alterations in schizophrenia, B.Y. Glenthøj, L.V. Kristiansen, H. Rasmussen, B. Oranje/Dopamine dysregulation in the brain network of decision-making: Can this explain the psychopathology of schizophrenia? S.M. Assadi, M. Yücel, C. Pantelis/Neuropsychological markers and social cognition in schizophrenia, J. Burns/An update of meta-analyses on second-generation antipsychotic drugs for schizophrenia, S. Leucht, C. Corves, W. Kissling, J.M. Davis/Maintenance pharmacotherapy in schizophrenia, S. Kasper, E. Akimova, M. Fink, R. Lanzenberger/Evaluation and medication therapy for treatment resistance in schizophrenia, R.R. Conlay/First episode schizophrenia: Considerations on the timing, selection, and duration of antipsychotic therapies, B.J. Miller, P.F. Buckley/Pharmacological profile and pharmaco-

genetic approaches of antipsychotics, *M.S. Lee, H.S. Chang/Side effect burden of antipsychotic medication, H.J. Möller, M. Riedel/Rehabilitation in schizophrenia: Social skills training and cognitive remediation, J. Ventura, L.H. Guzik/Evidence-based psychosocial interventions for schizophrenia, E. Granholm, C. Loh/Transcultural psychiatry and schizophrenia, T. Stompe/Electroconvulsive therapy in schizophrenia, G. Petrides, R.J. Braga/Schizophrenia and stigma: Old problems, new challenges, M.P. Economou, N.C. Stefanis, G.N. Papadimitriou/Patient rights: Ethics and the clinical care of patients with schizophrenia, E.G. DeRenzo, S. Peterson, J. Schwartz, A. Jeannotte, S. Selinger/Genetic counseling in schizophrenia, D.G. Dikeos, E. Vassos, G.N. Papadimitriou/Violence in schizophrenia: Risk factors and assessment, J. Rabun, S. Boyer/Economic evaluation and schizophrenia, M. Knapp, D. Razzouk/Transcultural aspects of schizophrenia and old-age schizophrenia, T. Okasha, A. Okasha*

We think that this handbook offers an up-to-date, integrated knowledge on various aspects and approaches of schizophrenia, permitting familiarization or a better understanding on it.

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**Σχιζοφρένεια:
Βιοψυχολογικές προσεγγίσεις και επίκαιρες
προκλήσεις**

**Επιμ. έκδοσης: Kasper S, Papadimitriou GN
Informa Healthcare, London, 2009
ISBN-13:978-1-4200-8004-9**

Παρουσιάζουμε τη δεύτερη έκδοση του πολυσυγγραφικού αυτού τόμου όπου, σε πέντε ενότητες και στα διαδοχικά κεφάλαια, παρουσιάζονται τόσο οι γνώσεις όσο και οι προοπτικές γύρω από τα ζητήματα της διάγνωσης, ψυχοπαθολογίας, νευροβιολογίας, και φαρμακευτικής αγωγής της σχιζοφρένειας, όπως επίσης και της κοινωνικής της φυσιολογίας. Τα κεφάλαια έχουν γραφεί από έγκριτους συγγραφείς, από όλο τον κόσμο.

Ένα βιβλίο αυτού του τύπου γίνεται απαραίτητο από την πολυπλοκότητα των παραγόντων που υπεισέρχονται στην κατανόηση και την πορεία της σχιζοφρένειας. Φιλοδοξία του είναι να προσφέρει επιστημονικά άρθρα, αλλά και κατανοητή γνώση σε διάφορες κατηγορίες επιστημόνων, αλλά και σε υπεύθυνους για τη χάραξη πολιτικής. Η ποιότητα και το εύρος των κειμένων που περιλαμβάνονται σε αυτό τον τόμο αποτελούν εγγύηση για την επιτυχία των στόχων του.

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**Psychodynamic Diagnostic Manual (PDM)
PDM Task Force (2006). Silver Spring,
MD: Alliance of Psychoanalytic Organizations**

The Psychodynamic Diagnostic Manual (PDM) attempts to expand contemporary psychiatry's ability to capture the different levels of psychiatric nosology by incorporating in an easily accessible language the long experience of psychoanalytic tradition mostly on the comprehension of personality. In accordance with DSM-IV-TR and ICD-10 phenomenological approach to psychiatric disorders, PDM deals extensively with the phenomenology of psychopathology and very little with the various psychoanalytical hermeneutical constructs. Diagnosing a patient according to the strict criteria of DSM and ICD classifications frequently leads to a number of different diagnoses that seem to overlap, as if discrete problems and symptoms just by chance coexist in the same person. Although PDM is modeled in its structure and title upon DSM-IV-TR, its central focus is on a more holistic picture in terms of personality functioning, affect expression, coping strategies, mechanisms of defense, quality of relationships. It is the individual that suffers the symptoms and a meaningful treatment planning is needed for the patient and not for the disorder.

The book is created through the collaborative effort of major psychoanalytic organizations, namely the American Psychoanalytic Association, the International Psychoanalytical Association, the Division of Psychoanalysis (39) of the American Psychological Association, the American Academy of Psychoanalysis, and the National Membership Committee of Psychoanalysis in Clinical Social Work. The text is organized in three parts. Part I deals with adult mental health disorders and Part II with child and adolescent mental health disorders. Part III deals in separate papers with the conceptual and research foundations that constitute the epistemological background of this book. Within Parts I and II the book uses a multidimensional approach which is similar and an expansion of DSM axial system. In detail Parts I and II are separated into chapters on personality patterns (P Axis), mental functioning (M Axis) and subjective experience (S Axis), and are followed by case illustrations that attempt to give an idea about how similar DSM-diagnosed patients may require quite different treatment approaches,

depending on their individualized histories and specific situations.

In the P Axis, different personalities are set on a continuum of mental functioning, namely from healthy personalities to neurotic-level and borderline-level personalities. It is important to note that the term "borderline" is used by psychoanalysts in order to denote a dimensional level of severity of personality organization, whereas the same term in DSM realm means a specific (the more histrionic and dramatic) manifestation of this level of severity. After the dimensional personality approach, 14 distinct personality types are described; between them some that are not included in the last DSM editions (like sadistic and sadomasochistic, masochistic, somatizing, depressive, anxious and dissociative personality patterns). Each personality type ends with a synopsis of the following items:

- Contributing constitutional-maturational patterns
- Central tension/preoccupation
- Central affects
- Characteristic pathogenic belief about self
- Characteristic pathogenic belief about others
- Central ways of defending.

The M Axis underlines the variety of mental functioning –and may offer a useful expansion of DSM axes II and V– by providing illustrative descriptions of ranges and adequacy of functioning within each of the capacities listed below:

- Capacity for regulation, attention, and learning
- Capacity for relationships and intimacy (including depth, range, and consistency)
- Quality of internal experience (level of confidence and self-regard)
- Capacity for affective experience, expression, and communication
- Defensive patterns and capacities
- Capacity to form internal representations
- Capacity for differentiation and integration
- Self-observing capacities (psychological-mindedness)
- Capacity to construct or use internal standards and ideals (sense of morality).

The S Axis builds upon the manifest symptom descriptions of DSM-IV-TR by laying the emphasis on the patient's subjective experience of symptoms. Descriptions of affective states, mental content, somatic experiences, and relational patterns are added, along with clinical examples. The symptom-pattern section is placed third since the authors state 'that such patterns can be understood only in the context of the patient's overall personality structure and profile of mental functioning'.

A major aim of the PDM group was to broaden the horizons of current psychiatric practices by emphasizing the invaluable role of personality and mental functioning on health and disease. The effort to compromise with current phenomenological classifications may be simultaneously its significant advantage and its major disadvantage. Disadvantage, as it may be unsophisticated in characterizing psychological processes and etiological constructs that had always been at the core heart of psychoanalytic thought. On the other hand it may be a very useful complement to DSM-IV-TR and ICD-10 followers, independently of their involvement with psychoanalysis. It could be helpful to those who are mostly influenced by other traditions, biological, cognitive-behavioral or family oriented and those colleagues who are new in the puzzling field of psychiatry.

The PDM is self-published and is available online at www.pdm1.org and at other e-bookshops (e.g. amazon) at a surprisingly affordable price.

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**Εγχειρίδιο Ψυχοδυναμικής Διάγνωσης (PDM)
Ομάδα Εργασίας PDM (2006). Silver Spring,
MD: Συνεργασία Ψυχαναλυτικών Οργανώσεων**

Το Εγχειρίδιο Ψυχοδυναμικής Διάγνωσης (PDM) επιχειρεί να διευρύνει τη δυνατότητα της σύγχρονης Ψυχιατρικής να κατανοήσει την ψυχιατρική νοσολογία, ενσωματώνοντας στα τρέχοντα διαγνωστικά συστήματα τη μακρά ψυχαναλυτική παράδοση, που αφορά κυρίως στην κατανόηση της προσωπικότητας. Σε συμφωνία με τη φαινομενολογική προσέγγιση του DSM-IV-TR και του ICD-10, το PDM πραγματεύεται σε μια εύκολα προσιτή γλώσσα τη φαινομενολογία της ψυχοπαθολογίας, χωρίς όμως να υπεισέρχεται σε ερμηνευτικές ψυχοδυναμικές προσεγγίσεις. Το βιβλίο χωρίζεται σε τρία μέρη. Το πρώτο μέρος πραγματεύεται τις ψυχικές διαταραχές της ενήλικης ζωής, το δεύτερο τις ψυχικές διαταραχές της παιδικής και εφηβικής ζωής και το τρίτο μέρος τα εννοιολογικά και ερευνητικά δεδομένα που αποτελούν την επιστημολογική βάση του βιβλίου. Στα δύο πρώτα μέρη, το βιβλίο χρησιμοποιεί μια διαστασιακή προσέγγιση που είναι σε αντιστοιχία με το σύστημα αξόνων του DSM, οργανώνοντας την ύλη στον άξονα της προσωπικότητας (P), στον άξονα της ψυχονοητικής λειτουργικότητας (M) και στον άξονα της υποκειμενικής εμπειρίας (S). Αν και το PDM έχει βασισθεί τόσο στον τίτλο, όσο και στη δομή του στο DSM-IV-TR, η προσέγγισή του είναι πιο ολιστική, συμπεριλαμβάνοντας τη λειτουργία της προσωπικότητας, την έκφραση των συναισθημάτων, τους μηχανισμούς άμυνας, τους προσαρμοστικούς μηχανισμούς και τις διαπροσωπικές σχέσεις.

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