

Act and the concerns of their effect on civil liberties resulting in the shelving of these proposals.

The role of medication, the side-effects and benefits are explained, again though with an assumption that most individuals adhere to treatment regime. Neat and tidy, if the person can be relied upon to keep a treatment diary – many cannot.

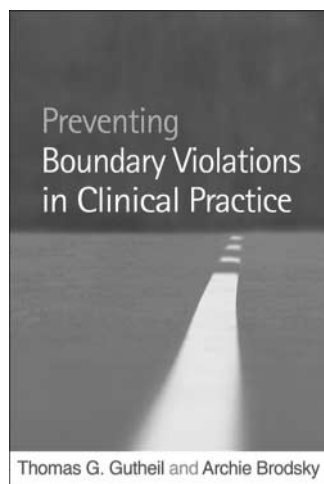
There are useful chapters on the place of the carer and the need for balance in responsibility to ensure a carer's own wellbeing. It is wonderful to read that blame for the illness of a loved one should not be shouldered – easier said than done.

The ability of an individual to access the correct benefits and allowances makes all the difference between living an independent and dignified life and one that is not so 'privileged', therefore the comprehensive chapter on these issues is invaluable and places this book ahead of many others for practical help.

To sum up, a lot of information is contained in this concise book, which makes it a valuable reference, particularly for people confronted with a shocking diagnosis of schizophrenia for the first time.

Lynn Dyer Correspondence c/o The Royal College of Psychiatrists, 17 Belgrave Square, London SW1X 8PG, UK. Email: bjp@rcpsych.ac.uk

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Preventing Boundary Violations in Clinical Practice

By Thomas G. Gutheil & Archie Brodsky. Guilford Press. 2008. US\$38.00 (hb). 329pp. ISBN: 9781593856915

Would you accept: (a) a handshake, (b) a lift, (c) a drink from a patient? Perhaps in a multiple-choice ethics examination you might avoid giving the impression that you were embarking on the famous 'slippery slope'. In real life, you might be somewhat puzzled at these situations having become apparently 'problematised'. Yet this is apparently the case for psychiatrists in the USA, following the extensive focus on boundary violations, with sexual misconduct being the most serious. In the view of the authors, the concept of the slippery slope has given rise to extensive constraints and fear of legal action or professional complaints, deriving more from overzealous risk management than the good of the patient.

Gutheil & Brodsky derive their thinking and material from hours of discussion over many years at the Program in Psychiatry and the Law at Harvard Medical School. Their expertise is evident. The chapter on self-disclosure is particularly helpful in inducing reflection and considering wider options than in Britain, where they tend to range only from 'disclose nothing personal under any circumstances' to non-discussion and personal idiosyncrasy.

Psychiatrists, used to asking the questions, may be taken aback by a more 'equal' approach and being asked 'Tell me, doctor, are you gay?' or 'Do you find me sexually attractive?'; though 'Do you have children?' is not uncommon. Sometimes, honesty and straightforwardness is best, sometimes asserting that the question is 'not part of therapy', sometimes reversing the question by replying, for instance, 'What would it mean to you if I did find you sexually attractive, or if I did not?' The ethical standard recommended is that the response should be for the benefit of the patient.

Encounters in the community may be tricky. Therapists are advised that attending a patient's funeral is usually all right, as it may be appreciated by the bereaved family. On the other hand, attending a wedding has potential pitfalls – one might be asked to dance with one's patient or be perceived as trying to drum up custom on the basis of success.

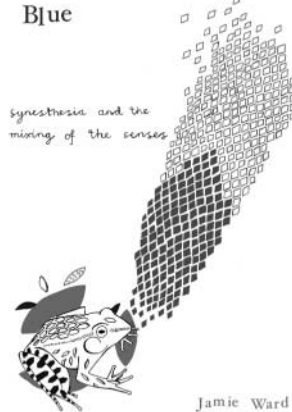
Gutheil & Brodsky are clearly most used to transference-based analytic work in private office practice and their references to community and hospital psychiatry or other forms of therapy are brief and artificial, though an attempt is made. In the UK we have been slow to realise the extent of professional abuse of patients and give serious consideration to boundary issues, yet it is evident that remedies will depend so much on context that books such as this one almost require translation.

Fiona Subotsky Emeritus Consultant Child and Adolescent Psychiatrist, South London and Maudsley NHS Trust. Correspondence c/o The Royal College of Psychiatrists, 17 Belgrave Square, London SW1X 8PG, UK. Email: bjp@rcpsych.ac.uk

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The Frog Who Croaked Blue

Synaesthesia and the mixing of the senses



The Frog who Croaked Blue. Synaesthesia and the Mixing of the Senses

By Jamie Ward. Routledge. 2008. £8.99 (pb). 192pp. ISBN: 9780415430142

Synaesthesia is a fascinating phenomenon (or group of phenomena) in which stimulation of one sensory modality apparently leads to sensory experience in another modality (e.g. sounds producing visual experience of colour, as in the example that gives this book its name), but it has often been seen as a diverting curiosity rather than a subject deserving serious scientific study. In recent years this situation has changed and synaesthesia has attracted the attention of prominent psychologists and neuroscientists. Jamie Ward, a senior research psychologist at the University of Sussex, has emerged as one of the leading experts in the field, and has now written this short but compelling book, the first full-length 'popular science' treatment of the topic.

Ward begins with an entertaining survey of historical reports, before reviewing more recent work aimed at the elucidation of the mechanisms underlying synaesthetic experiences and the implications of this research for our understanding of sensory processes and perceptual awareness. The closing chapter is more speculative, as he ponders far-reaching questions around evolutionary psychology, language development and the structure of memory. These ideas are firmly rooted in what has gone before and do not feel contrived or excessive. Along the way, an extraordinary amount of work from experimental psychology and other disciplines (e.g. anthropology and linguistics) is used to bolster and illuminate the key arguments. Ward has mastered the art of popular science writing: the style is engaging and accessible throughout, and there is a coherent narrative flow as the ideas are developed. Those who have become wary of popular treatments of neuroscience will be gratified by the clarity of the author's thinking, which avoids or cuts through the simplistic reductionism and other conceptual confusions that often mar

books on the brain. My only criticism is that the discussions of neuroanatomy might have benefited from being supplemented with simple schematic illustrations, but this is a minor point. The extensive notes and references (happily these are included at the end, rather than sprinkled all over the text) enable readers to explore further should they wish.

This is not a book about mental illness (as Ward stresses, there is no reason to view synaesthesia as a deficit or a diagnosis), but nevertheless it deserves a wide readership among psychiatrists. It is highly recommended to anyone with an interest in the science of conscious experience – a category that surely includes readers of this *Journal*.

Nick Medford The Brighton and Sussex Medical School, University of Sussex, Falmer Campus, Brighton BN1 9PX, UK. Email: n.medford@bsms.ac.uk

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