

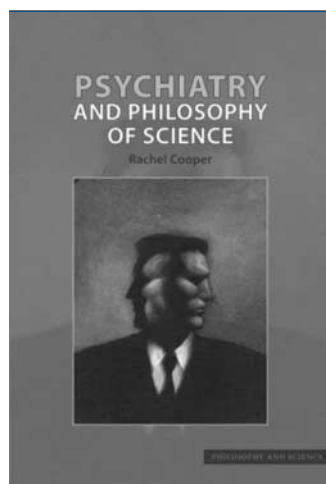
tendency to be self-centred. The theory becomes increasingly complex and the authors identify other essential cognitive processes commonly dysfunctional in personality disorder. But, importantly, they link the cognitive dysfunctions to interpersonal interactions, which instantly brings clinical relevance to the subject.

The authors have organised each chapter to ensure that relevant aspects of their theory are illustrated clinically, using sessional material for each of the personality disorders. This brings the book to life. The reader who is interested in psychotherapy discourse will find this book a veritable treasure trove. What the book does not do is tell you how to implement the treatment. But it does provide handy 'hints' – for example most individuals with personality disorder cannot easily self-reflect so techniques stimulating within-session scrutiny between patient and therapist are best left until later in treatment.

Overall, this book forms part of an ambitious attempt to create a coherent understanding of personality disorders and to offer treatment consistent with that understanding. For some it will be a little too deconstructivist as a model. It is also not for the reader who is naïve about treatment methods or who has limited understanding of personality disorder. But I would urge those who are well-versed in the literature on personality disorder to read this book.

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Psychiatry and Philosophy of Science

By Rachel Cooper.
Acumen. 2007. £16.99 (pb). 197pp.
ISBN 9781844651085

In this book psychiatry is viewed by Cooper (a philosopher of science) as an area of intellectual endeavour and academic research. However, despite the obvious appeal such an approach will have to many psychiatrists, the book is also aimed at philosophers of science, who, to their credit, are increasingly being drawn to sciences other than physics (indeed, the book appears in Acumen's series 'Philosophy and Science'). Cooper describes these twin goals thus:

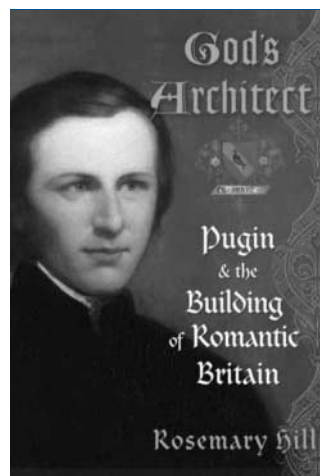
'For readers interested primarily in psychiatry I shall show that psychiatry is similar enough to other sciences for ideas from the philosophy of science to be helpful in solving conceptual problems within psychiatry. For readers interested primarily in the philosophy of science I shall show that psychiatry is different enough from other sciences for an investigation of psychiatry to enable old problems in the philosophy of science to be viewed from a new and fruitful angle' (p. 1).

The book is made up of ten chapters, with the central eight divided between four themes: the nature of mental illness; explanations in psychiatry; relations between theories; and managing values and interests. All the chapters are remarkably strong, covering topics such as randomised controlled trials and the pharmaceutical industry, reductionism, the nature of disorder and whether mental illnesses are myths. For me, the two most thought provoking were the second chapter on explanations in psychiatry (individual case histories), and the first chapter on the relations between explanations (when paradigms meet). The latter chimed with my own anxiety that psychiatry was not a unitary science at all, but rather a practice which drew on numerous sciences of varying degrees of rigour. Cooper is more optimistic and suggests that psychiatry is a multi-paradigm discipline. However, this optimism is tempered by a realistic appreciation of the problems this plurality can bring: competition between professionals and researchers, hegemony of one paradigm over others and difficulties in communication between workers in different paradigms. Here, she suggests, the DSM may serve as a 'contact language', a common reference point to orientate different research and clinical approaches. The chapter on individual case histories will resonate with clinicians used to Jasperian terminology: Cooper discusses the limits of understanding, rationality and the role of individual events in a history in enabling one to simulate the mental state of another and, in turn, empathise and make predictions.

The book is clearly written, succinct and the author wears her great learning lightly. In contrast to many philosophy of psychiatry texts, Cooper draws widely and predominantly on the psychiatric, rather than the philosophical, literature. The book is highly recommended to all psychiatrists interested in the questions that underpin their professional activities, as both clinicians and researchers. By the time I had finished the book I had noted several cited by Cooper that I rushed off to order and am now reading; I can think of no greater praise.

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God's Architect. Pugin and the Building of Romantic Britain

By Rosemary Hill. Allen Lane. 2007.
602pp. £30.00 (hb).
ISBN 9780713994995

In this biography the relationship between mental disorder and creativity in of one of Britain's most prominent architects is examined.

Born in 1812, Augustus Welby Northmore Pugin was the son of a French émigré artist, who ran a drawing school in London,