

benzodiazepine–GABA (γ -aminobutyric acid) receptor may be central to an understanding of the neurobiology of panic disorder, but credence is also given to information from investigations of noradrenergic and serotonergic systems. In an outlining of investigations of respiratory control in panic disorder an interesting argument is developed; that the noradrenergic locus coeruleus represents part of a ‘suffocation detector’ which might be inappropriately activated in the course of a panic attack. Four chapters cover drug treatments for panic, including as widely different agents as imipramine, moclobemide, alprazolam, paroxetine and lithium. These occupy more than a third of the text – this exposition of neurobiological theorising and the results of drug treatment is comprehensive and up to date.

By contrast the chapters addressing psychological perspectives are poorly focused. A single chapter covers psychoanalytic, psychodynamic, behavioural and cognitive theories, and another outlines treatments derived from them, concluding that all have their merits. This aspect of the book lacks depth and detail, and conveys the impression that psychological research and practice are ‘also rans’. Although cognitive–behavioural therapy is referred to it is barely given more coverage than other forms of treatment, despite the fact that many authorities regard it as the treatment of choice. Furthermore, the central role of behavioural experimentation and its theoretical foundations are not emphasised.

Four chapters concern nosology, epidemiology, comorbidity, clinical course and economic aspects. These remind the reader that panic disorder occurs in many cultures although details of presentation vary, that it is associated with identifiable and partly inheritable premorbid vulnerability factors, that it is poorly recognised and thus frequently left untreated, and that it is responsible for considerable economic and social disruption.

Although the editors aspire to psychobiological integration, the book favours a psychopharmacological approach. Intriguingly the range of neurobiological models and treatments offered proves to be no more focal or conclusive than the proffered range of psychological models and treatments.

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Obsessive–Compulsive Disorder: Practical Management (3rd edn)

By Michael A. Jenike, Lee Baer & William E. Minichiello. London: Mosby, Boston & Harcourt Brace. 1998. 885 pp. £50.00 (hb). ISBN 0-8151-3840-7

Research into obsessive–compulsive disorder (OCD) is advancing on many fronts: from genetics to phenomenology, to neuroimaging, to treatment by medication and psychological approaches including some guided by computer. Much of the recent progress made is detailed in this encyclopaedic volume. It is edited by three of the leading workers in the field. All but two of the 43 contributors to its 30 chapters are from the USA. The majority of those authors are from the east coast with far the greatest cluster from the Massachusetts General Hospital, Boston. Contributions are of a high order, often with detailed references to 100–200 or more articles.

Various chapters in this massive tome cover the clinical picture – epidemiology, clinical aspects, features in juveniles, personality disorders and OCD, pregnancy and OCD, so-called OCD spectrum disorders (Tourette’s syndrome, trichotillomania), pathophysiology and assessment. Half the text reviews treatment by medication, behavioural and cognitive methods (including group and family issues, when using those methods), neurosurgery, and points to be taken into account with religious patients. There are detailed guides to practical clinical management with case examples. Two appendices are guides for consumers in readable style, one for patients and another for parents of children and adolescents with OCD. A contact list of support groups in the USA runs to 50 pages and in other countries to seven pages. Commonly-used rating scales are reprinted.

Being really several books in one, the volume’s next edition could ease navigation so that each kind of reader could quickly look up what interests them in particular. Adding an author index would enable researchers to get to descriptions of particular studies. Editorial summaries of various parts of the volume would be helpful. Patients and their relatives would benefit from having more front-end highlighters to what might interest them within the mass of material; perhaps the main consumer-relevant parts could be pulled together into one section. It is surprising that the index does not include self-help, given that one of

the editors, Lee Baer, has written an excellent popular guide on the subject.

This compendium is a notable feat and is an essential reference work for all libraries and serious researchers. It brings into one volume a huge amount of information relevant to OCD, especially that from an American perspective, for researchers, clinicians, patients and their families.

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Management of Drug Users in the Community: A Practical Handbook

Edited by R. Robertson. London: Arnold. 1998. 420 pp. £19.99 (pb). ISBN 0-340-70013-0

From the mid-1980s there has been a progressive movement in the management of drug misuse from specialist treatment alone towards therapy in the community by a variety of care-givers. The latter centres on the general medical practitioner, albeit often in conjunction with the specialist. The transfer stemmed from two disparate factors: HIV infection and financial constraints. The present volume meets a need to update primary care practitioners about techniques within their reach that develop their comprehension, accessibility, assessment and treatment of drug misusers.

The text also contains information to broaden the perspective of psychiatrists. The chapters on psychiatric and other medical disorders as well as the descriptions of the social difficulties that underlie, accentuate or result from drug misuse are especially to be commended.

Bad luck attended the timing of the publication. Guidelines for the management of drug misuse have since been provided by the Department of Health, together with proposals for tighter restrictions in the UK on the prescribing of substitute methadone by general practitioners. The book would benefit from pruning of frequent repetitions between the authors of separate chapters and by abridgement of outdated and unrealistic attacks on drug laws.

Despite some shortcomings the editor and his international contributors provide a balanced narrative for those working in