

Book reviews

Edited by Allan Beveridge, Femi Oyeboode
and Rosalind Ramsay



**Bad Pharma:
How Drug Companies
Mislead Doctors and
Harm Patients**

Ben Goldacre.
Harper Collins 4th Estate. 2012.
£13.99 (pb). 364 pp.
ISBN: 9780007350742

Bad Pharma isn't funny – unlike the much praised predecessor, *Bad Science*. Goldacre's style is as sharp and entertaining as ever, but his tone is more sombre, concerned with the contamination of our evidence base and the harmful consequences for our patients. This is not just about the much discussed shortcomings of Big Pharma alone – regulators, journal editors, academics, doctors and patient organisations are all implicated in a failure to build a transparent, reliable, unbiased and safe knowledge framework for treatment decision-making that doctors and patients can share. His views are persuasive: he is not unearthing some 'cartoonish evil', but surveying instead the myriad practices that conspire to distort and tarnish clinical evidence. There are few out and out villains, as Goldacre points out – rather, there is evidence of ordinary human weakness: laziness, obstinacy, vanity, and plain perversity, often driven by banal self-interest. Just about everything in the book has been written about somewhere else – the sharp financial practice, misleading trial reporting, withholding of data, bizarre regulatory decisions, dubious marketing – but as far as I know, no one has put it all together so accessibly, or, importantly, constructively. Goldacre offers realistic solutions, every step of the way – and the Afterword outlines a modest prescription for action.

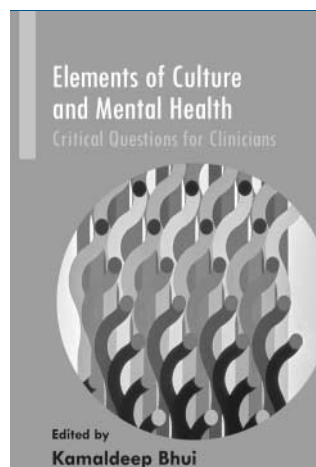
Psychiatric issues pepper the book. Goldacre is a member of the Royal College of Psychiatrists, and well placed to consider such things as the selective reporting of antidepressant trials, deliberately misleading antipsychotic comparisons, and the invention and extension of disease categories for marketing exploitation. A benign side-effect of this book is that it outlines some of the core skills doctors need to help manage information for patients (and themselves). Chapter 1, for example, in addition to showing the impact of withholding unflattering trial data, gives a gentle and concise introduction to systematic review and meta-analysis for the uninitiated; and chapter 4 is almost a training manual for spotting data manipulation in clinical trials: ideal for medical students in general and psychiatrists in particular. Sadly, this sort of wisdom does not match up entirely with contemporary medical curricula around the country, having to compete as it does with modules on 'psychogeography', and 'The Poetry of Thoracic Surgery – a Post-Modern Approach'. And if pharmacology had not disappeared from medical schools,

doctors would be better equipped to figure some of this stuff out on their own.

Goldacre does not really critique the limitations of systematic review and meta-analysis (where the art of deception can still happily operate, and sometimes does in the political shaping of guidelines), nor does he comment on the frequency with which systematic evidence synthesis simply reveals that there was never any sound evidence in the first place.

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**Elements of Culture
and Mental Health:
Critical Questions
for Clinicians**

Edited By Kamaldeep Bhui.
RCPsych Publications. 2013.
£15.00 (pb). 104 pp.
ISBN: 9781908020499

It is interesting to compare Kam Bhui's book with Philip Rack's pioneering volume *Race, Culture and Mental Disorder*, written 30 years ago by the founder of the Transcultural Psychiatry Society. This was a handbook which introduced mental health professionals to migration, dislocation, rejection and ethnic identity at a time when multiculturalism was promoted as the solution to racism, discrimination and ethnic disadvantage.

This new, slim but compendious book is informed by the present generation's clinical experience and research. There are 17 contributors to the 20 chapters, most of which are just 4 pages long, followed by about 2 pages each of references. Some of the chapters are far more theoretical than Rack's handbook and draw on sociology, social anthropology and epistemology. The quotations from Heidegger and Husserl in the chapter entitled 'Can psychotherapeutic interventions overcome epistemic difference?' might deter a newly qualified mental health professional who is looking for a practical guide. On the other hand, as a resource for more advanced clinicians and for researchers, this small, concise volume can serve as an excellent and up-to-date annotated bibliography. In the limited available space the book covers the whole spectrum of dilemmas and controversies, including the cross-cultural validity of Western diagnostic systems and the acknowledgement of 'race' in the transference.

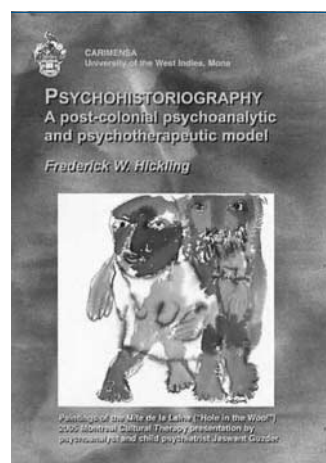
Several chapters helpfully show how to enhance the role of interpreters, who can be an invaluable resource for the clinician who is trying to decode unfamiliar idioms of distress. Included in Tribe & Qureshi's checklist of 15 recommendations for good practice when working with interpreters is the sensitive injunction to consider the well-being of the interpreter and the potential for vicarious traumatisation.

Faisal Sethi's chapter on ethnopsychopharmacology covers recent research on ethnic variation in pharmacogenetics, kinetics and dynamics. The chapter by Rathod & Naeem on cognitive-behavioural therapy for people from different cultural backgrounds reiterates Arthur Kleinman's explanatory model approach on how cultural orientation can influence psychopathology, illness attribution, help-seeking behaviours, care pathways and barriers to engaging with therapy. A chapter on the benefits and limitations of the cultural formulation includes the incisive caveat that an inflexible cultural formulation 'runs the risk of thematising the cultural perspective, losing the patient and their particular perspective in the process' (p. 48).

An excellent chapter by Rachel Tribe reviews the current debate on whether trauma-focused therapy is helpful for the survivors of crimes against humanity. Is post-traumatic stress disorder necessarily a pathological state or can it be a normal human response to exceptional events?

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doi: 10.1192/bjp.bp.113.127522



**Psychohistoriography:
A Post-Colonial
Psychoanalytic and
Psychotherapeutic Model**

By Frederick W. Hickling.
Jessica Kingsley Publishers. 2012.
£25.00 (pb). 234 pp.
ISBN: 9781849053570

The book appears to be a reprint of one published by Carimensa, University of West Indies in 2007, which is the copy sent to me for review. The author, Frederick Hickling, is well known for his innovative work at Bellevue Mental Hospital in Jamaica and his work in theatre. The first chapter, a verbatim print of Dr Hickling's inaugural lecture when he was appointed Professor of Psychiatry at the University of West Indies in 2002, forms an effective introduction to the rest of the book which describes the technique of 'psychohistoriography' and forms of psychotherapy derived from it.

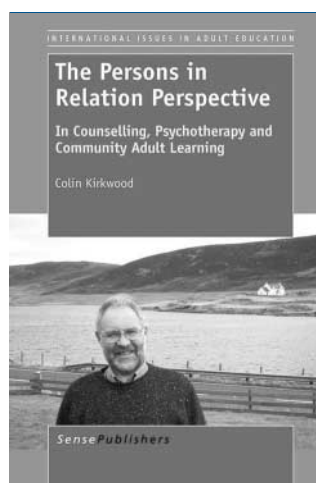
The book is written in a forthright style that suits the basic underlying themes – the penetration of racism into the psychiatric system and the way psychological exploration in large group settings can be mobilised to evolve a system of therapy when it is set against the historical background of the people concerned. While drawing from Fanon and other writers, many of the ideas and observations set out in this book come out of group work and storytelling conducted initially with people in the Caribbean, including patients in Bellevue Hospital, expanded during work with people in the USA, the UK and Canada. Dr Hickling effectively challenges traditional Western views about the genesis of 'mental illness'. Although the theory of what he calls 'European-American psychosis' may not be to everyone's liking, it certainly makes the point that the domination of the non-Western

world by the West has had a profound effect on the disciplines of psychology and psychiatry. What I found most interesting and helpful in this book were the detailed descriptions of 'cultural therapy' applicable to working with people from Black and other minority ethnic groups in Western settings.

The book is informative, easy to read and enjoyable; it is of general interest but is specifically useful for professionals in the mental health field working with people from Black and other minority ethnic backgrounds. However, I think it could have done with some editing: there is a fair amount of repetition across the chapters – in one instance, a whole paragraph is repeated – and some re-ordering of paragraphs and chapters may have helped. But the illustrations of group work by artist-psychiatrist Jaswant Guzder are a definite plus.

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**The Persons in Relation
Perspective:
In Counselling,
Psychotherapy
and Community Adult
Learning**

By Colin Kirkwood.
Sense Publishers. 2012.
US\$43.00 (pb). 204 pp.
ISBN: 9789460919077

This rather odd collection of essays, lectures, notes, and even an after-dinner speech, published in a series on adult education, may not at first glance appeal to an audience of psychiatrists. The book is the culmination of the personal journey and lifetime work of its author, a Scot of Presbyterian Northern Irish parentage who initially incorporated his studies of literature, Marxism, religion and philosophy into a career as an adult educationalist, then trained as a counsellor and psychotherapist in the Scottish Institute of Human Relations, subsequently spearheading significant developments in counselling training across Scotland.

Kirkwood's stated aim is to synthesise intrapersonal, interpersonal and sociocultural factors into a unified account of the theory and practice of psychotherapy, through the guiding principle of the 'persons in relation' perspective. Drawing from the work of three Scottish forebears – the philosopher John Macmurray, the psychotherapist Ian Suttie, and the psychoanalyst Ronald Fairbairn – Kirkwood's approach places human relationships firmly at the heart of our existence. Kirkwood contends that human beings do not live in isolation, but are 'persons' who are fundamentally constituted by their relationships with others, both past and present, and that self-realisation is inextricably bound with relating to others. Persons also have agency: they are not mere objects to be acted upon, but are *subjects* whose conscious and unconscious experiences enable them to know and act upon the world.