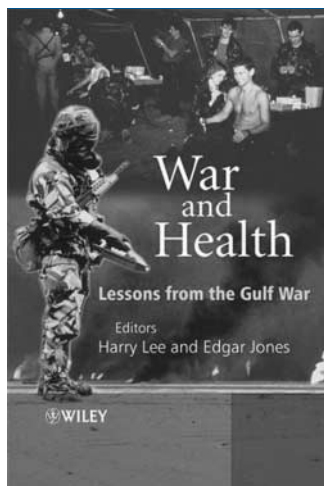


The book then moves on to look at what each different attachment status means for the individual, what is likely to be their developmental trajectory, their strengths and problems. Attachment disorder is then discussed and this is where the book becomes somewhat controversial. The authors go on to discuss interventions, those that are evidence-based and those that are not. They explain, for example, that although reactive attachment disorder is now recognised (DSM-IV) and there are some evaluated interventions, many professionals are using interventions not yet evaluated.

The book is well presented, each chapter has good headings and useful summaries. However, it is not the sort of book one reads straight through, but is a book to have to hand to help understand patients from an attachment perspective, or when considering a study.

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### War and Health. Lessons from the Gulf War

Edited by Harry Lee & Edgar Jones.  
Wiley. 2007. 154pp.  
£29.95 (pb).  
ISBN 9780470512296

There was a time when texts on military psychiatry were little more than a historical sideshow, of interest to the small fraternity of military psychiatrists and their more curious civilian colleagues. Sadly, with the prospect of warfighting in Afghanistan for the foreseeable future, increasing numbers of ex-service personnel are likely to present to National Health Service mental health services. Psychiatrists are singularly ill-equipped to deal with these – lacking an understanding of the unique stresses of service life as well as knowledge of the ways in which service-related psychopathology may present.

The first Gulf War (1991) has important lessons to teach: 16 years on, more than 6000 British veterans of the conflict (11% of those deployed) have developed a variety of disparate, seemingly unrelated, unexplained chronic, enduring, and sometimes disabling physical, cognitive and psychological symptoms. Considering that most of these individuals were previously fit to be deployed on military operations it is not surprising that many have attributed their complaints to Gulf service. Few, however, witness the ‘horrors’ of war or anything remotely meeting the ‘stressor’ criterion for a diagnosis of post-traumatic stress disorder.

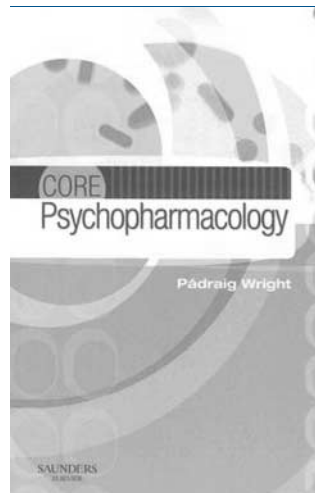
In their book, Lee & Jones summarise the evidence to date on Gulf War illness. Brief (and sometimes oversimplified) research findings are described in their historical, anthropological and cultural context. Gratifyingly, a chapter is devoted to the work of Combat Stress – the major UK voluntary service provider of mental health services to veterans providing invaluable support and one about which psychiatrists should know a lot more.

The book reminds us that there is a lot more to psychological trauma than post-traumatic stress disorder and makes an important philosophical point: in a psychiatric landscape ‘obsessed’ with operational diagnostic criteria many young psychiatrists have lost touch with their historical roots. How many of your trainees have read Jaspers lately? The book demonstrates the importance of context and rekindles (albeit obliquely) those Jasperian concepts of meaningful and causal connections which underpinned psychiatry for so many years – now (in my view) sadly forgotten.

*War and Health* is limited in its purview and the comprehensive text of military psychiatry encompassing current operations remains unwritten. Nevertheless, it is an excellent synopsis of a massive and disparate literature and if it helps colleagues treating veterans from the first Gulf War and whets the appetite for military psychiatry, then it will have done a very good job indeed.

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### Core Psychopharmacology

By Pádraig Wright. Saunders  
Elsevier. 2006. 272 pp. £29.99 (pb).  
ISBN 9780702028126

As a general adult psychiatrist I have found myself anxious to keep up-to-date with advances in psychopharmacology. However, I find it hard to keep clear in my mind the basics of drugs and their actions. My excuse (to myself, at least) is that these fundamentals are crowded out by the huge amount of clinical clutter involved in day-to-day psychiatric practice. I have read – and mostly failed to retain – the wealth of information and explanation in Stephen Stahl’s excellent *Essential Psychopharmacology*. British Association for Psychopharmacology courses have left me still feeling uneasy. Well, this little book is not a complete answer to my problems, but it does go a long way towards bringing the logic of pharmacology closer to the messy process of routine clinical activity.