

Motivational interviewing only gets a couple of passing references. The chapter on methadone gives interesting insight into the US healthcare system but, like other contributions, is more a polemic than a review. Only the dialectic behaviour therapy chapter deals in any depth with aspects of co-occurring addiction and psychiatric disorder.

For many practitioners in substance misuse and addiction psychiatry, the interface with local cultural influences is part of the fascination of the discipline. Successful international publications in addiction utilise international differences to enhance learning. This book, however, is too parochial and I could not recommend it.

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Addiction and Art

Edited by Patricia B. Santora, Margaret L. Dowell & Jack E. Henningfield. Johns Hopkins University Press. 2010. US\$29.95 (hb). 184pp. ISBN: 9780801894817

As the 'High Society' exhibition at the Wellcome Collection in London has shown, there is widespread interest in the influence of alcohol and drugs on our culture. If one examines Mike Jay's lavishly illustrated book of the exhibition,¹ it can be seen that drug use has a multifaceted relationship with the worlds of art and literature. Much of the artwork is celebratory and indicative of the initial lure of mind-altering substances. If Jay's book presents us with the intoxication of a Saturday night, then *Addiction and Art* gives us the hangover of a Sunday morning, multiplied many times over by the enslavement of addiction.

The 61 stark images included in this book were selected by an expert panel from a much larger pool of work, to give insight into the desperation wrought by addictive disorders and to increase public understanding of these disorders. A further purpose was to give hope for recovery, as many of the artists are themselves recovering from addiction. Some of these images appear to be a warning to the sober self as to where a return to drug use might lead. The hopeful images contrast poignantly with those commemorating people who have died through illness, overdose or suicide. I found the painting entitled *The Addiction Savior*, by a Baltimore funeral director, particularly striking as a response to the epidemic of premature death wrought by tobacco, alcohol and other drugs.

Each image is complemented by explanatory text from the artist on an opposing page. These pieces then are deeply personal and give insight into a variety of individual hells. In comparison

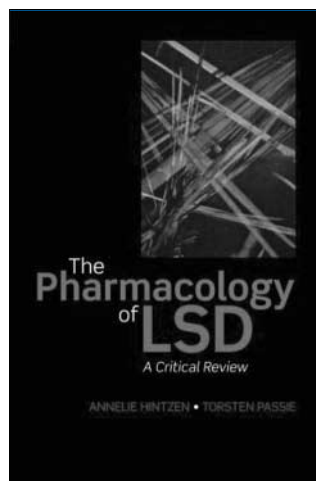
with, say, William Hogarth's *Gin Lane* or George Cruikshank's *The Worship of Bacchus*, there appears to be a lack of awareness of the social causes of the problems that are depicted. This book is very much influenced by the prevailing disease-model ideology of addictions in the USA, based on an emphasis on neurobiology at the expense of psychological and social understandings of addiction. I found myself doubting the claim put forward by the editors that science and art are reconciled here, with the art giving us the wide variety of personal experience that lies beneath the seemingly uniform surface of addictive disorders.

Ultimately, this is a worthwhile book, not only for the many striking images it presents, but also for showing how an involvement with art might for some prove therapeutic. The book does not stand alone and the project from which it is taken (www.addictionandart.org) appears to continue to thrive.

1 Jay, M. *High Society: Mind-Altering Drugs in History and Culture*. Thames and Hudson, 2010.

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The Pharmacology of LSD: A Critical Review

By Annelie Hintzen and Torsten Passie. Oxford University Press/Beckley Foundation Press. 2010. £29.95 (pb). 240pp. ISBN: 9780199589821

Many psychiatrists today are not aware of the role lysergic acid diethylamide (LSD) played in the profession in the mid 1950s. Heralded as 'the next big thing in psychiatry', this fascinating drug looked set to transform the management of 'neurotic' patients. But in the wake of the subsequent drug revolution LSD was banned and largely consigned to museums' shelves for the past 40 years. Until now.

Psychedelic research is enjoying a worldwide renaissance – with a major UK conference in April 2011 – and this book provides an impressive trawl through the database of over a 1000 pharmacological studies conducted on LSD in the past 60 years since the drug's discovery by Albert Hofmann. The book's approach to evidence for the experienced academic researcher is exhaustive, while also remaining accessible to psychiatrists and the lay enthusiast.

LSD is remarkable not least for stimulating the imagination of so many varied people. What other subject, ask the authors, spans the academic fields of biology, medicine, cultural anthropology, theology, botany, psychology and chemistry? Not to mention the drug's influence in religion, music and art.

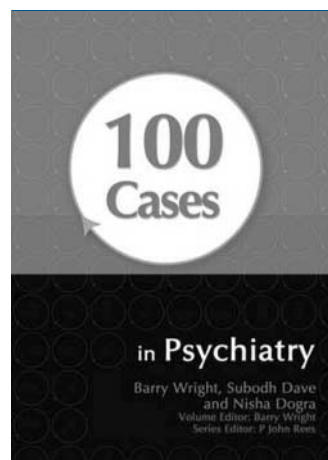
The authors illustrate the immense potency of LSD, its pharmacodynamics and what is known of its beguiling

pharmacokinetic properties. An extensive chemistry section outlines the many lysergic acid derivatives and the drug is described accurately as a non-addictive, tasteless, colourless, immensely potent substance with a virtually absent toxicity. After 60 years of sustained use by hundreds of millions of people there has never been a recorded human death from physiological overdose. As a pharmacology book it only touches on the subject of therapeutic uses. There are many psychiatric studies missing from the text and a disheartening lack of credit is given to the important role LSD played in psychiatry in the past. Likewise, the sections on the drug's psychological effects and particularly the phenomenon of spiritual experience – a hallmark of the LSD experience – are very brief indeed. For a more detailed review of these effects one is directed towards Masters and Houston's *The Varieties of Psychedelic Experience* (Henry Holt & Co, 1966) or many other texts of that period.

Nevertheless, overall this is an essential addition to the library of any self-respecting psychedelic enthusiast. Especially for those keen to swot up and join the resurgence of interest in what is undoubtedly the world's most famous molecule after DNA.

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100 Cases in Psychiatry

By Barry Wright, Subodh Dave & Nisha Dogra.
Hodder Arnold. 2010.
£20.99 (pb). 278pp.
ISBN: 9780340986011

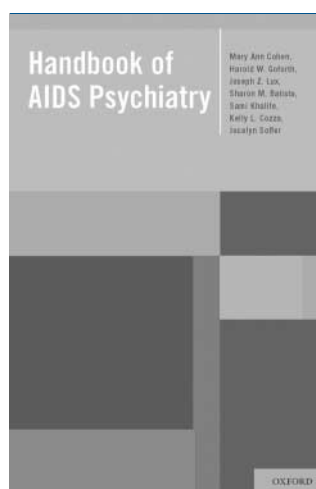
Senior house officers (SHOs) in liaison psychiatry and doctors working in any specialty are likely to meet on a regular basis patients whose presentation will tax their psychiatric knowledge. *100 Cases in Psychiatry* is aimed at doctors across all disciplines. As the title implies, the book consists of 100 examples of common clinical scenarios that practitioners may come across in various settings. Each scenario is set out on a single page, along with two or three questions to guide the reader's thinking. The examples cover a broad range of psychiatry, focusing especially on more commonly encountered situations but including those presentations it would be risky to miss. The stories are general enough to allow for pattern recognition but they are also idiosyncratic enough to feel real and interesting. The answers are to be found on the following page and manage to convey a lot of useful information in a concise format.

So who should buy this book? Clearly, SHOs in accident and emergency, and indeed any doctor who fears they may run into a psychiatric situation in which they may feel at a loss as to how to

proceed. Medical students might also find it a useful adjunct to their textbooks. The depth of the information and the more straightforward nature of many of the cases are probably not sufficient for psychiatric trainees preparing for examinations. However, the book would probably provide a valuable quick reference for new psychiatric SHOs facing their first on-calls. Finally, it may be a useful reminder for all psychiatrists of areas they do not usually cover but which they may sometimes encounter on call.

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Handbook of AIDS Psychiatry

By M. A. Cohen, H. Goforth, J. Lux, S. Batista, S. Khalife, K. Cozza & J. Soffer.
Oxford University Press USA. 2010.
£35.00 (hb). 398pp.
ISBN: 9780195372571

This handbook presents itself as a practical guide for AIDS psychiatrists and other mental health professionals. The preface notes that persons with severe mental illness and substance misuse tend to have a higher prevalence of HIV infection than the general population. The authors go on to say that they aim to provide insight into the interface between the psychiatric, medical and social dimensions of HIV and AIDS, 'because there is an ample body of evidence that psychiatric care can decrease transmission, improve adherence, and decrease mobility and mortality'. I am not sure I would be quite as upbeat as this.

Attitudes to AIDS have evolved in the Western world. One young man recently diagnosed told me that he was not shocked because 'it is a treatable disease now, isn't it?' Female HIV physicians have told me that they would rather have AIDS than breast cancer or insulin-dependent diabetes. We do not know whether the normalisation of HIV *vis-à-vis* other life-threatening or chronic diseases has contributed to the still relentless rise in infection rates in the UK.

The core clinical issue relates to the direct neuropsychiatric consequences of HIV infection, but this would make for a very short book – which this is not! In addition to the clinical chapters, there are sections on HIV through the life cycle, strategies for primary and secondary prevention of transmission, psychiatric aspects of stigma, palliative and spiritual aspects of care, ethical and legal issues, and resources for caregivers.

Detailed and informative as it is, this book is oriented to the USA, and its biomedical focus means that it misses some of the major practice issues we encounter in an HIV mental health service in London. (At the time of writing, we are at risk of being