

factor for assessing sexual recidivism: maturation. Based on review of present evidence, the chapter authors note a pattern of gradual, linear decrease in average recidivism rates from ages 25 to 70, at which point the estimated recidivism rate is close to zero. The chapter also provides a concise review of the effects of aging on male sexual physiology, which complements the information in another chapter dealing with medical models and interventions in sexual deviance.

This is not a book that is likely to be read straight through. Instead, I suspect that the forensic practitioner will more productively use the book by first reading the chapters that are broadly relevant and afterward choosing chapters which are relevant to clinical cases at hand. Used in this manner, the chapters dealing with the assessment and treatment aspects of each paraphilia are particularly useful. For the less common paraphilias, this book alone will be more than sufficient. For the more common clinical syndromes, such as pedophilia, and rape, this book will serve as a useful starting point or a source to turn to for a quick review of up-to-date information.

Even for those who have the first edition on the bookshelf, this second edition is recommended. The additional areas covered in this new edition of the book alone make it worth the purchase price. For those considering this book for the first time, it is highly recommended. The book is a definitive starting point for any review of sexual deviance and paraphilias. I expect that it will replace the first edition as one of the key references in the field of sexual deviance.

Neuropsychology in the Courtroom: Expert Analysis of Reports and Testimony

Edited by Robert L. Heilbronner. New York: The Guilford Press, 2008. 273 pp. \$55.00.

Reviewed by Stephen I. Kramer, MD

This book serves as a sequel to the editor's previous volume, *Forensic Neuropsychology Casebook*, published in 2005. Both publications are primarily intended for graduate students in neuropsychology, although forensic psychiatry fellows, attorneys, and judges are also likely to benefit from reading this new contribution. Individual chapters are written by sub-

specialty neuropsychology experts who use a curious mixture of conversational tone and technical interpretation of neuropsychological test performance to illustrate concepts and to educate readers.

Heilbronner divides the text into three parts: case analyses, forensic case analyses with opposing expert reviews of the same materials, and special topics. Topics of interest to forensic psychiatrists include adult and child traumatic brain injury, anoxic brain injury, electrical brain injury, personal injury litigation, toxic torts, disability assessments, and independent educational evaluations.

Contributors comment on their individual methods of case review and forensic examination; this material lends a supervisory tone to the entire work. The analyses of specific neuropsychological tests and profiles are quite technical. Familiarity with the specific instruments is almost essential for readers to benefit optimally from the discussions; however, they should be relatively easy for the seasoned forensic neuropsychiatrist to follow.

There is considerable commentary about forensic practice ethics, confidentiality, *Daubert* challenges, the Individuals with Disabilities Education Act (IDEA), and neuropsychological report review that will reinforce basic concepts for the beginner, but may prove somewhat tedious for the more experienced forensic practitioner. Some authors display an entertaining degree of bravado as they recount the march to case settlement.

Two chapters devoted to multiple chemical sensitivity syndrome could have been combined to improve the introduction to the entity and to sharpen the authors' focus on disability claims review. On the other hand, separate chapters on opposing expert reviews of the same materials related to a case of minor traumatic brain injury are well-designed and quite instructive. The chapter on misdiagnosis of minor traumatic brain injury contains superb discussions about false-positive diagnoses and the psychometrics of test batteries. The chapter deserves a place on required reading lists for forensic fellows.

There are particularly excellent discussions for the novice forensic examiner, including: detecting incompetent reports, the effects of pain on neuropsychological test performance, the selection of fixed or flexible approaches to testing, the pitfalls of deficient analysis of case material, the development of questions for cross-examination, and the misdiagnosis of minor traumatic brain injury. Bibliographic refer-

ences at the end of each chapter are sparing, though well selected, and include professional organization guidelines current to 2007.

Areas of concern include the occasional superficial discussion of neuropsychiatric disorders such as concussion, and chapters written by non-physician authors who stretch their scope of practice by offering specific medication recommendations. While this practice is often encountered in the clinical setting, it seems inappropriate as a model for trainees, practitioners, or forensic specialists. On balance, this book has much to offer clinically and pedagogically to forensic practitioners.

Clinical Handbook of Psychiatry and the Law

By Paul S. Appelbaum and Thomas Gutheil. 4th edition. Philadelphia, PA: Lippincott Williams & Wilkins, 2007. 332 pp. \$99.00.

Reviewed by LaRissa Chism, MD

Eight years after the publication of the last version, the fourth edition of *Clinical Handbook of Psychiatry and the Law* lives up to the reputation established in prior renderings. Authored by AAPL Past Presidents and past Guttmacher Award winners Paul S. Appelbaum and Thomas Gutheil, this book is a reference designed to assist its readers in competently navigating the evolving terrain that is psychiatry and the law. Much like before, this update strives to adhere to the commitment made paramount in earlier editions: to provide an accessible reference that brings “clinicians the most up-to-date guidance possible on how law affects clinical practice, and how psychiatry can contribute to the law.” The text accomplishes this goal while still utilizing the presentation format of the first edition.

The book’s eight chapters cover the following subjects: confidentiality and privilege, emergency psychiatry, inpatient psychiatry, malpractice and other forms of liability, competence and medical decision-making, forensic evaluations, clinicians and lawyers, and the clinician in court. Each chapter is further divided into seven sections. These sections uniformly begin with relevant case examples designed to underscore and illustrate the legal concepts associated with the chapter. These well-written and often poignant clinical case scenarios help prepare the reader to ex-

amine the sections that follow on legal concepts, clinical concerns, and pitfalls. The pitfalls section is designed to assist clinicians in negotiating potentially conflicting agency roles that can, at times, pit legal interests against clinical ones. Each chapter’s concluding three sections consist of case example epilogues that provide follow-up to the introductory vignettes, an action guide, and suggested readings. The up-to-date references are arranged by subject headings that reflect the themes of the corresponding chapter sections. Thus, the last two sections of each chapter serve to review and to reinforce material presented in that chapter.

The *Handbook’s* defining feature continues to be its organizational structure. While this format is no longer a novel one, the framework supports the introduction of new material quite effectively. The continued inclusion of historical perspectives, from which modern statutes and standards have evolved, aids in making this work more comprehensive and useful. One such example is the elucidation of problems affecting confidentiality in today’s technological age. The authors examine legal concerns involving clinical use of electronic equipment, including computerized records, faxes, e-mail, answering machines, cell phones, and wireless phones.

As psychiatrists are increasingly called upon to provide legal testimony, the chapters that focus on clinicians’ appearing in court and working with lawyers are standouts. These portions of the text assist the reader with navigating through potentially stressful clinical situations within an inherently adversarial arena. Whether as fact witness or expert witness, the reader is kept mindful of the discordant orientations that exist between the medical and legal worlds. This reality can be a challenge for practitioners at any level.

The text is especially useful for professionals who invariably find that their current practice trends have been influenced and shaped by legal developments. While the book is not a how-to manual for forensic psychiatric practice, it provides a conceptual framework for establishing and maintaining a competent psychiatric practice that is up to date and reflective of current medicolegal standards. This award-winning book, with its well-organized chapters and user-friendly format, will be a welcome addition to the reference collections of clinicians and forensic psychiatrists, including those practitioners who are familiar with previous editions.