

Book Reviews

COCAINE ABUSE: NEW DIRECTIONS IN TREATMENT AND RESEARCH. Edited by HI Spitz and JS Rosecan. New York: Brunner/Mazel, 1987. xx + 338 pp. \$35.00.

Reviewed by Daniel P. Greenfield,
MD, MPH

The editors of this book are both psychiatrists, a family and group psychotherapist and a cocaine abuse clinician and researcher, respectively. They have assembled a broad-based overview of current thinking in the field of cocaine abuse.

The book begins with a historical review of cocaine abuse and treatment, followed by two chapters on neurobiological aspects of cocaineism in animals and man. Next, an in-depth series of chapters reviews individual, group, family, hospital, and pharmacologic treatment approaches. This cohesive, detailed section is of particular value to the mental health professional whose primary activities are not in substance abuse. The last section ("Future Directions") provides perspectives on treatment and research by individuals active in this field.

The only strictly forensic application in the book is a brief mention of legal aspects of drug testing in the workplace. For information about forensic aspects of cocaine and cocaine abuse (such as

possible mitigating effects of cocaine on criminal responsibility issues; intoxication defenses; effects of cocaine on civil and criminal competency issues; alternative sentencing for cocaine rehabilitation; and many other such forensic issues) the reader must go elsewhere.

THE ANATOMY OF ILLUSION: RELIGIOUS CULTS AND DESTRUCTIVE PERSUASION. By TW Keiser and JL Keiser. Springfield, IL: Charles C Thomas, 1987. No price available.

Reviewed by David A. Halperin, MD

The Anatomy of Illusion is a provocative and comprehensive examination of the process of destructive *qua* coercive persuasion. Written in a straightforward and jargon-free manner, it examines the process of cult recruitment and affiliation, focusing on the process in which the individual dissolves his or her preaffiliation identity and takes on a new cultic persona. Although the book emphasizes the voluntary nature of the process of identity reformation, it notes that a coercive atmosphere may be present during the process of recruitment and stresses the importance of deceptive recruitment practices in attracting new members. The book stresses the ways in which cultic groups are able to exploit the laissez-faire attitudes pervasive in the broader society and essentially distort the intention of constitutional guaran-

tees in the service of cult recruitment and organization. In examining the rationalizations of cult apologists, it provides a needed focus on their apparent concern for the protection of liberties for bizarre and often destructive groups while being seemingly unconcerned about the liberties of their individual members. The book's succinct and direct presentation of the forensic issues that arise when considering destructive persuasion should be beneficial both for mental health professionals and attorneys.

A major deficiency of the book is the almost total absence of either references to literature or developments, both therapeutic and forensic, in this field since 1981. Prior to the establishment of such facilities as the Cult Hotline and the Jewish Board of Family and Children's Services New York Clinic, few options were available to families other than involuntary deprogramming. Indeed, the book may leave parents and other concerned professionals with the feeling that if they are not willing to contemplate the hazards of involuntary deprogramming, little is left to them other than waiting for the family member's disillusionment with the cult group. The creation and continuance of the above-cited clinics is evidence that a voluntary program that emphasizes a therapeutic approach in which families are encouraged to examine their patterns of communication in an open setting is often exceedingly effective. Nonetheless, despite this limitation, *The Anatomy of Illusion* presents a thoughtful, clearly written, and useful summary of a central aspect of

the entire area of cult membership—why do they join and why do they remain? Thomas and Jacqueline Keiser have helped to illuminate for us the obscurities that pervade this area.

STRESS, CROWDING, AND BLOOD PRESSURE IN PRISON. By AM Ostfeld, SV Kasl, DA D'Atri, and EF Fitzgerald. Hillsdale, NJ: Lawrence Erlbaum Associates, 1987. xi + 240 pp. \$29.95.

Reviewed by Bruce Harry, MD

This is a fascinating volume that reports the results of several studies concerning the relationship between environmental stresses and health in prisons. The authors first give results from their pilot investigation of the relationship between assignments in housing security levels and blood pressure readings among inmates. Using this as a departure point, they then develop and proceed to test several hypotheses in a series of studies.

Their main piece of research is a multivariate work exploring the relationships between numerous sociodemographic, situational, and psychological independent variables, and systolic and diastolic blood pressure readings as dependent variables, among prisoners over an 18-month follow-up interval. Their study design is straightforward, and their methods of data collection and analysis could serve as useful models for conducting other research.

However, the authors report many

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other useful and practical findings. They look at how inmates spend their time during incarceration, report an incredibly revealing study of the health status of inmates during prison, and finally examine job-related measures of stress among correctional officers (an often overlooked group). Each of these studies yields important and relevant findings.

This is a somewhat esoteric book that could have been more lively. However, it is well worth the price and effort to those who practice in prisons.

ISSUES IN FORENSIC PSYCHIATRY: INSANITY DEFENSE, HOSPITALIZATION OF ADULTS, MODEL CIVIL COMMITMENT LAW, SENTENCING PROCESS, CHILD CUSTODY CONSULTATION. By the American Psychiatric Association. Washington, DC: APA Press, 1984. 257 pp. \$15.00.

Reviewed by Neil Blumberg, MD

Issues in Forensic Psychiatry is a collection of guideline and position statements addressing five major areas of forensic psychiatry: the insanity defense, hospitalization of adults, civil commitment, the sentencing process, and child custody consultation. All of these reports were approved or sponsored by the American Psychiatric Association and have appeared as separate publications elsewhere.

Although other resources are neces-

sary to provide a comprehensive understanding to the reader of the various topics covered, all five reports are essential basic data for the general psychiatrist, and especially the forensic psychiatrist. Having one book to refer to for basic forensic information makes this small paperback a convenient and worthwhile addition to one's library. I would recommend this book to any psychiatrist or other mental health professional who is interested in or deals with forensic issues. In addition, this book would be an excellent resource and study guide for those preparing for their Forensic Board Examination, since they will undoubtedly be tested in all of these areas (and very likely on the specifics of certain of these reports).

INTERVENTIONS FOR CHILDREN OF DIVORCE: CUSTODY, ACCESS, AND PSYCHOTHERAPY. By WF Hodges. New York: Wiley, 1986. x + 374 pp. \$41.50.

Reviewed by Stephen P. Herman, MD

William F. Hodges, a psychologist, has set about the seemingly impossible task of writing a comprehensive text and manual for mental health professionals, lawyers, and judges. That he succeeds so well is a credit to his superb organization and exposition. It is also a testimonial to the reality of the overlap of these professions in this era of divorce, litigation, remarriage, and the best interests of children.

Taking a developmental view throughout the book, the author reviews the anticipated short- and long-term reactions to divorce and separation in children and adolescents. He provides well-referenced chapters on mediation, custody evaluations, visitation, single parenting, and step-parenting. Each of these chapters provides an excellent overview of these subjects and contains material sure to interest even the most experienced attorney or mental health clinician. The final chapters review various ways to help families before, during, and after the divorce. A chapter on psychotherapy with children may seem rather elementary to most practicing therapists. However, the review of school intervention programs throughout the country is informative and provocative.

This book has much to offer forensic psychiatrists and is highly recommended for beginners as well as those advanced in the field. There is a wealth of information here, both in terms of substantial literature reviews as well as practical, realistic advice for those on the front line.

DIVIDED STAFFS, DIVIDED SELVES: A CASE APPROACH TO MENTAL HEALTH ETHICS. By SJ Reiser, HJ Bursztajn, PS Appelbaum, and TG Gutheil. New York: Cambridge University Press, 1987. xiii + 150 pp. \$29.95.

Reviewed by Howard W. Telson, MD

This volume is designed to be an aid in the teaching of mental health ethics. The first half contains essays that succinctly review the history of the so-called medical ethics movement of the past 20 years, the philosophical basis of clinical decision-making (with an emphasis on psychiatry), and the various possible approaches to integrating ethics into clinical teaching. The second half contains case synopses, divided into 10 chapters, on topics such as "Truth-telling" and "Allocation of Resources." The cases are each followed by a selection of questions that might serve to encourage broad philosophical exploration and creative thinking in working to develop effective, ethically-sound solutions to new clinical problems.

The book will be of most value to teachers who work with clinicians and want to use a range of clinical material (not usually available in one setting) to explore ethical issues in mental health practice. It provides a very good overview of the many problems in psychiatry that have resulted from recent advances in technology and profound changes in societal attitudes, especially regarding rights. When supplemented with formal philosophical teaching, as recommended, the book should successfully

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achieve its goal of serving as a starting point for a deeper understanding of the role that values play (individually and collectively) in clinical decision making.

PSYCHOLOGICAL MALTREATMENT OF CHILDREN AND YOUTH. By MR Brassard, R Germain, and SN Hart. New York: Pergamon, 1987. xii + 296 pp. \$45.00.

Reviewed by David Behar, MD

Get ready. You have just been turned down for a job at a children's agency. Why? You are on a state list of child abuse perpetrators. How? Six months before, you were angry and called your son "stupid." He stayed resentful long enough to tell his teacher. She did her duty under the law and reported the incident. This scenario might be an everyday occurrence if the authors of this book had their way.

They appear to this reviewer to view psychological intimidation as the cause of everything from autistic behavior to prostitution. No chapter offering balance to this idea is included. I do not find a shred of solid scientific evidence in the book to support their views. Now, even verbal criticism of children would be restricted. Most of the authors hold responsible positions in government and academia. Scary.

MEDICAL MALPRACTICE: PSYCHIATRIC CARE. By JT Smith. Colorado Springs, CO: Shepard's/McGraw-Hill, 1985. xxix + 633 pp. \$90.00.

Reviewed by Robert M. Wettstein, MD

The reader looking for an exhaustive survey of psychiatric malpractice will be both pleased and disappointed by this book. It is perhaps the most ambitious presentation of psychiatric malpractice since Hogan's multivolume series on regulation of psychotherapy. The title is a bit of a misnomer: the 13 chapters include considerable coverage of the right to treatment, the right to refuse treatment, and civil commitment, in addition to the usual malpractice areas of organic therapy, sexual exploitation, suicide, informed consent, and third party suits.

Though highly readable, this is not a book to read cover to cover. It is perhaps best read in sections when needed as a reference guide to a subject area of interest. It is neither too legalistic for the nonattorney, nor too clinical for the attorney. For a volume of this length, there is surprisingly nothing on psychiatric malpractice from an administrative, epidemiologic, insurance, or fiscal viewpoint. The volume also overlooks tort reform.

There are a number of irritants throughout the volume that detract from its merits. The editing is too loose, leaving unnecessary repetition. The "Summary Consultation" that closes each chapter just repeats earlier material in the chapter without elaboration and thus

appears superfluous. There are no page numbers listed in the table of contents, only section numbers, making it difficult to locate a particular section. Finally, there are many case citations, but there is little review of the available clinical-legal literature.

Given the price and publisher of the book, one of a series on medical malpractice, it is perhaps most suitable for the law school library. It also deserves a place on the reference shelves of medical and psychiatric libraries. Pocket supplements will be available to report future case law developments.

LAW, BEHAVIOR, AND MENTAL HEALTH: POLICY AND PRACTICE.

By SR Smith and RG Meyer. New York: New York University Press, 1987. xvi + 772 pp. \$60.00.

Reviewed by Robert M. Wettstein, MD

As its title suggests, this volume is a comprehensive review of mental health and law. The authors, professors of law and psychology, respectively, thoroughly review a wide range of topics in the three main sections. The first considers ethics, malpractice, licensing, testing, and behavioral research. The second covers jury selection, malingering and deception, eyewitness testimony, and the mental health professional in the legal system. The third section deals with criminal responsibility, punishment, juvenile justice, psychopathy, sex offenders, competency, commitment, the

right to treatment, and the right to refuse treatment.

The material is highly readable, thoughtful, and impressively documented and referenced. The content ranges from academic level reviews of research in eyewitness testimony, to concrete suggestions, to expert witnesses. The authors take many positions (perhaps even too many) and provide numerous recommendations to clinicians, legislators, and the judiciary, among others, even though these may be at odds with current views and practice. There is more than enough here to cause the reader to overlook the glib and clinically-distant style of a comprehensive review, as well as the authors' antagonism to organic therapy (referred to as "The Intrusive Therapies").

COPING WITH PSYCHIATRIC AND PSYCHOLOGICAL TESTIMONY,
Vols. 1-3, By J Ziskin and D Faust.
Marina del Rey, CA: Law and Psychology Press, 1988. 2,560 pp. \$240.00.

Reviewed by William H. Reid, MD,
MPH

This is the fourth edition of the original Ziskin work. It is written for practical use by attorneys. Although its criticisms of the "scientific status of psychology and psychiatry" (Chapter Three) are sometimes only superficially "scientific" themselves, it is foolhardy for a forensic psychiatrist not to be aware of the contents of this text before testimony.

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Most of Volume I and all of Volume II have to do with highly specific challenges to both the expert's qualifications and various specific topics commonly raised in testimony (e.g., the clinician's education and training, psychological assessment, diagnosis, posttraumatic stress disorder). Volume III contains "practical guidelines," including sample questions for deposition and cross-examination and some 640 pages of examples from what is described as the authors' case files.

It would be easy—and somewhat self-

serving—for this reviewer (or AAPL itself) to wage war, point by point, with Ziskin and Faust. The issue for now, however, is that psychiatric experts should take their jobs very seriously, carefully prepare for testimony, and be aware of potential criticism. One should avoid lengthy arguments with attorneys who use this "cookbook" method of coping with psychiatric testimony, and concentrate on communicating one's findings and opinions in a clear and credible manner.