The Metaphor of Mental Illness

This book covers various issues concerning the concept of mental illness and its relation to general medical illness. It is a philosophical analysis, not a clinical or scientific one. The author considers the so-called likeness argument, which has various forms in the literature, according to which mental illnesses or disorders really are such because they are sufficiently similar to agreed physical illnesses. He criticises this form of argument on the grounds that the likenesses invoked typically recommend themselves as a result of the assimilation to the physical case, rather than being independent reasons for it. This criticism seems to work better for hypothesised likenesses, such as causation by disease, than evident ones such as distress and impairment of functioning. In any case, the author concludes that the categorisation of psychiatric conditions as illnesses is a matter of metaphor: ‘an imaginative shift into the illness category’.

The invocation of metaphor here explicitly refers to Szasz’s work on the concept of mental illness in the 1960s, specifically the charge that the concept is illegitimate: a metaphor or myth. Influential though this charge may have been, for example in shifting the terminology in the diagnostic manuals from mental illness to mental disorder, one can ask whether this issue of terminology matters much, compared with the clinical phenomena, the services and the science. For this reason, a book which targets this 40-year-old problem invented by Szasz starts somewhat at a disadvantage. The notion of metaphor is no doubt important and interesting, but at the same time it is also somewhat specialist and esoteric. Its value as a key to turn the great locks of problems in clinical practice, the science of psychopathology and the sociology of psychiatry is doubtful – and I’m inclined to think it bends and breaks, unable to withstand the forces. So to this reviewer’s mind this book on the metaphor of mental illness starts in the wrong place and uses the wrong tool. Nevertheless, it is a valuable update on several themes of conceptual analysis that run through the philosophy of psychiatry.

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Mood and Anxiety Disorders in Women

Interest in the area of women’s mental health has been slowly gathering pace. Women not surprisingly differ from men in terms of the epidemiology and pathophysiology of certain mental health problems, the treatments they respond to, the services they require and the issues they face. Women are almost twice as likely as men to suffer from depressive and anxiety disorders. They are less likely than men to misuse alcohol and other substances but, when they do, the impact on the family is profound. Failure to address gender-specific differences in mental health not only burdens women themselves but also families, society in general and the mental health of future generations. In this book, a multinational group of authors crystallises work in this area to create an invaluable resource for all those involved in women’s mental health.

The contributors consider mood, anxiety and related disorders from a broad biopsychosocial perspective, charting gender differences and gender-specific issues through life from before puberty to old age. The volume’s range is wide, covering not only anxiety, depression and bipolar disorder, but also childhood sexual abuse, domestic violence, gender-specific vulnerabilities to personality disorders, substance misuse, premenstrual syndrome, pregnancy, the post-partum period and the menopause. The authors appropriately round off the volume’s excellent collection by challenging clinicians’ a priori assumptions that women’s mood disorders in old age represent ‘the inevitable decline of dementia’, making instead a plea to redress that imbalance by challenging the view that a woman ‘has had her innings’.

Despite its attractive cover, the book is not quite coffee-table material. Most chapters are beautifully written while remaining rich in research information, but in some chapters, heavy biological, pharmacological and statistical terms might frustrate the efforts of the well-informed non-medical reader.
A small quibble (and only that) is that despite the comprehensive summaries throughout, I missed a satisfying concluding chapter which might have drawn together the excellent material of the preceding chapters. The volume ends abruptly following the chapter on old age, and, as a reader, I felt the need for a eulogy.

Nevertheless, I unequivocally recommend this book. It makes an ambitious contribution to our understanding of gender disparity within the field of women's mental well-being, effectively collating current disparate information into a coherent integrative overview. The result is a collection of meaty essays which should comprehensively satisfy the appetite for an enlightened and broadened perspective.

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Understanding Nicotine and Tobacco Addiction
Edited by Gregory Bock & Jamie Goode.  
John Wiley & Sons. 2006. 284pp. £80.00 (hb).  
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This book is an edited collection of talks given by major researchers in nicotine addiction at a symposium funded by Novartis. Nicotine is an unusual addictive drug because it is not all that hedonic and it is perfectly possible to smoke and perform complex tasks, like driving a car, providing you do not crash while lighting up. It is much more difficult to get rats to self-administer nicotine than it is cocaine, for example. However, humans find it really difficult to stop using cigarettes and the majority of attempts to quit end in failure within a few weeks, even with maximum therapy. How can something so non-descript in its effects get such a grip on us? Unfortunately, no one contributing to this seminar will tell you, but readers will get partial answers to these questions.

The 15 chapters in this book are diverse. Some of them, for example the one on nicotinic acetylcholine receptor functions in the central nervous system, are essentially papers that give the results of one or a series of closely interrelated experiments. I always struggle with such work to understand where it fits in to the picture of smoking we see. Fortunately, many of the chapters are followed by the edited transcript of a discussion, in which, sometimes, clinical researchers try to grapple with the basic science and apply it to humans. In this case, however, the comments are left to the basic scientists alone, which means that less of an integrative perspective is offered. Nevertheless, the questions and comments do put the findings into a somewhat broader context. At times, these discussions are inadvertently amusing.

Chapters such as ‘Defining and assessing nicotine dependence in humans’ do take an integrative approach and probably offer insights that could not be gained by reading the journals. The author draws on his own recently published theory of addiction, which is not specific to tobacco, to examine how the DSM–IV criteria, and other widely used measures of dependence, apply to smoking, and offers new insights both on smoking and the concept of dependence in general. The fact that these chapters follow one another show the reader that the text leaps around without any linking and does not offer a coherent account of the phenomena of nicotine addiction and smoking.

This is an expensive book aimed at the nicotine researcher. Anyone who has attended conferences of the Society for Research in Nicotine and Tobacco will have heard many of these talks and had more fun than they will reading this book. However, it does summarise some aspects of the rather disparate approaches taken to understanding this most widespread of lethal addictions. Bringing these into the same symposium is one thing, integrating their insights to explain the tobacco epidemic is quite another.

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Mental Health Issues in the Media: An Introduction for Health Professionals

This is a timely book given the 10 years since Otto Wahl’s Media Madness and Greg Philo’s Media and Mental Distress. Both were landmark publications in tracing the evolution of influential media representations of psychiatric illness in the USA and UK respectively. We continue to battle the same stereotypes but Morris illustrates several victories where media makers have retreated to regroup. It is contemporary in the objects of its gaze, if not in outlook, and should be recommended reading for students and trainees who may need assistance in seeing the wood from the trees.

Quite rightly, he includes a chapter on literature – from trend-setting classics to the Harry Potter phenomenon. The breadth of UK television and internet examples
Psychiatry in the Scientific Image


In the dialectical problem of whether the disorders of the mind are basically biological or social, we are always being swayed one way or the other. You can tell which way a book with the title *Psychiatry in the Scientific Image* is going to jump. Its positioning is complex, however.

According to the author this book is deeply reactionary, a qualified defence of the medical model which shows psychiatry as a branch of medicine dedicated to uncovering the neurological basis of disease entities. This has intuitive appeal, given that we are animals with a biology including a brain that is the foundation of mental life. Also according to the author, the book is the first on psychiatry from within analytical philosophy of science. The result, therefore, is a deeply reactionary book at the cutting edge of philosophy of science. This is a finely balanced and subtle position that is not easy to summarise. For example, the deep conservatism has the brain as fundamental to psychology and psychiatry, and yet, recent philosophy of science envisages many levels of causal explanation, among which it is difficult to say which is fundamental. Tension is relieved here – the medical model vindicated – with the thought that psychological abnormalities can be traced to specific causal factors that are realised in brain tissue. The brain is fundamental in the sense that it realises everything. (A social science analogue is to have itself as fundamental in the sense that everything – including biomedical science – is a social practice.) This view of the brain as fundamental belongs with an up-to-date suitably broad understanding of neuroscience: that it draws on the cognitive and social sciences as well as molecular biology.

The book tackles three sets of questions about mental disorder: concept; explanation; and classification. It is weakest on the first topic, apparently taking for granted the fact of mental disorder, while cursorily dismissing social science critiques of the medical model. This untroubled view belongs generally with the avowedly ‘realist’ approach of the book, which wants to get on with tracking facts and causes, not worrying about concepts and construct validity. The book is strongest on multi-level causes and the lack of viability of reductionism, although there is also some tension here.

Discussion of classification in the last part of the book rehearses the aspiration that nosology should track causal histories of conditions, not operationalised, observational criteria. However, the problem of reconciling controversial and shifting complex, multi-level, causal models of psychiatric conditions with a simple and relatively stable classificatory system for clinical and research purposes is, in this reviewer’s opinion, neither sufficiently recognised in the book nor resolved.

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Theory of Addiction


An internet search for ‘motivation’ produces thousands of hits. Clearly we are fascinated by what makes us tick, but despite the wealth of research there is no consensus. Robert West’s *Theory of Addiction* is a bold attempt to unify our understanding of human behaviour and its pathological re-fractition that is addiction. As a Professor of Health Psychology, and prolific contributor to the literature on addictive behaviour, West is arguably the man for the job.
After considering the definitions of addiction, West rethinks how we appraise behavioural theories and asks us to use ‘observation of nature’ as a starting point. He argues for a Popperian stance, that a theory is wrong if a counter-example exists, then sets the scene for his own theory with an erudite review of the literature.

The reader is walked through the evolution of his theory before it is introduced as ‘PRIME theory’ (plans, responses, impulses/inhibitory forces, motives and evaluations); a hierarchical representation of the motivational system which serves well as a template for human behaviour despite the unwieldy schematics.

West blends PRIME with chaos theory in a Pythagorean attempt to understand behaviour in mathematical terms. He invites us to think of the motivational system as an epigenetic landscape with hills and valleys (Chreods) through which a ball (time) travels resulting in a number of potential future outcomes depending on its course. He acknowledges the metaphor in applying chaos theory to addictive behaviour and this book joins a growing discourse on the subject. The concept is user friendly and explains why addictions manifest so differently despite often similar underlying pathologies. A strength is that it allows for such variance, but as a result the theory becomes too inclusive for rigorous testing.

In citing economic and neuropsychological theories, the author’s intention is that other disciplines could add to the work. It would also be interesting to hear how PRIME interfaces with cultural and psycho-dynamic constructs. In the closing chapter, West applies his theory to addiction and suggests approaches for intervention that I would like to have heard more about, such as how one might detect an imminent bifurcation.

In the end I felt that, in addition to PRIME theory, the book had introduced a valuable representation of what could be called good psychiatric formulation. West encourages us to think differently about people and populations with substance use problems, and I now find myself wondering how my clients’ epigenetic landscapes might be looking. The work is grounded in common sense and goes a long way towards explaining what the author calls the big observations (‘observation of people in their natural habitat or uncontested scientific evidence’), and it adroitly deals with the challenges inherent in postulating any unified theory of human behaviour. He leaves the way clear for future research and is ready to pass on the baton in the collective endeavour of incremental science.

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Aviation Mental Health: Psychological Implications for Air Transportation

If you are looking for a book to read on a long haul flight, this is not the one! A random selection of some of the key issues discussed in Aviation Mental Health reveals why. Pilot suicide by aircraft and the nature of language used in airport announcements ‘this is your last and final call’ being two topics that may set off a train of thought that is not modified even by the fascinating fact that air travel is 18 times safer than staying at home.

Aviation mental health is a topic that impinges on many aspects of medical practice, from the management of flying phobias to severe in-flight medical emergencies such as acute psychotic episodes. This is perhaps the first textbook to cover the whole range of aviation mental health from selection and management of flight and cabin crew through to the management of the psychological consequences of flying and crashing.

With such a wide target audience it has perhaps been difficult in this first edition to balance the content between specialist and generalist information. The chapters range from quite technical multi-author submissions on sleep and mental performance with general applications through to single-author chapters on highly specialised topics such as psychological aspects of astronaut selection. Overall, however, the content is well balanced with an appropriate level of theory and advice on practical management.

The style of the book, as with many multi-author collections, lacks coherence. Perhaps the editors will be able to address this in a second edition? The layout of the chapters within the book is confusing. Part 1, ‘psychological issues of flight and cabin crew’, deals with issues relating to passengers, whereas Part 2, ‘psychological processes amongst passengers and crew’, does not. The third section, ‘related themes in aviation’ has the appearance of a standby line of passengers who couldn’t be fitted into one of the previous two sections, the content ranging from occupational factors in pilot mental health through to aviation psychology in South Africa.

Overall this is a useful practical guide to an important area of occupational mental health which, despite the inevitable teething troubles of a first edition, is well worth reading.

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Eating Disorders in Children and Adolescents

This international and multi-authored volume is aimed at practitioners and researchers in the field of eating disorders in children and adolescents. The book is
pleasingly presented and generally well-written, although it was a little surprising to find that some of the chapters were written by authors not working with children and adolescents. The introduction consists of a truly fascinating historical and developmental review, including reference to Norton’s conclusion in 1694 that the condition ‘is due to a malfunction of the brain . . .’ – clearly a man ahead of his time.

In section two, entitled ‘scientific underpinnings’, there are learned chapters on the regulation of food intake and body weight, the development of weight and shape concerns, and the relation of dieting to eating pathology. The chapter on physical and cognitive changes is uneven in that the section on cognitive changes neglects many fascinating new findings. The chapter on genetics is too technical for the average practitioner or researcher but that on epidemiology would have benefited from some editorial assistance. The neuroimaging chapter is sound but would have benefited from more focus on the findings in childhood and adolescence.

Section three focuses on ‘abnormal states’, with useful contributions on anorexia nervosa, eating disorders in boys, atypical eating problems, disability and chronic illness, and bingeing and bulimia nervosa, as well as chapters on comorbidity, and trauma and obesity.

The section on evidence-based care has useful reviews of acute and chronic medical complications, individual and family psychotherapies, models of service delivery, and psychopharmacology, albeit the latter being rather too slanted toward eating disorders in adults.

The final section, entitled public health perspectives, offers interesting discussions on primary and secondary prevention, although frustratingly makes no mention of the potential of targeting children in middle childhood (e.g. 6- to 10-year-olds) who are possibly more likely to benefit than adolescents, in whom unhealthy attitudes may have already developed. The chapter on outcome reminds us of how poor the prognosis is for eating disorders.

This volume does not focus on the subtleties and complexities of clinical practice and those wishing to enhance their clinical skills will need to look elsewhere. However, there is much of interest and value for those who wish to gain an overview of current knowledge of the many problems in this population, without having to delve into a voluminous text.

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