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improved epidemiological methodology, but we are still some overview chapter. Evidence in favour of a number of the brain development, and the basis for this view is outlined in an interplay between genetic and environmental factors during the origins of schizophrenia I might benefit from getting a wider perspective. I was not disappointed.
The main focus of the book is on environmental risk factors, although genetic and epigenetic factors are also covered. The book is split into chapters on clinical studies and those on preclinical models and, in the case of maternal infection, prenatal nutrition and maternal stress, there are complementary chapters in both sections. Other putative risk factors that are covered include paternal age, obstetric complications, cannabis use, and vitamin D deficiency. The chapters are generally well written by experts (the two do not always go together), accessible to the general reader (ditto), and tend to take a balanced view (double ditto). Helpfully, each is prefaced with a list of key concepts and ends with a list of key areas for future research.
The work is framed very strongly within the prevailing paradigm that the origins of schizophrenia are to be found in the interplay between genetic and environmental factors during brain development, and the basis for this view is outlined in an overview chapter. Evidence in favour of a number of the environmental risk factors covered is accumulating thanks to improved epidemiological methodology, but we are still some way from understanding mechanisms. One hope is that findings from new genomics approaches will focus attention on key processes, and early indications are encouraging but too recent to have been integrated into environmental models. A second approach to mechanistic studies is the use of animal models. Although these have been developed, and elegantly so, for factors such as maternal infection, vitamin D deficiency, malnutrition and maternal stress, the problem remains of determining whether neurodevelopmental and behavioural consequences of an environmental manipulation in rodents really model the human disease process. The identification of rare high penetrance mutations in schizophrenia now offers the possibility of developing genetic animal models with high construct validity and the impact of specific environmental manipulation on these might be helpful in this regard.
One striking issue that is not addressed, other than in passing, is that most of the genetic and environmental risk factors for schizophrenia are not specific to the disorder and many, including most of the environmental factors discussed and many of the genetic findings, seem to confer risk to a range of adverse neurodevelopmental outcomes such as intellectual disability, epilepsy, attention-deficit hyperactivity disorder and autism. It seems to me that we should be viewing what we call schizophrenia not as a discrete disorder, but as part of a continuum of liability occurring as a consequence of early brain disruption and that this needs to be taken into account when modelling mechanisms in rodents. This challenges the animal modellers to refine the mapping of their phenotypes on human psychopathology, which is dimensional and crosses disorders, and this in turn requires clinical neuroscientists to understand more fully the neurobiological underpinnings of clinical symptoms and syndromes.
Another omission is the emerging evidence that early childhood maltreatment confers risk to schizophrenia, which is surprising given that this has been modelled in rodents, and the largely neurodevelopmental focus leaves no room for a discussion of possible psychological and social risk factors. These issues notwithstanding, this is an excellent introduction to the origins of schizophrenia, which brings together a large amount of recent work in a readable and critical manner.

Like many researchers, I would guess, I tend to avoid reading, let alone reviewing, books on my subject. My prejudice is that monographs tend to push niche views, whereas multi-author books often lack coherence and the chapters tend to recycle already published data which are usually well out of date by the time of publication. However, I was attracted by the bold title of this one, the reputations of the editors, and by the nagging doubt that during 20 years of digging around in the human genome for the origins of schizophrenia I might benefit from getting a wider perspective. I was not disappointed.

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Almost everything we know about adolescence has come from research conducted during the past quarter of a century. This volume, the first of three, is a distillation of quality research, presented in an engaging style, with extensive cross-referencing, impressive breadth and not a hint of dumbing-down. This volume presents alphabetically organised articles from psychiatry, psychology, biology, history, sociology, public policy expertise, education, geography, literature and anthropology. Within all of these disciplines, there are many definitions of adolescence, yet a characteristic element is that adolescence is a transition whose purpose is equipping children for adulthood.
The point of these narratives is to bring to our attention such diverse topics as child prodigies and how to teach them; neuroplasticity and a more detailed understanding of the selective elimination of brain cells and connections adolescents use least,
Autism spectrum disorder (ASD) is one of the two new kids on the block in clinical adult psychiatry (the other being adult attention-deficit hyperactivity disorder). Whereas most psychiatrists have had just a glimpse of the newcomers on the corner of their street, a number of recent official publications oblige services to make provision for individuals with ASD. In addition, the National Institute for Health and Clinical Excellence has just published guidelines on the identification and diagnosis of ASD making it a ‘current and present’ issue for all psychiatrists. In the past, adult ASD had often escaped general psychiatrists’ notice. The publication of these two books is timely, relevant and indeed significant.

The first volume, edited and authored by leading researchers in the field of ASD, mainly from across the Atlantic, provides a summary of the current knowledge on recent advances in the developmental psychology, neurobiology, genetics and much more related to the disorder. Laid out in eleven sections ranging from diagnosis to public policy and comprising 83 chapters, this scholarly book provides a panoramic view of research findings in various aspects of the subject that include less known areas such as animal models in autism, neuropathology and associated conditions such as seizures, and allergy. It incorporates topics on immunology, gastroenterology and infectious diseases related to ASD.

Clinicians will find the ten chapters under the section on psychiatric comorbidities particularly informative. The chapters on the relationship between obsessive-compulsive disorder (OCD) and ASD and the three chapters on broader autism phenotype are particularly instructive. Developmental features of ASD, their developmental trajectories and findings from the psychological research into the brain bases are well covered. The book, however, is highly skewed in the direction of biological and developmental psychological research and less focused on practical applications and treatment. The section on best practices focuses more on diagnosis and there is little on management. The book provides an authoritative review of a fast-developing area of research into ASD and should be a reference text for both child and adolescent psychiatrists as well as paediatricians. All psychiatrists who want to update their knowledge on the subject would find more than a few chapters that are important to their area of work.

Autism Spectrum Disorders through the Lifespan is a single-author book based on the clinical experience and interests of Professor Tantam, a well-known British authority on the subject. Divided into two parts, sciences basic to ASD and clinical aspects of the disorder, this book too attempts to cover ASD in its entirety, but it is the clinical focus and personal approach that sets it apart. The most impressive feature (and unusual for an adult psychiatrist) is that Professor Tantam takes a developmental approach to ASD and discusses the presentations during infancy, childhood, adolescence and adulthood, illustrating this with a number of case examples. More importantly, he makes the point that people with ASD are likely to be referred to mental health services at times of transitions between developmental stages when new skills or new forms of adaptation are called for. In addition, comorbidity with psychiatric conditions such as OCD and social phobia is likely to be high and Tantam points out the paucity of research in this area. Clinicians will find useful the tables on assessing rigidity, non-verbal expression in ASD, social aloofness, social phobia and OCD. Unfortunately, the chapter on Asperger syndrome in adulthood is comparatively short. A particular omission is lack of ASD questionnaires and rating scales. One other criticism of the book is that it is overinclusive and, at times, idiosyncratic. For example, topics marginal to ASD such as prosopagnosia, rare genetic syndromes and epilepsies are discussed in some detail. The book would have benefited from more robust editing.
Together, these two publications provide a sound basis for the understanding of ASD, the first for its academic prowess and the second for its chapters on clinical aspects and anecdotes. However, they are voluminous and useful mainly for reference. The definitive clinical handbook on ASD with sufficient coverage of the disorder in adults is yet to be written. Organising services for adults with ASD at a time of austerity and 'efficiency savings' is another matter.

The new book on eating disorders, which is targeted primarily at general practitioners (GPs), is a collaboration between June Alexander, an ex-eating disorders sufferer and activist, and Janet Treasure, a world-renowned researcher in the field. They have brought together an impressive array of clinicians and researchers from around the globe to contribute chapters.

Divided into four sections – understanding risk and resilience for eating disorders, treatment, clinical presentations and changing the culture – the book includes many biographical accounts, bringing to life the experiences and insights of people with eating disorders and their families.

Part one has three particularly well-written chapters. One elucidates the latest research on genetics, another on neurobiology, synthesises the complex aetiological factors and the interactions between them, and the third, entitled 'Emotions and empathic understanding', competently describes new evidence on the range of deficits in emotional processing in anorexia and the salience of these deficits in treatment and recovery.

Part two, which focuses on treatment, has several chapters that describe how to engage, empower and teach the family practical skills to fight the illness. Many adult patients cite the importance of a supportive partner as the main contributing factor to their recovery and this section includes a chapter outlining a new cognitive–behavioural therapy-based protocol, which helps couples to respond to the challenges of anorexia more effectively as a team. Eating disorder clinicians are noticing rising comorbidity and complexity of clinical presentations, with a significant number of patients presenting with self-harm and emotional dysregulation. One chapter describes and provides a clear rationale for an innovative, combined dialectical behaviour therapy and family-based treatment for adolescents to address this issue. The chapter on relapse prevention brilliantly elucidates the multitude of functions an eating disorder plays in a person's life and the huge anxiety and challenge of managing life without the protection of the illness.

Part three, which presents brief chapters on the clinical presentations of subgroups, has a very useful chapter describing how to diagnose an eating disorder in a child. This will be invaluable for GPs to feel confident in understanding the clinical presentation in this age group. This chapter also includes an excellent and succinct outline of an in-patient treatment plan for food phobia in childhood.

Part four is a brief, impassioned plea for better public understanding of eating disorders as the very serious brain disorders they are, and better, faster access to empirically supported treatment for patients.

The book also includes a great list of resources for people with eating disorders and their carers. My only criticism is that a few chapters were too brief to be really useful and a couple required further editing.

I would recommend this book to all clinicians who want to know what's new in the science and treatment of eating disorders in an easy-to-read and jargon-free format.
epigenetics) and subsequent development of mental illness. A clear parallel can be drawn with the so-called ‘Barker hypothesis’ in explaining the relationship between birth weight and a number of diseases, including heart disease and breast cancer.

The link between maternal infection in pregnancy and schizophrenia in particular has been investigated for many years but seems to have gone out of fashion with the rise of genetic research and imaging studies. The author makes a convincing argument for the sometimes pathological involvement of immune response in neurodevelopment and, importantly, revisits the epidemiological evidence for the involvement of infection in the aetiology of mental illness. Furthermore, specific gene–environment interactions are explored. Recent findings of there being considerable overlap in the genes involved in a variety of neurological and psychiatric conditions at first glance fits comfortably with the theory proposed, since the timing and type of infection or stressor will result in different phenotypes.

It is a shame that the references are limited and poorly sign-posted and that statements are sometimes made as fact rather than with appropriate caution. No doubt this is to make the book more accessible to the general public for which it was partly intended. Overall, however, the author makes an admirable attempt at a ‘grand unified theory’ to provide a common pathway for a variety of risk factors such as urbanisation, maternal infection, stressful life events and genetic predisposition in the development of mental illness.

Having just finished this hefty tome, I find myself feeling as though I have just eaten a meal straight out of Myhrvold’s molecular gastronomic bible, *Modernist Cuisine*. It has been fascinating, full of goodies but my head is reeling; as much as anything else because of the sheer depth of it all. Like cookbooks, it may be something to dip into rather than read cover to cover.

Bateman and Fonagy invite you into a world of neurobiology, attachment, clinical vignettes and technical know-how. All of this whets your appetite for the meal to come, which, when it arrives, can feel hard to swallow and does presuppose in the reader a certain level of grounding in this wide array of subjects. My occasional discomfort may be more to do with me as a reader though, coming from a psychoanalytic background and perhaps finding it hard to let go of the ideas from my analytic training.

The authors of most chapters acknowledge this problem and try hard to collaborate with other modalities, including systemic family therapy and cognitive–behavioural therapy to name only two, but I wonder whether I will not be the only psychotherapist who feels this might be diluted too far at times. To temper this, the baby is not thrown out with the bathwater and concepts such as countertransference and Winnicott’s ‘holding environment’ are mentioned often.

With the above in mind, I should acknowledge that I practise mentalisation-based therapy in a forensic setting and have found it to be incredibly helpful in working with patients with a diagnosis of personality disorder. Holding the ‘detective Columbo’ style stance of being curious and not-knowing that the book advocates and that is so valuable clinically lures you into new ways of thinking that are a pleasure. It also allowed me to take in some of the tasty morsels that are available. These include but are not limited to a significant reappraisal of the nosology of psychiatric conditions; timely reminders of the importance of humour, formulation and of how hard it can be on clinicians to work with disturbed patients.

Clear descriptions, with vivid vignettes, of the various ways mentalisation can break down proved useful throughout. Of these, my favourite was thinking of psychic equivalence as being like the state children are in when they believe there really is a tiger under the bed – mirroring the experience of a patient with borderline personality disorder of having thoughts that are felt to be too real. It also allowed me to take in some of the tasty morsels that are available. These include but are not limited to a significant reappraisal of the nosology of psychiatric conditions; timely reminders of the importance of humour, formulation and of how hard it can be on clinicians to work with disturbed patients.

To finish, the editors’ and contributors’ emphasis on empirical scientific ideas might certainly have been pleasing to Freud, with his belief in ‘The Project for a Scientific Psychology’, but the book can portray this as a manifesto, which awaits some time for digestion before the reader can fully appreciate it.
Stating his aim as engaging with 'historically and culturally variable responses' to madness, Scull presents telling material from classical antiquity onwards, notably recounting the dreadful suffering endured by people often seen as problematic to Western civilization. Indeed, Scull’s work might be recommended simply for its concise reminder of the administrated violence of the early 20th century, pursued for predetermined 'good' ends against the 'degenerate' without reference to duties or rights; and of the role that doctors played in this.

However, the central coherence of Scull’s commentary is threatened by an attempt to render madness as a unitary concept, across the vast reach of millennia. This problem is illustrated by an early paragraph on the causation of madness, linking medical explanations of 'the aetiology of our schizophrenias' to Socrates' comment in *Phaedrus* that 'madness is given to us by a divine gift'. Although Scull may not have had space for it here, in *Phaedrus* madness created by the Gods refers to inspirations that many of us still regard as divine gifts, including love and poetry. The garbled implication that Socrates thought 'our schizophrenias' were a gift from the Gods is simply misleading and although Scull goes on to castigate the *Diagnostic and Statistical Manual* as 'anti-intellectual', one may at least reflect that it avoids the conflation of love and schizophrenia.

In fact, the author states his own responses with such relentless strength that they threaten to overwhelm the 'variable responses' of history. Psychiatrists are bleakly caricatured as simplistic, money-grubbing dupes and somewhat less predictably the families of people suffering 'madness' are also characterised as willing dupes to the drug industry, with their payoff for supporting the benefits of medication apparently in abolution from the guilt formerly heaped on 'refrigerator mothers' and the like. There is little hope here and doors to valid commentary are gradually closed on whole groups of deeply interested people, to the point that one is left wondering whether only sociologists, such as Scull, are free enough from false consciousness to guide us through history. Without room for dialogue, Scull’s achievement feels less like ‘a very short introduction’ than a very short conclusion.

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doi: 10.1192/bjp.bp.112.110304