

majority of contributors are from countries in the former British Empire.

REFERENCE

1. Howard R, Rabins PV, Seeman MV, Jeste DV, and the Late-Onset Schizophrenia Group: Late-Onset Schizophrenia and Very-Late-Onset Schizophrenia-Like Psychosis: An International Consensus *American Journal of Psychiatry* 2000; 157:172–178

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The Frith Prescribing Guidelines for Adults with Learning Disability. Edited by Sabyasachi Bhaumik and David Branford; Taylor & Francis Group, London and New York; 2005; ISBN 1-841-84573-6; \$49.95 (paperback); 164 pp.

One thing that must be said at the outset for this review to be meaningful is that “learning disability” in the context of this book does not mean “learning disorder” as defined in DSM-IV-TR. It means what we in the U.S. would think of as “mental retardation.” Given that, this book is a series of algorithms for the treatment of psychiatric co-morbid conditions in those who have mental retardation. It is called the “Frith guidelines” because the principle editor is Consultant Psychiatrist and Lead Clinician on the Learning Disability Service at Leicester Frith Hospital in Derby, England. Dr. Branford, the co-editor, is Chief Pharmacist at nearby Kingsway Hospital. The book also lists an assistant editor and seven additional authors.

The book is divided into thirteen chapters, the first being a discussion of what “learning disability” encompasses. The other chapters cover various diseases and problems in care of those with mental retardation, such as epilepsy, self-injurious behavior, aggression, and schizophrenia. The final chapter is a brief discussion of ethnic differences that are important in treatment, such as variability of levels of Cytochrome P-450

enzyme activity in common racial heritages. There is also a list of additional reading, and a subject index.

The chapters are constructed in more or less outline format, with multiple tables, key references, and of course the aforementioned algorithms. The book is very pragmatic, and discusses the most common difficulties encountered in psychiatric co-morbidity treatment of those with mental retardation. The writing style is somewhat spare, as would be expected for a book of this type. I did not find any inaccurate statements in the book, but there is a liability disclaimer at the end of the first chapter. My only real criticism is that the authors give very little information on most issues, other than the algorithms themselves. I also believe that treatment within this area of practice still has a number of controversies, and this book tends to list answers that may seem more certain than they are, given the algorithm format. It must be kept in mind that this is a book from Great Britain, and U.S. practices are not always identical to those from across “the pond.”

This book would be most helpful to those practicing in group homes and institutions for the mentally retarded. Given the division of the chapters into disorders and symptoms, it is a relatively simple task to look up whatever problem or behavior is most troublesome for a given patient. Residents who rotate through such facilities would, I’m sure, find the book quite valuable as well. It is not as complete as a book like *Pharmacotherapy and Mental Retardation* (1) or *Mental Retardation: Developing Pharmacotherapies* (2) but is a good deal more up to date and far easier to leaf through for a quick suggestion on management.

REFERENCES

1. Gadow KD, Poling AG: *Pharmacotherapy and Mental Retardation*. Little Brown&Co., Boston, 1988
2. Ratey JJ ed. *Mental Retardation: Developing Pharmacotherapies*. American Psychiatric Press, Inc., Washington, D.C., 1991

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