

Book Reviews

Depression. Treatment Strategies and Management. Edited by Thomas L. Schwartz and Timothy J. Petersen; Taylor & Francis Group (Informa Healthcare), New York, New York; 2005; ISBN 0-8493-4027-6; \$169.95 (hardcover); 296 pp.

Depression, besides anxiety, is the bread-and-butter of everyday psychiatric practice. Major depression, acute or chronic, and dysthymia present a big part of almost anybody's practice. Major depression is one of the leading causes of disability. While it is treatable, its treatment is more difficult and complicated than we usually think. Thus, any book on treatment and management strategies for depression that would bring a new angle or approach to the treatment of depression could be a welcome addition to public or personal libraries.

This book is the newest addition to the never-ending stream of comprehensive texts focused on the management of depression. The editors of the book, Drs. Schwartz and Petersen, put together a group of mostly U.S.-based psychiatrists, with a few Italians. The text is intended to provide an authoritative and up-to-date review of current knowledge regarding the treatment of major depressive disorder. The focus is intended to be on a comprehensive approach to the management of depression, and thus "at the close of each pharmacologic chapter, the parallels for psychotherapy are considered" (p. VII).

The volume consists of 11 chapters. I would say that the book could be conceptualized in three parts: the introductory one consisting of three chapters dealing with general issues; the main body consisting of four chapters dealing with core treatment and management issues; and the third "nameless" or "miscellaneous" one, consisting of various topics such as genetics, neuroimaging, and others.

Chapter 1, 'Epidemiology, symptomatology, and diagnosis,' is a brief summary of exactly what the name says, epidemiology, symptomatology, and diagnostic issues. Chapter 2, 'Substrates of sadness: the pathophysiology of depression,' is another brief standard review that the reader can easily skip and remember just what the authors say in their conclusion: "our understanding of the etiology and pathophysiology of the illness has been remarkably limited" and, ". . . unfortunately, major aspects of neurobiology of depression . . . remain poorly understood." Chapter 3, 'Drug development, psychotherapy development, and clinical use,' reviews the history of antidepressant development by the way of the FDA's systematic approval of agents dating back to the 1950s and the develop-

ment of psychotherapeutic techniques dating back to the 1800s. The psychotherapies reviewed include interpersonal psychotherapy, behavioral therapy, and cognitive-behavioral therapy of depression. This chapter is a bit idiosyncratic and uneven. Some of the references are to a commonly used textbook—I believe that original references would be better sources, without somebody else's interpretation. The part of this chapter devoted to the inhibitors of monoamine oxidase is especially problematic. The authors discuss the "tyramine reaction" without really explaining its pathophysiology (inhibition of MAO in the gut). They refer to the risk of death associated with the tyramine reaction (I cannot find any reference to death due to hypertensive crisis in the literature), yet they do not mention death associated with the administration of MAOIs and meperidine (many of us probably remember the case of Libby Zion). They do not discuss the newest addition to the MAOI armamentarium—transdermal selegiline. I think that the first three chapters are not very useful and are forgettable.

Chapter 4, 'Treatment outcomes with acute pharmacotherapy/psychotherapy,' is quite a good review of the acute treatment of depression with medications and psychotherapy, with valuable discussions of topics such as measuring antidepressant efficacy. The following chapter 5, 'Depression: treatment outcomes with long-term maintenance,' consists of two parts, I. Pharmacotherapy, and II. Psychotherapy, written by different authors. The psychotherapy part discusses, among other topics, an alternative way of integrating pharmacotherapy and psychotherapy by the sequential administration of these modalities according to the stages of the disorder. It presents a standard format of sequential treatment sessions—3 months of antidepressant treatment with depressed mood no longer being present, followed sequentially by therapies such as cognitive-behavioral therapy for residual symptoms, well-being therapy, and lifestyle modifications. Chapter 6, 'Combining medications to achieve remission,' is focused on maximizing treatment outcome by combining various medications with antidepressants. The authors present their own reasoning/guidance for combining medications—"our group finds that we may be more likely to consider switching the antidepressant, rather than augmenting with a pharmacological agent that alone may not have inherent antidepressant effect." The discussion about making the decision to switch, combine, or augment an antidepressant and the importance of documentation is followed by review of augmentation with lithium, thyroid hormone, buspirone, lamotrigine, stimulants, atypical

antipsychotics, benzodiazepines, pindolol, modafinil, steroid hormones, other agents such as inositol, SAMe and yohimbine, and antidepressant combinations (including using atomoxetine). Chapter 7, 'Combining drug treatments to achieve better tolerability and adherence,' is a review of strategies to manage side effects of antidepressants, such as sexual dysfunction; fatigue and hypersomnia; insomnia, anxiety, jitteriness, and agitation; akathisia and bruxism; gastrointestinal distress; and weight gain. These four chapters are clinically oriented, relatively comprehensive, and quite useful.

Chapter 8, 'Depression and genetics,' is a brief discourse on genetics of depression, discussing the limitations of psychiatric genetics, traditional genetic approaches, genetic epidemiology, and candidate genes. It is not clear to this reader what this chapter has to do with treatment and management strategies, as it does not provide any. Chapter 9, 'Depression, neuroimaging and neurophysiology,' presents a brief excursion into structural imaging, functional imaging, magnetic resonance spectroscopy and EEG studies of depression, again without a clear link to treatment and management strategies. Chapter 10, 'Depression and somatic treatments,' reviews electroconvulsive therapy, transcranial magnetic stimulation, magnetic seizure therapy, deep brain stimulation, vagus nerve stimulation and some surgical methods. The review of surgical methods such as anterior cingulotomy is clearly out of place as these methods are used predominantly in obsessive-compulsive disorder and their efficacy in major depression is less than anecdotal. The authors are fairly enthusiastic about the use of some of these treatments, for example, vagus nerve stimulation (my reading of the literature on this treatment modality is less enthusiastic, especially, as the authors point out, since this method has been studied as an adjunct therapy only). Nevertheless, electroconvulsive therapy remains still the most efficacious and reliable of these treatments, in spite of its side effects and possible complications. Chapter 11, 'Medication and psychotherapy options and strategies: the future,' is a brief summary of issues such as sequential application of treatments, conceptual shift from cognitive content to cognitive process, the role of psychodynamic treatment and others. Similar to the first three chapters, most of the last four chapters, with exception of the somatic treatments, is forgettable for anyone interested in the "treatment strategies and management" mentioned in the title of this book.

This volume may be interesting for a novice in the area of treatment of depression. An experienced clinician will not find it much useful beyond the four "central" chapters, and probably the review of somatic treatments. These five chapters, reviewing acute and maintenance treatment, and combining of medication to either achieve remission or better tolerability and adherence, and somatic treatments, are faithful to the title of this book—*Depression. Treatment strategies and management*. The rest of the book is a bit misplaced, and belongs probably to a basic textbook on depression. If one ever considers another edition of this text, the expanded five truly treatment-oriented chapters would suffice. Considering the fairly hefty

price, unless you are a novice with no other comprehensive text on depression, keep your purse closed.

Richard Balon, M.D.
Wayne State University
Detroit, Michigan

Dynamics of Romantic Love. Attachment, Caregiving, and Sex. Edited by Mario Mikulincer and Gail S. Goodman; The Guilford Press, New York, New York; 2006; ISBN-10 1-59385-270-3; \$50 (hardcover); 466 pp.

Love is clearly a complicated matter, which has been less or more successfully explained by various thinkers, philosophers, and others throughout the history of mankind. There are numerous definitions and descriptions of this basic human emotion or state of mind. Various thinkers and "experts" present definitions and discussions of romantic love, sexual love, love as caregiving, love as attachment, and many others. Recently, a friend of mine lent me a disk with Helen Fisher's lecture on love (for Helen Fisher's work, see for instance her book *The Anatomy of Love* (1). I was quite enchanted by her lecture and by other disciplines (in this case anthropology) view of love and its possible biological underpinnings (she talks about the roles of testosterone, dopamine, and oxytocine). She also talked about the role of attachment (oxytocin!). Thus, I became quite interested in another disciplines—in this case, psychology—view of love, when I saw this volume, *Dynamics of romantic love. Attachment, caregiving, and sex*.

This edited volume was put together by two psychologists, Mario Mikulincer and Gail Goodman, interested in, among other things, attachment theory. The volume "grew out of a conference ... held to celebrate Phillip Shaver's 60th birthday ..." The reader will probably ask, as I did, who Phillip Shaver is. Well, I found that Phillip Shaver is a psychologist who, together with another psychologist, Cindy Hazan, in 1987 published a classic article conceptualizing romantic love as an attachment process (2). The goal of the conference celebrating his birthday was "... to evaluate and expand on ... ideas about how romantic love typically involves a combination of three behavioral systems discussed by John Bowlby in his trilogy on attachment theory: attachment, caregiving, and sex" (p. ix). As one of the editors state, "Evidence is not emerging that shows that attachment processes shape sexual motives, experiences, and behaviors" (p. 36).

The book consists of 17 chapters and is divided into five parts—I. Introduction, II. Basic attachment processes in couple relationships, III. Interplay between the caregiving and attachment systems, IV. Attachment, sex, and love, and V. Interfaces between attachment theory and other perspectives on romantic love.

The first chapter is a bit too personal and out-of-place "personal perspective on an attachment researcher," in this case on Phillip Shaver by one of the editors, Gail Goodman, who