

like" (p. 116). The author then delves into specific ways to improve compliance, such as calendars, diaries, packaging, nonchild-resistant closures, divided containers (specialized pill boxes), electronic monitors, timing of medication (e.g., tying it to brushing teeth), grouping medications, counting medication, buddy systems (someone reminding the patient), blister packaging and specialized caps. The author also discusses electronic prescribing (decreasing medication errors) and criticizes pill splitting as a method to improve compliance.

The following chapter, "Bridging the gap between provider and patient variables: concordance," is not very informative. Chapter 9, "Ethics of compliance," on the other hand deals with several interesting issues such as capital punishment and assisted suicide, noncompliance as a patient prerogative, Health Insurance Portability and Accountability Act (HIPAA) and impact upon compliance, information technology, and some questionable, if not unethical practices such as drug-company-supplied leaflets, confusing drug names and others.

Chapter 10, "The role of health professionals in influencing patient compliance," written by Richard Schultz, focuses on recognizing our limitations and biases and making sense of the vast and contradictory literature on noncompliance. The following chapter, "Disease state management in older persons with hyperlipidemia," by Louis Roller and Jenny Gowan deals with, as the title outlines, one very specific issue. Finally, chapter 12, "Current and future considerations," attempts to provide some concluding remarks and suggestions. The author outlines and discusses some useful questions to ask when adding or continuing drug therapies: 1. Is the drug needed?; 2. Can the patient afford the drug?; 3. What are the incentives and trade-offs for the patient benefit-to-cost ratio?; 4. Are there predictable side effects with the new therapy?; 5. Can the new drug take the place of a currently taken medication?; 6. Will the new therapy lead to the need to take more drugs?; 7. Has the patient "bought into" the need for the new drug, for example, use of concordance?; 8. Is the new drug being prescribed to pacify the patient?; 9. Have nondrug alternatives been tried first before prescribing drug? And; 10. Will food-drug, drug-diet, or drug-drug interactions be likely with the new drug and currently consumed medications?

My biggest issue with this book is the fact that I am not sure whom this book is written for, who the audience should be. This volume is a mixture of semi-informative and theoretical chapters, occasionally providing some recommendations, though it is not clear for whom. Patients? Pharmacists? Physicians? The second issue is the occasional anti-physician bias I mentioned. My third issue is the relative lack of useful and structured information. Thus, I can hardly recommend this book to any busy clinician, unless he/she is, maybe, interested in thoroughly researching the issue of compliance/adherence.

The reader may ask why review a book like this one. Recently, a friend of mine said to me, "I hate some journal book reviews, they all say how great the books are, so what is the point?" I responded that I thought that akin to publishing results of negative studies, we ought to publish reviews critical

of the reviewed books, too. They provide our readers with very useful information. I believe this book review is a case in point.

Richard Balon, MD
Wayne State University
Detroit, Michigan, USA

Women and Depression. A Handbook for the Social, Behavioral and Biomedical Sciences. Edited by Corey L.M. Keyes and Sherryl H. Goodman; Cambridge University Press, New York, New York; 2006; ISBN 0-521-83157-1; \$34.99 (paperback), \$75.00 (hardcover), 582 pp.

The fact that depression is two to three times more likely to occur in women than men is a well-known statistic. The multitude of reasons for this significant discrepancy has been researched by many disciplines, including psychiatry, psychology, sociology and public health. This comprehensive textbook synthesizes information from the aforementioned specialties to examine social policy, epidemiology, etiology, treatment and prevention of depressive illness in women.

The editors of this textbook put together an international team of experts. The book consists of a Preface, five parts and nineteen chapters. The first section addresses classification and epidemiology of depression.

The second section of this text is titled "Biological, developmental, and aging models of risk." Chapter Three focuses on biological mechanisms involved in depression, particularly gender differences in the regulation of the Hypothalamic-Pituitary-Adrenal axis. Chapter Four is an excellent biopsychosocial summary of depression in women during different periods of their lives. This chapter specifically addresses puberty, menstruation, pregnancy, post-partum depression and menopause. As puberty heralds the significant gender shift in depression prevalence rates, Chapter Five thoroughly defines associated physiological and physical changes, and describes various models to explain the vulnerabilities of this developmental period. The final chapter in this section discusses prevalence, risk factors and consequences of depression in aging women.

Part Three of this text addresses "Cognitive, emotional, and interpersonal models of Risk." Chapter Seven focuses on cognition and depression, including body image, self-esteem, self-efficacy, sociotropy (a need for the acceptance and approval of others), unmitigated communion (a focus on others to the exclusion of self), optimism and pessimism, cognitive and attributional styles, avoidance coping strategies, rumination and suppression. Chapter Eight examines personality traits in women with depression, particularly dependency, and stresses the inclusion of accurate assessment and treatment of maladaptive personality styles. Chapter Nine, titled "The social costs of stress," reviews the biology of the stress response and defines sex differences. An interesting concept of "tend-and-befriend" in women versus "fight-or-flight" in men is described. Differences in vulnerability to social stress are addressed, as is the

role of oxytocin in the stress response. Chapter Ten evaluates gender differences in marriage as a potential contributor to increased depression rates in women. Finally, Chapter Eleven thoroughly addresses the significant risk that maternal depression imparts to children. From prenatal to adolescent years, this issue is described in great detail. The chapter includes an integrative model to help understand how maternal depression affects offspring.

Part Four examines social, political and economic models of risk. Chapter Twelve is broad, examining the “cultural narratives, which organize, provide significance for, and influence the form, frequency, and social relations of women’s depression.” The interpretation of depression during changing western political climates was especially interesting. Chapter Thirteen evaluates the connection between women’s employment and depression. Four specific areas are discussed; depression as a consequence of unemployment, depression as a consequence of job characteristics, depression as a consequence of work and family stress and depression as a barrier to employment. Chapter Fourteen examines the contributions of culture, race and ethnicity and includes results of a large (N = 13,017) study from the National Survey of Families and Households. Chapter Fifteen describes how increased exposure to trauma in early life might contribute to gender-related depression risk. Childhood sexual, physical and emotional abuse is addressed, as is parental loss. Neurobiological sequela of early trauma is described as well. In the last chapter of this section, the focus is on depression in disadvantaged women living in inner-city communities. Vulnerabilities for depression such as discrimination, victimization, drug use, and HIV/AIDS are reviewed. Consequences of depression are mentioned as well, including increased high-risk behavior.

The last section of this text is titled “Systems and processes of treatment, prevention and policy.” The authors include information from the WHO’s Project Atlas (2000), which highlights the disparaging state of mental health resources throughout the world. The authors comment on gender differences in pharmacological treatments and psychosocial therapies. The chapter concludes with an examination of general treatment issues in women, with specific sections on premenstrual dysphoric disorder, pregnancy, post-partum periods, and perimenopause. Chapter Eighteen focuses on prevention, and includes a concise set of recommendations. Finally, Chapter Nineteen touches on several issues not previously discussed, including intimate violence, unintended pregnancy, sexualized objectification and bioenergetic contributions to gender related discrepancy rates.

Keyes and Goodman have edited an extensive, comprehensive and well referenced text that not only discusses reasons for gender differences in depressive illness, but also helps the reader to understand, treat and prevent depression in women. This book would enhance the knowledge of any clinician involved in the care of women with mental illness; however, it is not a book with specific treatment recommendations. Those involved in pediatric health care would benefit from the sections related to the detrimental effects of maternal depression. *Women and Depression* would also be a useful tool for those interested in the formation of public policy, and an effective textbook for Women’s Studies courses.

Mary Morreale, MD
Wayne State University
Detroit, Michigan, USA