Obsessive–Compulsive Disorder: Theory, Research, and Treatment

Overall rating: Excellent
Strengths: Comprehensive, up-to-date coverage of learning theory and biological issues
Weaknesses: Whole area of psychoanalytical contribution is excluded; no mention of emotional aspects
Audience: Therapists, researchers, clients with some background in learning theory and neurophysiology

Since behaviour therapy techniques such as systematic desensitization' and, particularly, exposure and response prevention demonstrated powerful therapeutic effects on obsessive–compulsive disorder (OCD), the interest in this previously refractory psychiatric condition has exponentially increased. So did the publica-

tions.

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Reference
1. Cooper JE, Gelder MG, Marks IM. Results of behaviour therapy in 77 psychiatric patients. BMJ1965;1:1222-5.

Childhood Abuse and Chronic Pain: A Curious Relationship?

Overall rating: Fair
Strengths: Identifies possible cause of chronic pain
Weaknesses: Approach far too narrow
Audience: Analytically oriented psychotherapists

Childhood Abuse and Chronic Pain: A Curious Relationship? reflects more Professor Roy's interest in childhood abuse than his understanding of chronic pain.

I believe it is still too soon to be publishing anecdotal accounts of treatment in this area. This is my main criticism of the book. Because of this limitation it will not be of great help to those treating chronic pain.

Why, in the title, Roy calls the relationship between childhood abuse and chronic pain a "curious relationship" is difficult to understand when one realizes how complex the aetiology of chronic pain can be, and how diversely damaging a history of childhood abuse is.

Pain is a perception. Perception is influenced by the subject's level of arousal and attention, personality type (introversion v. extroversion), as well as past experience and learned behaviour, including cultural factors. This incomplete list nevertheless suffices to suggest a possible explanation for Roy's observations regarding childhood abuse as a possible aetiology when examining chronic psychosocial pain patients; and one has to agree with his observation that both the quality and quantity of published research on these issues falls short.

Roy's experience would make an interesting lecture, but hardly justifies a book.

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Ask the Doctor: Depression

Overall rating: Very good
Strengths: Complete, well written, organized, comfortable style
Weaknesses: Requires high school education level to read
Audience: Patients and families

This book was written to provide just enough information about the common and important condition of depression to a sophisticated lay audience. It achieves that goal in a comfortable, readable format at reasonable cost.

The information provided is much more complete and helpful than any brochures I've seen. Its style is friendly and logical and should encourage healthy behaviour in patients who would benefit from more information than most physicians have time to provide.
Questions at the end of each chapter review important facts, ask patients about their personal experiences and encourage discussion with their doctor. This suggests effective action; however, I would like to see research regarding the actual effects before deciding its value.

The book avoids becoming a competing authority. Throughout the text and the questions there is a respectful implication that further information can be obtained from the patient's physician or other professional. It summarizes a conservative, middle-of-the-road, scientifically supported approach to understanding and treating depression. It is up-to-date and includes brief summaries (equal treatment) of recently introduced medications, the older agents, the psychotherapies and electroconvulsive therapy. It does not prefer one treatment type. Excess detail that might confuse or frighten a patient is avoided.

I like this little book and selectively recommend it to a sophisticated (at least high school education) audience of patients and their families. It would be most useful for patients who are already recovering from, or are currently experiencing the less severe depressions.

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