

BOOK REVIEW

**SCHIZOPHRENIA-BIOPSYCHOSOCIAL APPROACHES AND CURRENT
CHALLENGES (SECOND EDITION) EDITED BY SIEGFRIED KASPER AND
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A lot has been written about schizophrenia but every once in a long while, a gem of a book will appear that will make the reader sit up and take notice. This is such a book with important contributions by numerous experts in the field globally. The management of schizophrenia or even any other psychiatric illnesses is always discussed along the lines of a biopsychosocial model. This book offers an insight into the latest trends and developments in schizophrenia treatment as well as challenges clinicians face on a daily basis when dealing with schizophrenics such as social stigma and violence associated with the illness.

This book has 5 parts to it with numerous contributors to each chapter for each part and the contributors are all reputable experts in psychiatry. Each contributor will be acknowledged at the beginning of the book whereby their names and place of practice are listed.

Part 1-Diagnosis and Psychopathology

Following a short introduction by the editors, the first part of the book kicked off spectacularly with its first chapter out of seven that looked at the historical roots and a brief review of recent developments in schizophrenia research. For trainees and young psychiatrists everywhere who may

not be aware of the tale behind this crippling illness, this chapter is essential for them to be enlightened. However, for those who knew but have forgotten this will serve as a timely reminder of how this illness came about and how different cultures influenced the inception of the illness. Research developments highlighted are mainly concerned with neurogenetics and neuroimaging which is again an area that young psychiatrists and trainees should venture into especially in developing countries.

The second chapter in Part 1 discussed briefly on the epidemiology of schizophrenia as well as updates on gender effects on it and where the future lie in terms of research.

The third chapter is a very important chapter particularly for trainees since it describes the various aspects of interviewing schizophrenic patients from the goals of interview until the last 'Thank you'. As such, this chapter serves as a guide to conduct an interview in a competent fashion.

The fourth chapter is again a chapter that is so vital that it will render this book obsolete without it. It provides details on the evaluation of the symptomatology of schizophrenia using valid and reliable scales that have been specifically designed. It also

describes the evaluation of other clinical aspects such as quality of life, functioning and depressive symptoms of schizophrenia and all these helps to monitor changes clinically and evaluate outcomes.

The fifth chapter talks about one of the most interesting topics to emerge in recent times namely first-episode schizophrenia. It describes the clinical characteristics of first-episode schizophrenia and certain high-impact outcome studies and their results that again could serve as an inspiration to young scientists to replicate these studies in our setting since Malaysia is a melting pot of opportunity with its diverse cultures and smorgasbord of potential genetic information.

The sixth chapter provides detailed information about the differential diagnosis as well as comorbidities that can be seen concurrently. It even provides a table of differentials for easy reference. Each differential and comorbidity is described briefly and this I believe will be very helpful not only clinically but for exam going candidates. The seventh chapter deals with neurocognition and schizophrenia which is again an important aspect since cognitive deficits represent a core feature in schizophrenia and may have substantial influence on the progression of the illness, compliance and psychosocial functioning. This is another area which is important to look into and conduct research on since new agents to treat this illness should be tested for their efficacy in terms of minimizing cognitive deficits and enhancing psychosocial functioning.

Part II-Neurobiology

The second part deals mainly with neurobiology and it started with the eighth chapter in the book which discusses about

genetic and epigenetic factors in schizophrenia. This chapter has been explained clearly and in a manner that will be easily assimilated. It also provides information on genes that could be responsible for the illness such as Neuregulin and Dysbindin.

The ninth chapter dwells on brain abnormalities in schizophrenia. Neuroimaging studies have demonstrated structural changes in the brains of schizophrenics and this chapter describes the changes seen in different crucial areas of the brain and the information provided are tabulated as well. The immune hypothesis of schizophrenia is also highlighted in this chapter.

Chapter 10 gives an insight into imaging in schizophrenia with examples of some neuroimages. With the availability of CT and MRI scans, interest in neuroimaging is accelerating at an advanced rate. Biochemistry of schizophrenia is the next topic of discussion in chapter 11. All the relevant neurotransmitter systems are described here to enable the reader understand the pathophysiological processes in schizophrenia. Chapter 12 is just an extension of the previous chapter but it concentrates solely on dopamine dysregulation and it renewed the age old debate whether this could explain the psychopathology of schizophrenia especially the positive and negative symptoms.

Chapter 13 is the last in Part II and it discusses about neuropsychological markers and social cognition in schizophrenia. Based on the gathered proof that cognitive decline is a core manifestation of schizophrenia, it's more specific for schizophrenia rather than affective psychosis and this correlates well with structural and functional anatomical

deficit and could influence functional outcomes.

Part III-Pharmacological treatment strategies

We were welcomed to Part III of this book by Chapter 14 which provides an update of some meta-analyses on second generation antipsychotics for schizophrenia. This has always been interesting as debates continue with regards to the supremacy of atypicals over conventional antipsychotics. Therefore, this chapter is a must for those who are convinced about this and for skeptics alike. For fence sitters, well this chapter should help to sway them one way or the other.

Maintenance pharmacotherapy has always been a constant battle for clinicians especially with concerns such as non-adherence due to whatever reasons, adverse effects and the list continues. The next chapter in this book addresses this predicament as it is absolutely imperative to get our patients to stay on treatment since at least 40% of patients with this illness are poorly compliant. Various clinical data and strategies are highlighted here which may help us in our daily practice to enhance the lives of patients that had already been ravaged by the illness.

Chapter 16 provides an in-depth look into another aspect of schizophrenia that is part and parcel of our practice; namely treatment resistance. It has been estimated that 20-45% of patients with schizophrenia are only partially responsive to treatment and 5-10% derive absolutely no benefit whatsoever. Therefore, data on Clozapine and other atypicals are shared here. In addition to these, other alternatives such as Lithium, anticonvulsants, benzodiazepines and ECT are also discussed here.

Chapter 17 delves into pharmacotherapy for First episode schizophrenia which I believe is an indispensable inclusion in this book as there have been controversies over this. For example; should we wait and see or should we start treatment and if treatment is started, how long should patients be on treatment.

The following chapter is a very good chapter and highly recommended for trainees to prepare themselves for exams. The pharmacological profiles and pharmacogenetic approaches of antipsychotics are adequately provided in this chapter. Chapter 19 tells us about the various side effect profiles as well as the other burdens associated with these medications. Each individual side-effect is discussed here including metabolic syndromes and drug-drug interactions as well as the strategies to manage them. I personally found this chapter to be of particular interest and use as it is well written and discussed.

Part IV-Nonpharmacological treatment

Psychiatry has always been misunderstood by laymen and other health professionals alike as they believe that psychiatry is all about giving drugs. In reality, that could not have been further from the truth. In psychiatry, medication only plays a role and is not the lead actor in the drama. Nonpharmacological aspects of management can never be excluded and this point can never be stressed urgently enough. Therefore, I believe the significance of the next few chapters should not be underestimated in any way.

Part IV is ushered in by chapter 20 that talks about rehabilitation in schizophrenia namely social skills training and cognitive remediation. Schizophrenia has evolved beyond just symptom control and relapse

prevention. Rehabilitation starts as soon as the therapist laid eyes on the patient. We can no longer afford to wait and rehabilitate later as there are enough evidence to suggest structural and functional ruin if there is no intervention and these destruction could prove irrevocable. Chapter 21 continued in the same vein by providing evidence-based psychosocial interventions for schizophrenia. This is helpful for those who are keen to follow the latest trends in rehabilitative psychiatry and online resources are provided here as well.

Chapter 22 is a short account of transcultural psychiatry and schizophrenia. This is especially relevant to us as we reside in a multi ethnic civilization that is rich in cultural and practical diversity. Chapter 23 deals with another aspect which attracts debate and controversy: ECT in schizophrenia. Many clinicians are still highly averse to using ECT for schizophrenia. Even the public has a negative overview of the treatment modality but the fact remains that ECT has come a long way since Cerletti and Bini experimented with it and now it is a safe and highly effective treatment option. Whether this chapter can have the desired outcome remains to be seen.

Part V-Schizophrenia and society

Coming to the last part of this book, it must be said that psychiatry has advanced in leaps and bounds but the question remains? Is our patients' welfare improving at the same rate? Society still stigmatizes and ostracizes our patients. Certain quarters of our noble profession unfortunately treats them the same way. Therefore, this part is a very important read for all. Chapter 24 starts out inevitably with schizophrenia and stigma which is an old problem but remain as challenging if not more than ever. It defeats

the purpose of having the latest atypical antipsychotics but socially, our patients are still viewed with disgust, distrust and disdain. If anyone wants to read only a chapter from this book, let this be it.

Chapter 25 discusses about another pertinent issue that is patient rights in terms of ethics and clinical care. I have been in the service long enough to know our patient rights are not protected and even if they are, it's not protected enough. How many of us have seen our patients coming to us with heart-wrenching accounts of how they lost their jobs because their employers found out they are on psychiatric follow-up? Some of these patients are not even schizophrenics but recovered depressed individuals. How about those who are not getting insurance coverage, workmen's compensation? And the list hideously goes on and on. How many of them are getting mistreated and abused? This chapter again needs to be read to open the eyes of people to see what they must see and not what they want.

Chapter 26 is about genetic counseling which is another important chapter. The next time a carer asks us a question pertaining to this, reading this chapter will arm and prepare us to address it. Chapter 27 discusses in detail about violence in schizophrenia. In terms of risk factors and how to perform assessments, this is a good chapter as it gives us a guide on looking out for those risk factors and how to prevent violence.

Chapter 28 is the penultimate chapter that talks about schizophrenia and how it affects economy. We all know about the direct, indirect and intangible costs of treating schizophrenia and sometimes not treating it. With the availability of all the latest atypical antipsychotics, it will be a monumental

challenge for us to find a treatment that is not only effective but cost effective as well.

All good things must come to an end. With a heavy heart, this review has to be concluded with chapter 29 that entails transcultural aspects of schizophrenia and age-old schizophrenia. Transcultural aspects of psychiatry are especially pertinent to our practice as we live in a multicultural society as mentioned earlier. This chapter describes different symptoms of schizophrenia according to different cultures and ethnicity. A lot has been said about early psychosis but

late onset psychosis is also an issue to be discussed. What happens to these patients and how they differ in clinical presentations are described in this chapter including the treatment options as well.

In summary, this is an excellent book which will be a valuable addition to any library. It not only combines all the elements of schizophrenia into a single volume but information within are conveyed to the reader like a breath of fresh air. This book comes highly recommended and is a must for all trainees and psychiatrists alike.

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