

Book Reviews

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Your Child—What Every Parent Needs to Know: What's Normal, What's Not, and When to Seek Help

edited by David B. Pruitt, M.D. New York, N.Y.,
Harper Collins Publishers, 1998, 470 pages, \$27.50.

Parents and other caregivers frequently wonder what is normal behavior for a child of a given age. The book *Your Child—What Every Parent Needs to Know: What's Normal, What's Not, and When to Seek Help* is a well-organized resource for these individuals. The first section describes developmental stages of children from infancy through elementary school. Frequently asked questions about infancy are answered, including whether to bottle- or breast-feed, what to do about thumb-sucking, napping, and selecting toys. Many problems of childhood are presented such as colic, separation difficulties, sleep terror, and imaginary friends. Normal negativism, shyness, and aggressive outbursts are described. Practical issues such as how to discuss the arrival of a new sibling, choosing a doctor, and monitoring television watching are also presented. Advice considering later childhood issues is also described, including toilet training, sleepovers, and being a latchkey child. This section aids parents in helping their child develop emotional security, build self-esteem, acquire self-discipline, and accept responsibility.

The second section deals with day-to-day behavioral problems. Challenges at home are covered, such as whining, temper tantrums, breath-holding, sexual behaviors, and tattling. Common situations, such as bed-wetting, dressing, being away from home, twin siblings, and even death of a pet, are discussed. School-related concerns are detailed including the effect of school uniforms, overachievement and underachievement, peer influence, parental participation, cheating, and competitiveness. Sensitive issues such as single parenthood, separation, divorce, adoption, stepfamilies, moving, and gay parenting are discussed. Family crises, including illness, death, unemployment, and poverty, are dealt with. The book covers possible ways to handle difficult situations, such as making family rituals to maintain stability in the home during trying moments. It describes how temperament affects the behavior of children and gives cues as to when parents should be concerned and seek professional help. Community issues are emphasized that may affect children, such as drug use, violence, and even sexual crimes. Abuse from the child's perspective either as a victim or as a perpetrator and how to handle these crucial issues are discussed. Parents and caregivers are taught how to educate their children to say "no" in order to protect themselves. Sensitivities to cultural diversity and the importance of privacy and respect are addressed. The emotional effects of chronic medical problems and life-threatening diseases are also reviewed.

The third section covers relatively common as well as less common psychiatric disorders of childhood. These include disruptive disorders (attention-deficit/hyperactivity disorder, op-

positional defiant disorder, and conduct disorder), emotional disorders (separation anxiety disorder and obsessive-compulsive disorder), and affective disorders. Rare disorders such as reactive attachment disorder, motor and vocal tic disorders, avoidant disorder, psychotic disorders, and autism are also described. In addition, emotional problems related to childhood trauma are presented in a manner relating them to potential childhood behavioral presentations.

The final section describes when and how to seek help when behavioral problems occur. The various psychotherapy treatments now used in the field of child psychiatry such as individual, play, group, and family therapy are described along with their indications and their benefits. Psychopharmacologic treatments are also explained along with their indications, their benefits, and possible adverse effects. Other interventions, including in-home services, foster care, partial or day treatment programs, and residential treatment, are discussed along with their indications. In addition, the appendix and glossary are themselves informative since they discuss medications, physical and laboratory examinations, psychological and educational testing, and terminology that are often used in children with psychiatric problems.

In summary, *Your Child* is an exceptional book in that it is easily read, covers a large range of developmental issues, and provides useful information that is indispensable for every parent or caregiver, although professionals can benefit from it as well. It is a compilation of knowledge from the nation's experts in the field of child and adolescent psychiatry. *Your Child* is extremely valuable in promoting healthy childhood development, the foundation of every individual's mental health.

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Quality of Life in Mental Disorders

edited by Heinz Katschnig, Hugh Freeman, and Norman Sartorius. Chichester, U.K., John Wiley & Sons, Inc., 1997, 402 pages, \$137.00.

There is a good reason to read a well-written book on quality of life in psychiatric disorders—improving quality of life is the essence of why we practice and is the symbolic and measurable representation of the nonphysiologic aspects of disease. Quality of life can be divided into the study of subjective assessments of well-being or satisfaction, the evaluation of the patient's functional status, and lastly, the exploration of contextual factors, such as environmental living conditions.

This volume is thoughtfully segmented into sections on conceptual issues, assessment and measurement, and literature review. Discussions of quality of life in specific mental disorders, treatment and management issues, and a final section on policy and planning complete the offerings. The sections on conceptual issues and assessment and management are best suited to those pursuing quality-of-life research. The chapter on stigma and quality of life is challenging and informative.

I really became involved with the text when I read the section on quality of life and specific mental disorders, which interestingly and extensively covers depression, anxiety disorders, schizophrenia, and child and geriatric psychopathology. This section was a wonderful appetizer for the section on treatment and management issues, which was outstanding. Here, the authors individually review quality of life as it relates to psychotropic medication, psychotherapy, and long-stay patients discharged from the hospital. This section also includes an excellent chapter on the quality of life of relatives of the mentally ill and even an important chapter on quality of life of staff working in psychiatric services. In the final section, policy and planning issues such as measuring the quality of life in cost analysis are adequately covered.

All sections of this volume are well written and extensively referenced. The volume is valuable for both the researcher and the clinician.

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Textbook of Pediatric Neuropsychiatry

edited by C. Edward Coffey, M.D., and Roger A. Brumback, M.D. Washington, D.C., American Psychiatry Press, 1998, 1566 pages, \$175.00.

First impressions of books are important—like first impressions of blind dates and real estate. My first impression of the *Textbook of Pediatric Neuropsychiatry* was that it is comprehensive, thorough, reader-friendly, and heavy. Its basic dimensions are 60 chapters, 103 authors, 1500 pages of text, 60 pages of index, and 10 pounds in weight.

This book is reader-friendly because the type font is large, the paper stock is heavy, and there are plentiful charts, diagrams, and tables. Much useful material is organized into the appendices that follow some chapters. For example, the chapter on neuropsychological testing has a helpful appendix entitled "Review of Selected Descriptive Neuropsychological Tests." One of the chapters on neuropsychopharmacology has multiple appendices that outline the details of pharmacotherapy, including the dosage schedule, serum level, risk factors, potential adverse effects, and drug interactions of psychotropic medication.

The text contains an intense dialogue between pediatric neurology and child and adolescent psychiatry, for which the editors have assembled topics that pertain to both of these medical specialties. The editors are C. Edward Coffey, a psychiatrist and neurologist who is chairman of the Department of Psychiatry at the Henry Ford Health System in Detroit, and Roger A. Brumback, a neurologist and neuropathologist at the University of Oklahoma College of Medicine, Oklahoma City. Some parts of this book will primarily interest neurologists, such as the chapters on "Stroke in Infants and Children" and "White Matter Disease." Other chapters, such as "Anxiety Disorders" and "Substance Use Disorders," will almost exclusively interest

child and adolescent psychiatrists. But most chapters in this textbook bridge these 2 areas of medicine in a way that will interest practitioners in both disciplines. The editors and authors have also tried to bridge the gaps between basic neuroscience, neuropathophysiology, and clinical practice. An example of this attempt is the chapter on "Tics and Tourette Syndrome," which includes sections on its history, phenomenology, comorbid conditions, natural history, epidemiology, geriatrics, pathophysiology, clinical assessment, and treatment.

It is important to encourage this dialogue between pediatric neurologists and child psychiatrists because these specialists do not always think along the same lines and they can learn from each other. For instance, the treatment algorithms created by pediatric neurologists provide detailed, step-by-step instructions regarding the selection of specific medications; the chapters written by child and adolescent psychiatrists emphasize general principles. Pediatric neurologists seem to think about the treatment of symptoms, whereas psychiatrists think about the treatment of disorders. Neurologists enjoy talking about neuroanatomy and neurophysiology, whereas psychiatrists put their energy into describing multimodal treatment programs.

Because of production schedules, it is hard to include the most recent and current references in a comprehensive textbook, especially in a field that is rapidly evolving. The editors and authors of the *Textbook of Pediatric Neuropsychiatry* tried to include 1997 and 1998 references, such as a 1997 study showing the effectiveness of fluoxetine in children and adolescents with major depressive disorder, a 1998 study on the genetics of autism, and practice parameters of the American Academy of Child and Adolescent Psychiatry that were published in 1997. In some cases, footnotes were added during the last stages of production to modify material in the text, such as a caution regarding the use of desipramine. One of the consequences of striving to make such a large book as up-to-date as possible is that the 103 authors do not stay coordinated—there are occasions when the authors contradict each other. In chapter 52, for instance, pemoline is discussed as a possible treatment of attention-deficit/hyperactivity disorder, despite the rare occurrence of hepatotoxicity. However, the author of chapter 51 said, "we are no longer using pemoline because of the hepatotoxicity reported with this agent." There also appears to be a difference of opinion as to the first choice of medication for depressed adolescents: chapter 16 recommends selective serotonin reuptake inhibitors; chapter 51 advises tricyclic antidepressants. This is particularly disconcerting since the chapters were written by the same authors.

Psychiatrists will be most interested in Section III of this book, which contains chapters on "Neuropsychiatric Aspects of Psychiatric and Behavioral Disorders of Children and Adolescents." The discussions of mood disorders, autism, nonautistic pervasive developmental disorders, and attention-deficit/hyperactivity disorder are particularly pertinent. In Section V, which covers "Principles of Treatment in Pediatric Neuropsychiatry," the topics of electroconvulsive therapy and genetic evaluation and counseling are discussed more thoroughly than in traditional child psychiatry texts.

The trainees of today and the child and adolescent psychiatrists of tomorrow need to appreciate more than ever the neurologic bases of the disorders that they treat. This book is the first comprehensive survey of the emerging field of pediatric neuropsychiatry. Perhaps the book's motto should be, "It ain't heavy, it's my authoritative textbook!"

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