Book Reviews


The authors of this book are a psychiatrist (Dr. McKenna) and an English professor (Dr. Oh). The collaboration of these two disciplines makes great sense for this book, since it explores the causes for the speech abnormalities in schizophrenia. The authors point out in the preface that this is quite likely the most highly studied symptom of the most researched syndrome in psychiatry. But they believe this work is fully justified because no books on the topic have as yet looked closely at the implications of Nancy Andreasen’s Thought, Language and Communication (TLC) rating scale, nor truly taken advantage of new progress made in neuropsychological approaches to schizophrenia. So in eight chapters, the reader is led from a description of schizophrenic speech, through differential diagnostic issues, to major theoretical conceptual approaches about “thought disorder,” and finally to a summarization and some speculation about the future. Schizophrenic speech is, to some extent, a window into schizophrenic thought, and therefore an exploration of the abnormalities of thought is necessary in trying to understand what happens to communication.

The authors make every attempt to enhance the readability of these theories and concepts, even injecting humor from time to time, but despite this obvious effort, the writing is fairly dense (heavily content laden) in spots. In fact unless one is already something of an expert in the field of thought disorder as a theoretical construct, or perhaps in computer models of human thought, many of the distinctions here may seem esoteric. However, the first chapter (“Describing schizophrenic speech”) and the final chapter (“Some conclusions and a few speculations”) are both very clear and, if read consecutively, give brief summaries and some understanding of the book’s major theses. These would include explanations of thought disorder that are neurologically anchored (dysphasia), language-based (“communicative competence”), come from disorders of attention (“dysexecutive function”), and/or have to do with problems of semantic memory (the memory that involves general knowledge of the world).

The authors have provided a reference section, as well as a subject index, which are from time to time of great help in catching up to their important points or seeing where a specific paper has fit historically. They include figures, graphs, and the occasional photograph illustrating results from some of the numerous studies which are cited in this book. Throughout the book, there are boxed-off segments that include quotations, definitions, and examples. Generally these are quite helpful, although occasionally they continue over several pages and the reader may get lost while trying to separate main-line text from what is set off.

I would not recommend this book for medical students or others just beginning their interest in schizophrenia, even though the title is rather eye-catching. I fear it is too deep an investigation of too narrow a topic to be of much benefit to them. However, psychiatric residents, psychiatrists and psychologists whose practices include schizophrenia, researchers looking for additional references or theoretical approaches to the mysteries of psychotic communication, and neuropsychologists would likely find the book of significant help and meaning.

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Every clinician would probably agree that eating disorders are notoriously difficult to treat and to deal with. Every clinician would probably also agree that good patient assessment is a foundation for a good diagnosis and treatment plan. Thus, a book on assessment of eating disorders should be useful for anybody interested and involved in treating eating disorders.

Drs. Mitchell and Peterson, editors of this volume, gathered 19 authors/presumed experts to address this topic in an organized and comprehensive volume. The book consists of a Preface and 12 chapters.

The first two chapters discuss diagnostic and classification issues of eating disorders. Chapter 1, “Diagnostic issues,” by Timothy Walsh and Dana Satir, “reviews the evaluation and assessment of patients with disordered eating in general clinical setting.” It goes over the psychiatric interview and differential diagnosis. It also briefly mentions the eating disorders not otherwise classified, such as subthreshold eating disorders, night eating syndrome, and childhood eating disorders. Chapter 2, “The classification of eating disorders,” by Kathryn Gordon,