

chapters can stand on its own as a review of the current understanding of the topic in its specific area. Several of these chapters have practical sections on differential diagnoses, treatment, and the interaction of the comorbidities, yet some chapters have extensive pathophysiology sections discussing how each comorbidity affects the other. These pathophysiology sections, generally speaking, are extensive (sometimes running over 13 pages as in chapter 10), theoretical, and purely academic. They may be of little interest for today's busy clinician. On the other hand, these sections can be used as a nice quick reference for the current academic medical literature in the areas covered.

Two extensive chapters on osteoporosis and reproductive endocrinology discuss the literature on the still-evolving links between these areas and mood disorders. Section VI starts with a chapter on "Chronic Pain Syndromes and Comorbid Mood Disorders." The authors efficiently address this common issue in our practice, which is often felt to be obscure to many of us. They cover conditions that not only pertain to the common pain (chronic back pain), but also to other pains such as those due to abuse, headache, fibromyalgia, irritable bowel syndrome, and even chronic pelvic pain. I was also intrigued by the summary of different hypotheses for the correlation between pain and depression.

In summary, this book is a useful update for primary care physicians, psychiatrists, residents, and fellows, especially fellows in psychosomatic medicine and consultation services. There are many tables that summarize different studies; the references at the end of each chapter are particularly valuable. The first section is more geared toward primary care medicine and talks about the basics. The latter sections, though, are more in-depth discussions that broaden our understanding of the dual relationship of the mind-body link of various chronic illnesses. They help us to differentiate between mood and physical symptoms, which is not always an easy job.

REFERENCE

1. Feighner JP, Robins E, Guze SB, Woodruff RA Jr., Winokur G, Munoz R: Diagnostic criteria for use in psychiatric research. *Arch Gen Psychiatry* 1972 Jan; 26(1):57-63

Nagy Youssef, M.D.
Hattiesburg, Mississippi

Law and Mental Health: A Case-Based Approach. By Robert G. Meyer and Christopher M. Weaver; The Guilford Press, New York, New York; 2005; ISBN 1-59385-221-5; \$45 (hardcover); 394 pp.

This book is divided into 22 chapters with seven major headings: Basic Court Proceedings, Legal Precedence, Forensic Evaluations, Civil Law, Specific Mental Diagnosis in the Law, Violent Crime and Criminals, and Juveniles in the Legal System.

The chapters address major themes that any study of the interface of law and mental health has to include, namely confidentiality, duty to warn, competency, and informed consent. Each chapter presents landmark cases that set precedence for applying the law. Civil and criminal court proceedings are explained along with jury selection, sex offender laws, and the application of laws in cases involving juveniles.

It introduces the reader to some of the lingo relevant to understanding the practice of law, such as "Frye Standards" and "Batson Objection" and the origins of it. Widely known laws such as Megan's Law are included as illustration to some of the difficulties of applying the law in some cases without creating situations that could be challenged by appeals to a Supreme Court review. All this is achieved while keeping an objective view in presenting both sides of any argument.

The reader will benefit from special chapters on criminal psychological profiling, the death penalty, and whether addiction should be addressed as a mental health issue vs. a legal issue, or both.

The book is well written and readers will find it easy to read with a natural flow of information and an abundance of examples that solidify and clarify the points and arguments made. I particularly appreciate the authors' style of presenting information in an interesting format that grabs the reader's attention rather than just list one fact after another, and I found myself reading every chapter without skimming, skipping, or taking breaks.

I would recommend "Law and Mental Health" to anyone interested in mental health in general and forensics in particular, as well as those who intend to embark on a practice of the law. With the criminalization of the mentally ill and the medicalization of criminals and their offenses, this book enriches the ongoing exchange of information between the fields of law and mental health.

Shahm Martini, M.D., MPH
Seattle, Washington

Diagnosis Made Easier: Principles and Techniques for Mental Health Clinicians. By James Morrison; The Guilford Press, New York; 2006; ISBN 10: 1-59385-331-9; \$36 (hardcover); 316 pp.

Dr. Morrison has written other books on similar topics—*DSM-IV Made Easy*, *The First Interview*, etc. This gives him a lot of familiarity with the concepts involved, and it shows in the relaxed, almost conversational style of his writing. The book is divided into three parts: the basics, building blocks, and applications. The first section begins with a case description, to which the author refers from time to time as the book progresses. In fact there are multiple brief case vignettes throughout the book. Dr. Morrison offers a "roadmap" for mental health diagnosis—an algorithm for managing diagnostic data in blocks. He talks about decision trees, managing conflicting information, dealing with the uncertainty of too little