



### Assessment Scales in Depression, Mania and Anxiety

R. W. Lam, E. E. Michalak  
& R. P. Swinson  
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The first brief chapter in this book rehearses the arguments for using rating scales routinely in evidence-based practice in order to evaluate effectiveness, inform treatment choice and improve outcomes. Scales are also useful to highlight or detect symptoms that might be missed by a more impressionistic approach (personalised in the chapter as Dr Gestalt). By obtaining ratings on the other hand, Dr Scales can detect early improvement on medication and avoid unnecessary dose increases; conversely she can tell that remission has not been attained and optimise treatment. It remains the case, however, that rating scales have largely been the province of research, and clinicians have been slow to embrace them for use in clinical settings. Difficulty of use or insufficient time is not a convincing excuse given the availability of short forms of observer rating scales and self-rated scales; rather the culture of practice needs to change.

Persuaded by this argument the clinician turns to the rest of the book which is divided into four main sections, each prefaced by a brief description of the clinical area and DSM-IV-TR criteria where appropriate. The sections are: depression and mania; anxiety; related symptoms/side-effects/function/quality of life; and special populations. Two appendices provide an alphabetical list of scales and give a summary of which scale to use and when, helpfully giving the time for completion as well as the population and indication.

Ninety-four scales are included, with each summarised on one to three pages

which give a brief description of its use, of the scale itself, scoring and a few key references. If copyright allows, the scale itself is reproduced with any restrictions, otherwise contact details are given so that it can be obtained.

I was impressed by the breadth of scales included and I found no obvious omissions that clinicians and general researchers would either need or come across in their reading. There is an admirable conciseness which allows a large number of scales to be included and their essence extracted.

Does the book meet the explicit aims of encouraging clinicians to use rating scales and providing them with the tools for the job? Here I have some reservations; it is difficult to know in practice which scale to choose. It would have been helpful to have had more guidance on this. A section with shortlists of scales for specific common situations would have enhanced the collection. For researchers it is a useful summary and overview and will prove to be a valuable resource. The conciseness means that key psychometric properties of the scales are not included (details of sensitivity, specificity, retest reliability, etc.), but the references allow these to be found if needed.

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### Psychotherapy and the Treatment of Cancer Patients: Bearing Cancer in Mind

Lawrence Goldie & Jane Desmarais  
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Through the use of familiar case vignettes the authors quickly capture the attention of those interested in liaison psychiatry

and this book is a must for trainees at all levels. Drawing on Lawrence Goldie's experience of bringing psychoanalytic psychotherapy to specialist cancer care, a holistic approach is described which is applicable to many of the clinical scenarios common to the practice of liaison psychiatry across all hospital specialties.

The authors focus on the importance of the patient's narrative, the needs of patients and their families and carers, and the very real difficulties encountered when entering the sick role in hospital. They explore the cultural and communication gaps between naive young hospital doctors and their often mature patients with much greater life experience. The different factors motivating physicians, surgeons and patients are highlighted. How taking the time to talk can help patients and professionals adjust to the emotional challenge of life-threatening illness is also emphasised. Changes in the health service over the past 30 years have altered the care environment, presenting patients and their families with a bewildering journey through a large technological experience. Goldie reminds us of the importance of listening to and talking to as well as at our patients.

The patient stories are the book's strength and it should have wider appeal to trainees in oncology and palliative care provided they can cope with the explicit criticism of their disciplines' historical approach to cancer care. Although I found myself nodding in agreement with much of the sentiment, I felt uncomfortable with the generality of the criticism.

This book is a timely reminder to all of us in psychiatry to slow down and not allow service pressures to erode the therapeutic value of time spent in conversation with patients and carers at a pace and level that enables their adjustment to the life event that is hospital admission.

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