

## The ECT Handbook (Second Edition)

*Editor: Allan IF Scott.*

*Gaskell (Royal College of Psychiatrists), London, 2005.*

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Electroconvulsive therapy (ECT) has been used to treat various psychiatric conditions, including depressive illness, mania, schizophrenia and catatonia. The technique has become an important treatment in contemporary psychiatric practice. However, there are concerns about its efficacy, safety and mode of action. This handbook may not provide a clear solution or any definitive answer on the place in therapy of ECT, but it does provide timely materials and recommendations, and is written in the light of recent guidelines.

The main text is divided into 4 parts: clinical guidelines; psychotropic drug treatment and ECT; the administration of ECT; and the law and consent. Part 1 begins with "the place of ECT in contemporary psychiatric practice", where the existing recommendations on the role of ECT in the treatment of depressive disorder, mania, schizophrenia and catatonia can be found. These are considered and discussed in detail in the subsequent chapters. In the treatment of depression, the circumstances under which ECT should be used as a first- or second-line treatment are clearly delineated. In schizophrenia, the evidence to support the use of ECT as a maintenance treatment is examined critically.

The chapter on the law and consent to treatment reflects recent concern on legal aspects of informed consents and the rights of people incapacitated by mental disorder. The statutory provisions of the Mental Health Act 1983 are not directly applicable to Hong Kong. However, the common law position and reasoning, such as the 'Bournewood' judgement, the concept of 'necessity' and the assessment of mental capacity are relevant to our clinical practices. The discussion on the law and consent to treatment in the UK can be very useful material for trainee psychiatrists preparing for professional examination in the UK.

This edition updates knowledge in ECT and recommends some important practical changes since its first edition, which was published in 1994. For example, it emphasises the need for the electrical dose to be tailored to the needs of individual patients. The fixed-dose policy, described as acceptable in the first edition, is criticised for its potential to cause acute and longer term cognitive effects without any commensurate efficacy benefit. Furthermore, this edition states that if the patient's clinical improvement is satisfactory, it is not necessary to increase the dose in the face of shortening of the length of convulsions over the course of ECT.

In addition to the main text for this book, the appendices must not be overlooked. A sample stimulus dosing protocol and a worked example can be found. These samples allow the reader an increased understanding of stimulus dose titration and adjustment throughout a course of ECT. In addition, there are examples of consent forms, suggested templates for authorization in the case of incapacitated compliant patients, and emergency treatment.

The information in this book is relatively easy to follow and comprehensive. It will prove a valuable resource not only to the practicing psychiatrist, but also to the trainee. I think that this book is unique in considering the theoretical and practical aspects of ECT. Although the views expressed do not necessarily reflect those of the Royal College of Psychiatrists, the book can serve as an important reference concerning standards and guidelines for ECT in clinical practice.

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## Advanced Family Work for Schizophrenia: An Evidence-Based Approach

*Author: Julian Leff.*

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This book is a companion volume to *Family Work for Schizophrenia*, the second edition of which was published in 2002. In this slim volume, Professor Julian Leff has distilled 19 anonymised case histories from the comprehensive

records of about 150 families discussed during his supervision of family work for psychosis with mental health teams in North and South London. The 19 families chosen illustrate the most difficult problems encountered by the teams

in the past 10 years. In most of the families discussed, the patients have a diagnosis of schizophrenia, but there have also been cases involving manic-depressive psychosis, and a few with other psychiatric conditions. The importance of family work in the treatment and prevention of relapse of schizophrenia is stressed.

This book is written in plain English and is thus easy to comprehend. The book consists of 9 chapters, followed by a list of references quoted in the text and an index. The professionals involved in the case histories (therapists under the supervision of the author) represent all of the disciplines present in community health teams, such as nurses, psychologists, psychiatrists, social workers, occupational therapists and psychiatric assistants. This book is therefore not only relevant to the practice of doctors, but also to those of allied health care professionals working on the family of people with psychosis.

In Chapter 1, the introduction to the book, the author gives an important message that persistent effort is required in family work for psychosis. The follow-up period of the 19 families described ranges from 3 to 30 months, with an average of 12 months. The author mentions that in some instances, families and the therapists working with them reach a plateau; that is, they advance to a certain stage and then seem to lose their impetus. This can happen when symptoms subside and there is a return to a more normal state. The author emphasises the need to move the work to a new phase by focusing on obtaining employment, promoting and sustaining outside relationships and enhancing the patient's self-esteem.

The problems represented by these illustrative families have been grouped under 7 headings (Chapters 2 to 8) for easy reference. Each family is described in detail, followed by a summary of the presenting problems, the formulation and the suggestions of the author. The follow-up progress and intervention at the subsequent session of the family work are illustrated with further recommendations by the author. The work for each family is analysed at the end by the author for its failure, successes and lessons learned. The methods of intervention are supported by evidence and some up-to-date references are included.

In Chapter 2, the author stresses that 'culture clash' can happen between the family and the wider society as well as within the family, hindering the family work for psychosis. When migrant groups come into contact with the host culture, there are a number of ways in which they can attempt to accommodate to the situation. One way is to strive to preserve their traditional cultural values. In working within these families, the author emphasises the need to be sensitive to cultural norms concerning communication. In Chapter 3, family work for people with a "psychotic illness and a physical condition" is discussed and this combination of physical illness and psychosis is likely to engender over-involved and over-protective attitudes in carers. Over-involvement and over-protectiveness are common in Chinese families and this chapter is particularly relevant to our daily practice. It is

essential to recognise that over-involved carers are doing what they believe to be the best for the patient and are devoting a huge amount of time and energy to the task, which often becomes the centre of their lives. The author gives us an important message that therapists should be extremely careful to avoid the carer feeling that they are being criticised and displaced from their role.

Chapter 4 illustrates the work for families with "more than one member suffering from psychosis". Such families are relatively common in the clinical setting, and the author stresses the necessity to appreciate that the experiences and needs of the individual affected members are often very different, even when they have the same diagnosis. Their needs are shaped partly by their personalities and partly by the life stage during which the illness appears. Interestingly, a Hong Kong family that migrated to the UK is used as an illustrative example for family intervention in this chapter.

In Chapter 5, families with "parents in a conflictual relationship" are described and the term "emotional divorce" of parents affecting the well-being of the patient is explained. In "emotional divorce", the couple does not communicate with each other in family meetings and shows no physical closeness, greatly hindering the work on the family. Chapter 6 mentions the technique in dealing with "dysfunctional families" in which severe disruption of family roles and relationships is prominent. Chapter 7 describes how "unresolved past traumas" such as childhood sexual abuse lead to a sense of shame or intense anxiety which are often concealed from others in the patient's family. Chapter 8 explains the way to deal with "exploitative carers" who may take advantage of the patient's vulnerability for their own benefit. In Chapter 9, the author shares some his experiences in doing family work, a particularly useful part of the book. He mentions that sometimes therapists feel like giving up when faced by a difficult family that seems to be stuck, and believes that a support group for therapists engaged in family work is essential. The most valuable contribution a therapist can make is to give the families and patients hope.

As I read this book, I noted that some of the patients illustrated are similar to those we encounter in daily practice, despite some families being quite different because of the cultural differences between the UK and Hong Kong. The detailed histories and follow-ups constitute a useful learning experience for both skilled therapists and novices engaged in family work involving patients with psychosis. Moreover, with the increasing emphasis on psychotherapy and family work for patients in the training of psychiatrists, this book is useful and practical, especially for those preparing for the UK professional examinations.

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