



Traumatic Dissociation: Neurobiology and Treatment

Edited by Eric Vermetten, Martin J. Dorahy and David Spiegel, American Psychiatric Publishing, 2007. 398pp. US\$67.00 (pb). ISBN 978158562196X



Workplace-Based Assessments in Psychiatry

Edited by Dinesh Bhugra, Amit Malik & Nick Brown. RCPsych Publications. 2007. 174pp. £15.00 (pb). ISBN 9781904671466

There is little debate regarding the existence of dissociation, particularly following overwhelming traumatic events. It often represents a normal response but in some individuals is problematic. Indeed, peritraumatic dissociation has been strongly associated with the development of post-traumatic stress disorder. Dissociative disorders, with their often bizarre, intriguing and illogical presentations, have provoked more disagreement amongst professionals, a particular example being discourse over the existence and prevalence of dissociative identity disorder.

Vermetten, Dorahy & Spiegel have brought together a group of experts in this field to produce a very readable volume that provides a comprehensive overview of the current knowledge base, largely from the viewpoint of individuals who strongly believe in the concepts they discuss. Several chapters do an excellent job in objectively reviewing the evidence and not shying away from the scepticism they recognise is present among some individuals. Lowenstein, in his chapter on dissociative identity disorder, argues the case of apparent double standards when assessing the research evidence collected in studies of dissociative identity disorder when compared with that of other disorders and cogently argues that a body of research data has been entirely discounted.

The book is separated into three parts. The first considers the conceptual domain of dissociation, covering the history of it as a concept and its relationship with trauma and post-traumatic stress disorder, along with the contribution of attachment theory. The second part provides an excellent review of work concerning the neurobiology of trauma and dissociation. Perhaps not surprisingly the first two parts raise more questions than they answer but certainly demonstrate that a considerable amount of well-designed work has been done in the area of traumatic dissociation and that there is a need for more.

The final part discusses contemporary implications for assessment and treatment. Most of the chapters provide helpful, practical tips for clinicians to manage some of the most complex patients they are likely to encounter. Chu's final chapter on the treatment of traumatic dissociation is a fitting end to the book. He advocates a cautious, pragmatic approach to patients with traumatic dissociation, arguing for the building of coping skills before attempts to explore and work through traumatic experiences. He importantly comments that 'excessive fascination or preoccupation with dissociative phenomenology' can adversely impact on outcome.

Doctors share with airline pilots, and others to whom the public entrust their lives, a requirement to develop complex skills over many years of supervised training, and to demonstrate their competence in performing routine tasks and managing crises. Psychiatry, with its focus on spoken communication, has tended to rely on *in vitro* methods of supervising training (cosy one-to-one supervision behind closed doors well away from patients or team colleagues, or case presentations in busy ward rounds) rather than the direct, *in vivo* transmission of skills expected of a classical apprenticeship.

For many reasons, helpfully summarised in the preface and introduction to *Workplace-Based Assessments in Psychiatry*, these methods have been found wanting and a range of unfamiliar methods of assessing trainees are being introduced. Bhugra, Malik & Brown aim to provide both a handbook and a practical manual for the new generation of assessors and the trainees they will guide. How well do they succeed in these overlapping, but distinct, aims?

The majority of the book comprises a set of monographs on the separate instruments that will be used to structure and record their assessments. These are supplemented by an appendix that allows both assessors and trainees to see, possibly for the first time, the forms used to do so. As a 'how to' manual this succeeds well, and the detailed performance descriptors will do much to demystify the process (and the plethora of acronyms: DOPS, mini-ACE, and the like). The major deficiency of this section, which could be remedied easily, is the lack of a timeline to show when and how the various techniques should be timetabled into busy clinicians' diaries.

Less satisfying are the handbook components that should provide rationale and context. Psychiatry has benefited from the fact that other specialties have been using similar methods for some time, so there is both experience and evaluation of their use. However, although the overview of methods is clearly written, it has too little evidence to draw upon and the section on pilot studies cannot provide assessors and trainees with confidence that the new system is more than 'work in progress' (p.107). Tensions between the context-specific limitations of workplace-based assessments and the need for generalisability of psychiatric skills are touched on but in a chapter that focuses too heavily on a description of the possible structure of the new MRCPsych examinations. Finally, at no point is it clear that the whole is more than the sum of its parts: there is too little indication of whether the assessment tools are sufficiently joined-up and cover all aspects of specialist training. If the Postgraduate Medical Education and Training Board requires assessment to be 'based on

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