This book represents a departure from that beaten track. A textbook on culture and mental health that has chapters on epidemiological method and mental health law is truly unique. This book is not about the reification of 'culture-bound' syndromes nor is it constrained by a narrow definition of culture. Rather, it presents evidence, much of it from legitimate cultural representatives, for why the experience of psychiatric syndromes and the treatment for such have to be considered within the context of the culture of the patients experiencing such syndromes.

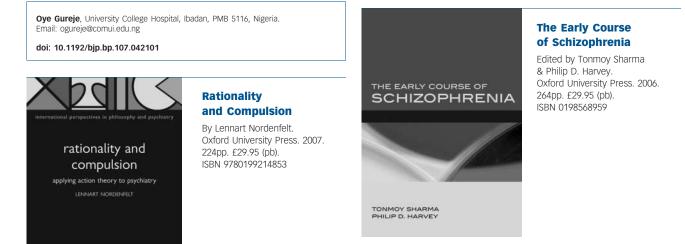
The result is an impressive opus that lives up to its promise of being comprehensive. The first part of the book has chapters dealing with basic sciences and provides a much-needed grounding for readers who want to be able to critically review what they read in the literature regarding, for example, crosscultural studies. The second part has chapters, of varying lengths and details, dealing with cultural aspects of mental health in various regions of the world. However, the section flips between nations (Russia, South Africa, etc.) and regions (West Africa, South Asia, etc.), thus, perhaps, losing some consistency of organisation. That notwithstanding, this part of the book is a treasure trove, drawing on local experiences and sensitive analysis of the ways in which culture, in the broadest sense, shapes the experience of mental disorders and the delivery of services to those affected. An informed discussion of culture in the context of mental health must avoid inflation of differences as much at their deflation. This book strikes the right balance and deserves wide readership among practitioners and trainees.

My concerns are of a different sort. The book does exactly what it says on the tin: it applies action theory to psychiatry. Methodologically, this is a fairly safe option. Take a theory which explains when certain actions are rational, and use it to answer the question of whether a certain type of behaviour occurring in a certain type of mental disorder can be legitimately characterised as an instance of intentional behaviour which satisfies the relevant norms of rationality. If you think the theory works, and has advantages over its competitors, then you will get a good illustration of it by throwing in some interesting examples from psychiatry, where an initially puzzling phenomenon is made clearer by the application of the theory of your choice.

However, this is a classic case of imposing independently motivated theoretical distinctions onto real-life problems without properly acknowledging that the analysis of those problems can feed back into the theory. The study of mental disorders does not simply illustrate how elegantly our theoretical commitments can provide answers to questions about intentionality and rationality. Rather, it helps us redefine what intentionality and rationality are. Regrettably, there is little of this feedback loop in Nordenfelt's work.

Lisa Bortolotti, Philosophy Department, University of Birmingham, Birmingham B15 2TT, UK. Email: I.bortolotti@bham.ac.uk

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Rationality and Compulsion is a very useful resource for those philosophers of mind who might wonder what the practical dimension of their work is, and to those psychiatrists who are interested in the philosophical issues raised by the study of mental disorders. Nordenfelt has the great merit of writing clearly and developing the book around a very transparent structure. First, he combines his insights in philosophy of action and philosophy of health to create a solid theoretical apparatus, and then draws from that some conclusions about rationality that he applies to the case of compulsion. The theses put forward are well-argued and overall convincing, although the reader sometimes gets the impression that they are being rushed through a very intricate terrain and not made totally aware of the implications of what they are tempted to agree with. But this is inescapable in an ambitious work such as Nordenfelt's. There was a shift surrounding schizophrenia in the latter decades of the 20th century which continues today, away from a research and therapeutic nilhism, towards optimism in gaining understanding of aetiology as well as effective treatments. Quite right too, you might say. The lack of a single genetic culprit being identified has not dented this enthusiasm, and the scope and quality of research in the area is vast and increasing.

The market for new texts in schizophrenia, therefore, is growing at an equal pace, and it can be difficult to decide which should be a priority to read (and to buy).

Many a text on the market is little more than a collection of loosely connected review papers and conference transcripts which make the heart sink on opening – what can be inspiring to listen to is not necessarily easy to read.

The Early Course of Schizophrenia, however, is much more than this and is one of the best on the market at present. It is clear in its aims and scope, focusing on recent advances in basic and clinical neurosciences relevant to schizophrenia. It is easily accessible in size, yet manages to cover most individual topic areas in considerable detail.

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