(p. 7). Cognisant of the growing number of those with 'overweight and obesity,' it is refreshing to see a clinician guide that attempts to address emotional and physical issues found in both weight and eating disorders.

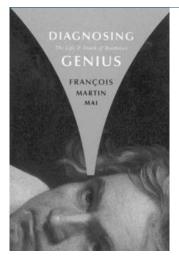
The reader, however, has a rather meandering journey through the early chapters before reaching some that move beyond encouraging personal reflections to more direct advice about how to assess and treat eating and weight issues. There are some pearls here but it is difficult at times to find them among rather less helpful information. Hidden within several of the first chapters is the reasonable thesis that the obesity epidemic and subsequent health risks may well be overstated and the most helpful advice concerning a fit and healthy, albeit mildly or moderately overweight, person is that he or she is well and requires no specific intervention. At one point medical practitioners are gently remonstrated to reflect on how patients might feel when asked to be weighed, especially when done 'opportunistically' during a consultation for an unrelated issue.

However, some areas are problematic, particularly the final chapter on treatment where evidence-based therapies such as cognitive-behavioural therapy are accorded the same (or even less) emphasis as other treatments with much less to recommend them (e.g. gestalt therapy). The high reliance on internet-based sources and self-help information as well as the conversational style perhaps set the scene. The book wisely closes with encouragement for the therapist 'not to be afraid' to make a referral to a specialist.

This book is an introduction to eating and weight issues for the undifferentiated practitioner who treats people at the 'not otherwise specified' end of the eating and weight disorders spectrum. It is not an authoritative text and it is not for those managing morbidly obese or severely underweight individuals, or those with even moderately severe bulimia. (A 'further reading' section would have been good in this regard.) Still, it encourages a high degree of personal reflection and integration of one's own views and biases around eating and weight issues, which is helpful to those naive to the area.

Phillipa Hay Foundation Chair of Mental Health, School of Medicine, University of Western Sydney, Campbelltown Campus, Locked Bag 1797, Sydney 1797, Australia. Email: p.hay@uws.edu.au

doi: 10.1192/bjp.bp.108.061523



## Diagnosing Genius. The Life and Death of Beethoven

By François Martin Mai. McGill-Queen's University Press. 2007. US\$29.95 (hb). 288pp. ISBN: 9780773531901 Mai, Professor of Psychiatry at Ottawa Hospital, has meticulously analysed all the existing material and provides a revealing insight into the life and death of Beethoven and how his health and state of mind affected his music.

Beethoven was a prolific letter-writer – over 1500 of his letters are still in existence, from which Professor Mai has extracted every reference to Beethoven's numerous medical conditions and considers them in the minutest detail, splitting them into the various affected systems. In addition, he supplies absorbing tables denoting each medical problem and which letter it is from, and lists them all chronologically. Intriguingly, there are more references to Beethoven's mental health in his letters than any other ailments, even deafness. In 1802 he considered suicide but wrote that 'It seemed impossible to leave this world before I had produced all the works I felt the urge to compose'.

Beethoven's 'conversation books' (which are the actual written 'conversations' used to communicate with him towards the end of his life after profound deafness had descended) are also consulted. These are truly unique and, as Mai points out, they are 'of special interest as some of the very few verbatim reports of doctor-topatient communication we have from the pre-electronic era'. The extracts from these books are simply riveting. The author even provides his own new translation of the autopsy report (originally in Latin) as well as some wonderful plates and comprehensive appendices. The final compelling chapter discusses the links between mental state, physical illness and creativity, drawing on Mai's vast experience as both psychiatrist and musician.

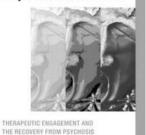
*Diagnosing Genius* is not only exhaustively researched and authoritatively written, it also provides an extraordinary snapshot of the world of medicine during Beethoven's life, composed in layman's terms that will appeal to an enormously wide audience.

Daniel Tomkins Royal College of Psychiatrists, 17 Belgrave Square, London SW1X 8PG, UK. Email: dtomkins@rcpsych.ac.uk

doi: 10.1192/bjp.bp.109.063826

EDITED BY DAVID GARFIELD AND DANIEL MACKLER

## **Beyond Medication**



The attractions, source of a state of the relation and a

## Beyond Medication: Therapeutic Engagement and the Recovery from Psychosis

Edited by David Garfield & Daniel Mackler. Routledge. 2008. £19.99 (pb). 216pp. ISBN: 9780415463874

Beyond Medication contains many impressive case descriptions in which psychotherapists discuss their treatment of individuals with psychotic disorders. Various chapters show how the authors have put great amounts of time and effort into treatments for, sometimes, relatively small improvements. Two chapters are written by former patients and there is also a chapter discussing a survey of patients' experiences of drug treatment.

The overriding aim of *Beyond Medication* is to argue against the dominant position of pharmacological treatment of psychotic

It is lucky for us that Ludwig van Beethoven was more well-known than most during his lifetime as much more information about his life (and death) survives as a consequence. François Martin disorders. The wide range of topics could be a weakness of the book, however. A reader interested in subjective experiences of pharmacotherapy will not necessarily be also interested in technical aspects of psychodynamic treatment.

In the main part of the book psychotherapists describe establishing and maintaining therapeutic alliances with difficultto-engage patients. Various departures from more traditional psychoanalytic techniques are presented. For example, in a chapter about engagement it is described how a patient is accompanied to a museum by the therapist and also how the therapist reads the Bible to a patient at their request. In the UK, a befriender and not a psychotherapist would perform these tasks, were they to take place at all. To those without analytic training it remains unclear what the authors suggest the curative psychodynamic elements in the therapy process might be, let alone how one could apply those techniques.

It is mentioned in the book that if psychoanalytic treatment of a patient with a psychotic disorder is successful, other clinicians tend to express doubts about the original diagnosis. It is not discussed or empirically investigated to what extent the original diagnoses of successfully treated patients actually might warrant revision. The argument in favour of psychodynamic psychotherapy for psychosis would be much stronger if it could be shown, on the basis of independent blind reviews of assessment reports, that the original diagnosis was probably correct.

Beyond Medication encourages readers to reflect upon the dominant position of pharmacological treatment of psychotic disorders. However, it does not offer empirical evidence for the psychological treatments described that in any case appear to be too complex to be applied solely with the help of this book.

Dieneke Hubbeling Springfield Academic Hospital, Wandsworth Crisis and Home Treatment Team, 61 Glenburnie Road, London SW17 7DJ, UK. Email: dieneke@doctors.org.uk

doi: 10.1192/bjp.bp.108.061804