

Major medical illness is clearly a stressor or crisis with which people must learn to cope. Although certain classes of illness pose similar psychological challenges regardless of the individual, the individual's personality determines how he or she experiences the stressor, his or her vulnerabilities, and what emotional resources are available to help the individual cope. Harper appreciates that behavior emerges from the interaction between personality and situational factors.

A senior psychologist at the Menninger Department of Psychiatry at Baylor, Harper describes how different personalities deal with different medical illnesses. The volume is well organized according to the DSM-IV personality disorder diagnostic categories and considers subclinical personality traits as well. In each case, Harper summarizes the clinical manifestations of personality in terms of social support, coping, and relationships with health care providers. He ties personality to preventive behavior (i.e., disease detection and help-seeking), diagnosis of disease, illness representation, and health behaviors (i.e., adherence, resource utilization, and secondary gain). Harper's description of personality features is so well articulated that the clinical descriptions of patients with specific personality disorders and specific medical illnesses flow logically from the theoretical framework. One of the advantages of a single-author work is the consistency of style and theoretical framework. As such, this book is useful as a reference or textbook that readers might selectively dip into, depending on the patient's medical and personality diagnosis. A few case studies or extended clinical anecdotes would have made it even more clinically relevant.

Published by the American Psychological Association as part of a series on Personality-Guided Psychotherapy, edited by Ted Millon, the book draws heavily on Millon's theory of personality. Millon's influence is both a strength and a limitation. Millon defined a matrix of personality factors that generates clear hypotheses and predictions regarding behavior, specifically, how people will cope with medical illness. His ideas are quite compelling and interesting, but despite his influence on axis II nomenclature, his constructs are not wholly congruent with DSM-IV, although this book makes it appear that Harper's theories are completely consistent with DSM-IV categories. There's much research to be done before we can determine the degree of consistency. In sum, I found this book to be sophisticated and useful, especially for practitioners interested in the interface between psychology and medicine.

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## BEHAVIORAL GENETICS

***Behavior Genetics Principles: Perspectives in Development, Personality, and Psychopathology***, edited by Lisabeth Fisher DiLalla, Ph.D. Washington, D.C., American Psychological Association, 2004, 239 pp., \$59.95.

This book is a fitting tribute to Irving I. Gottesman by his colleagues and former students. There is a brief overview of

behavioral genetic designs that helps to make it accessible for those who are unfamiliar with these methodologies. This overview is followed by chapters on substantive findings regarding genetic and environmental influences on topics as wide-ranging as schizophrenia, substance abuse, social attitudes, the relationship of personality and temperament to psychopathology, and ways in which marital status interacts with genotype to influence behavioral and health outcomes.

Several chapters are of interest for how they demonstrate the importance of genetically informative designs for interpreting data as much as for their substantive findings. David DiLalla and Greg Carey, for example, write about personality and psychopathology, but, perhaps more importantly, they illustrate the advantages of a genetically informative design and one way in which examining phenotypic correlations alone can be misleading.

In a thought-provoking chapter, Eric Turkheimer discusses the fact that behavioral genetic studies consistently find little effect of shared familial environments. He suggests that other social scientists are still probably correct in asserting that the family in which we are raised does make a difference, but his simulations suggest that the effects of shared environment are obscured in human studies because random genotypes cancel out differential environmental effects. Arguments are put forth from both sides, showing us that the nature-nurture debate is not dead yet. Everyone agrees that both genes and environment are important in development and behavior, but beyond that most general pronouncement the different camps are still competing over which is really most important.

The chapter by Daniel Hanson presents a provocative theory of schizophrenia. Thinking outside the box, he suggests that schizophrenia may be analogous to a disease such as polio in which only 1%–2% of those exposed to the virus develop paralysis. Consequently, paralysis may not be the most useful phenotype to study. Moreover, there may not be genes for the illness per se but, rather, genes that confer resistance. This raises another important issue for psychiatric genetic research—the need to consider alternate phenotypes.

Although everyone now understands that both genes and environment are important, behavioral genetics is still a long way from being a central part of training in either psychiatry or psychology research. I continue to be struck by the fact that one of the most common questions I am asked about my own twin research is still, "Are they all identical?" To the behavioral genetics researcher, of course, this conveys a lack of basic understanding of the method. Yet with recent advances in molecular genetics and genomics, understanding behavioral genetics and conducting research that is genetically informative will surely become increasingly important. With these concerns in mind, this book serves as an excellent introduction for newcomers to behavioral genetics, while it also addresses sophisticated and provocative issues that will be both interesting and useful to more seasoned researchers.

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