

The book is well written, although it assumes a healthy background in psychiatry. The general flow of information is logical and concise, leading one through the different sections in a coherent and thoughtful manner. This text is stimulating and informative, offering a good overview of the situation for newcomers to the field as well as sufficient current details to keep even the most informed readers interested in the subject matter. The book concludes with a helpful guide to Internet addresses useful for psychiatric genetics and genomics, helping to ensure that the readers maintain their current place at the cutting edge of psychiatric genetics research.

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PROFESSIONAL ISSUES IN PSYCHOLOGY

Unity in Psychology: Possibility or Pipedream? edited by Robert J. Sternberg, Ph.D. Washington, D.C., American Psychological Association, 2005, 185 pp., \$39.95.

This tidy, somewhat brief book is made up of 10 chapters devoted to the issue of unity in psychology. A broad range of perspectives is represented—from Sternberg's opening chapter, suggesting unity in multiple domains, to Kimble's chapter, reflecting a career-long attempt to formulate an overarching theory of human behavior that could serve as a consensus-building focal point. Others propose social relevance (Levant), diversity (Denmark and Krauss), and methodology (Fishman and Messer; Rychlak) as unifying themes. The final chapter, by Staats, is a cogent summary of the differences between preunified science (psychology in its present state) and unified science (toward which psychology will probably move, although, as in all other sciences, this will take a very long time).

The chapters are uniformly well written, clear, and sensible. Indeed, I found myself swayed by arguments internal to each chapter. Gardner's reprise of his 1992 article asking whether we should bury psychology or praise it is a genuine delight. He suggests, by the way, that much of psychology is being "cannibalized" by other sciences, perhaps leaving psychology with the study of a "person-centered trio" of person-ality, self, and will.

At the core of this book is a decades-long soul-searching (or "brain-searching," according to one colleague) journey seeking to answer the question of whether psychology is a "real" science. Unlike psychiatry, which appears to have largely resolved its identity crisis by out-sourcing psychoanalysis to the humanities, at least some groups within psychology continue to wonder if we measure up to the "hard sciences." (I must confess to a strong urge to slip into analytic interpretation here.) Departments of psychology have morphed into departments of psychological sciences, brain sciences, cognitive sciences, behavioral sciences, or some permutation thereof, the unifying theme being "science."

Do read this book, although not for the goal of reaching an answer. It is inevitable that by the end of the 10 chapters you will conclude that unity is hopeless. As Staats points out, the

road to unity was much easier at a time when there were fewer scientists, less information, and less sophisticated technology. The increase in all three will make unity less and less likely over time. There is more to the agenda, however, than scientific unity. There are also professional issues that speak to status, money, and power. This facet of unity is best captured in the chapter by Fowler (former Executive Director of the American Psychological Association) and Bullock. It seems to me that this form of unity, although of substantial importance to the guild of psychology, does not befit the remaining chapters' focus on the science of psychology. Then again, this entire edited volume is about the many faces of psychology.

Two of psychology's most revered clinical scientists—Paul Meehl and Phil Holzman—were trained analysts who maintained active therapy practices while simultaneously conducting rigorous research in other areas. They seemed not to be bothered by the "lack of unity" in their understanding of psychology but, rather, appreciated that some complexities are resistant to unified views. For my own position, therefore, I can only conclude that what was good enough for them will be good enough for me.

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LAW AND ETHICS

Law and Mental Health Professionals: Kentucky, by Eric Y. Drogin, J.D., Ph.D. Washington, D.C., American Psychological Association, 2004, 367 pp., \$99.95.

This volume takes its place as the 23rd in a series that is planned, eventually, to acquaint mental health professionals in each of the 50 states, the District of Columbia, and the federal jurisdictions with a comprehensive yet concise outline and review of the laws that affect these professionals in each respective jurisdiction.

The author has identified and summarized the legal and regulatory issues that have an impact on mental health practice in Kentucky—each broad topic identified is a chapter in the book. Each chapter both describes the specific legal and/or regulatory standards currently in force and outlines the specific areas in which the mental health professional can legally carry out his professional responsibilities. Inasmuch as this volume constitutes, specifically, an identification and brief discussion of the laws and regulations governing the conduct and practice of mental health professionals in the state of Kentucky, it will prove to be most relevant to the mental health professional working in that state. The sources of state law reviewed in the book include the Kentucky State Constitution as well as state statutes, administrative rules, judicial decisions, and judicial rules.

The editors note that this series is conceptualized as an easily accessible resource for mental health professionals who do not "know about, much less understand, most of the laws that affect their practice, the services they provide, and the clients they serve." This volume corrects that lack of knowledge by providing a concise and easily readable over-

view of the current laws and regulations affecting the professional life and work of mental health professionals practicing in the state of Kentucky.

The legal topics covered in this book are organized along a continuum, beginning with a summary of the laws and regulations that cover licensure and certification, third-party reimbursement, and professional incorporation. This is followed by a review of the different issues at the legal-behavioral science interface: the areas in which mental health professionals are asked to provide such services as evaluations of the mental status of litigants, the preparation and presentation of expert testimony in court, and the delivery of psychotherapy services to court-referred juveniles and adults. The more indirect ways in which the mental health professional can be involved and in which mental status issues are, on occasion, prominent (e.g., divorce proceedings or termination of parental rights) are also identified and summarized.

In addition to providing a good reference compendium of the laws and regulations in force in the state of Kentucky (current as of February 2004), this volume also represents a contribution to an ongoing series that the editors envision as establishing a database for comparative interjurisdictional studies. The planned database will "allow for nationally oriented policy studies to identify the variety of legal approaches that are currently in use nationwide and to assess the validity of the behavioral assumptions underlying each variant and, ultimately, lead to a conclusion as to the relative desirability of alternate approaches." This process could be useful in improving future laws in the interests of increasing the effective delivery of high-quality mental health services.

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Ethics in Electroconvulsive Therapy, by Jan-Otto Ottosson and Max Fink. New York, Brunner-Routledge, 2004, 157 pp., \$34.95.

This review of ECT and the ethics of ECT enjoys the authorship of well-known, established scholars and practitioners of ECT, with the added advantage of a European as well as an American perspective. This is an overview treatment, encyclopedic in some ways, of the issues of ECT. The authors do a credible job of pulling together a disparate set of fields and perspectives on the use (or lack of use) of ECT in the modern Western world. The tone is even and objective, but what comes through in the content are the voices of advocates, two men who have devoted much of their careers to the robust use of ECT.

The premise of the book is to examine ECT through the lens of modern biomedical ethics. The authors begin with a chapter on the stigmatization of ECT, citing different theories of the origin and maintenance of this stigmatization. The next chapter, an overview of the principles of medical ethics (based on the work of Beauchamp and Childress), identifies the four principles of medical ethics of the "Georgetown" group, namely, beneficence, nonmaleficence, autonomy, and justice. This is a competent overview of these issues; however, in presenting their synthesis on bioethics, the authors manage to give very positive views of ECT, which seems a little bit like editorializing in the news, or giving an opinion before all the facts are presented. Chapter 3 is a history of previous ethical ap-

proaches to ECT, and chapters 4 through 7 address the topics of beneficence, nonmaleficence, autonomy, and justice in terms of the specifics of the practice of ECT. These chapters could be called "Efficacy" for beneficence, "Side Effects" for nonmaleficence, "Consent" for autonomy, and "Access" for justice. The authors make the point strongly that the existing literature supports these four principles of biomedical ethics.

The chapter on beneficence addresses the evidence for the efficacy and/or effectiveness of ECT in a variety of disorders, including depressive mood disorders, psychotic depression, mania, postpartum psychosis, schizophrenia, malignant catatonia, and parkinsonian disorder. Also described are the salient features of the effectiveness of ECT, namely, the provocation of convulsive activity and the continuation of treatment. This chapter, in many ways the center of the book, might be expected to be the most important, but it has some weaknesses. It tends to be encyclopedic, and there is no critical differentiation among the studies reported. Furthermore, there are several personal attestations, and these are, to my mind, a bit too much oriented toward celebrities and, for that matter, too celebratory of ECT. However, the basic content is important, namely, that the existing literature supports ECT as an effective treatment for many illnesses, particularly for severe depression when other treatment approaches fail and as a frontline treatment given at the beginning of an episode.

Chapter 5, "Nonmaleficence," basically deals with the side effects of ECT and rightly emphasizes the cognitive effects. The authors give a very nice account of retrograde and antegrade amnesia as well as other memory dysfunctions. They appropriately note that, in many instances, it is very difficult to disentangle the cognitive distortions brought on by the illness itself as opposed to side effects from ECT. One disappointing aspect of this discussion is that the issue of the memory defect is dealt with more anecdotally than through systematic studies. Perhaps the systematic studies do not exist.

The chapter on autonomy thoroughly addresses the idea of consent. The authors do a particularly good job of discussing the subtle ethics of getting consent from someone who is mentally ill and who may have thought disorder as a result. Their views are practical, humane, and well considered ethically.

The chapter on justice addresses the issue of availability of ECT. The authors argue that ECT is an effective treatment with a low incidence of serious side effects that is also cost-effective; however, ECT is not widely available. They discuss the availability of ECT in several Western countries and point out that refusing to give, abstaining from, or being prejudiced against ECT are, perhaps, unethical in themselves. This chapter is passionately written; the authors make their case quite well.

The strength of this small offering is its encyclopedic account of efficacy and outcome studies. It has the advantage of a multicultural perspective, and it strives to give an adequate overview of ethical practice in psychiatry. There are elements that are particularly strong, such as the chapters on autonomy (consent) and justice (access).

The weakness is the authors' unabashed advocacy for ECT. It is not so much that they say anything that seems to be erroneous or misleading, but their enthusiasm raises the prospect that they might be overly zealous. The vignettes are always positive and always show how ECT saved the person's life or the absence of ECT may have contributed to someone's de-