

ing the mad as somehow less than human. Once this step was taken, it paved the way for inhumane treatment" (p. 67).

There is much more to this fascinating book—case notes from Laing's clinical work in Glasgow and London, responses to the publication of *The Divided Self*, and Beveridge's critique of the work. For those interested in the contributions of this extraordinary figure, it is a gold mine.

Reference

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Book review accepted for publication February 2012 (doi:10.1176/appi.ajp.2012.12010148).

Textbook of Psychoanalysis, 2nd Edition, edited by Glen O. Gabbard, M.D., Bonnie E. Litowitz, Ph.D., and Paul Williams, Ph.D. Washington, DC, American Psychiatric Publishing, 2012, 636 pp., \$125.00.

The choice of editors for this second edition of the *Textbook of Psychoanalysis*, just 7 years after the first, speaks volumes about contemporary broadening changes in the field that are manifest in daily practice as well as encouraged institutionally in the various teaching psychoanalytic institutes and centers throughout the United States. The coeditors of both the first and previous edition (published in 2005) were all psychiatrists. Two of the three editors of the first edition, to whom the second edition is dedicated—the late Arnold Cooper, of Weill Cornell Medical College, and Ethel Person, of Columbia University—came of age in the “golden era” of the 1950s and 1960s when psychoanalysis was popular in the United States and the theory was more unified and centered on Freud's ideas. Glen Gabbard (who is incidentally coeditor, along with Robert E. Hales and Stuart C. Yudofsky, of *The American Psychiatric Publishing Textbook of Psychiatry, 5th Edition*) has remained a coeditor of the textbook for the second edition. Gabbard, Cooper, and Person are well known to the readership of the *Journal*, and their work continues to be taught in psychiatry residency departments. The first volume did a fine, orderly job of describing the many changing aspects of clinical treatment in the second century of psychoanalysis.

In the last 7 years, we have seen even more rapid shifts in psychoanalysis. Gabbard's choices of new partners in this giant editorial task are likely less known (as of yet anyway) to the psychiatric readers of the *Journal*. Paul Williams is an English psychoanalyst of the more eclectic Independent or Middle Group of analysts. He was trained as a social anthropologist and was, along with Gabbard, joint editor-in-chief of the *International Journal of Psychoanalysis* (2001–2007). Bonnie Litowitz, from Chicago, is an analyst whose background is in linguistics, and she has served for many years as an associate editor of the *Journal of the American Psychoanalytic Association*. Thus, all three analyst-editors of this second edition have in common influential and international positions presiding over and shaping the literature of the field, which was not the case for the editors of the previous volume, who had in common primarily teaching in a North American clinical tradition of psy-

choanalysis that was closer to psychiatry than the humanities (although they also served as journal editors). Psychoanalysis, as any reader who delves into the pages of this journal will see, as well as its academic expressions and outreach, continues to support a strong clinical interest and practice in theory of mind. But the underpinnings of this theory of mind have become broader than Freud imagined, as “theories of mind” in fact, that can be diverse and at times even theoretically at odds with each other. Psychoanalysis abides as the guiding basis for most psychodynamic psychotherapies.

Thus, there is a new section in this edition titled “Schools of Thought” (edited by Adrienne Harris), which speaks to separated strands of theory that are associated with famous names, some from the distant past that have been marginalized. For example, Klein, Bion, Kohut (of “self-psychology”), Lacan, and the more recent Greenberg and Mitchell (of “relational psychoanalysis”) all are given equal attention. In the previous edition, these schools were described in the introduction as part of the emergent history of a developing psychoanalytic field, which was in earlier stages of moving away from the noun as singular.

The separated theories reflect how psychoanalysis is now frequently taught, with trainees often exposed to these valid and differing emphases, terminologies, and techniques. For many years, “mainstream” psychoanalysis was “ego psychology,” based on Freud's structural theory, but it is now referred to as “classical” and presented in this book as one school of thought. This certainly is taught significantly in many institutes, but this new edition of the textbook shows the general manner of its de-emphasis (for example, Jay Greenberg's essay titled “Psychoanalysis in North America After Freud”). The diverse aspect of contemporary psychoanalysis is highly exciting, promising, and, at times, confusing, particularly for beginners. This volume helps us to sort out the history, politics, varieties, and rationales of differing approaches.

The intellectual excitement in the field is beautifully captured in section VI, which deals with the connection of psychoanalysis to other disciplines, such as the neurosciences (by David Olds), philosophy (by Jonathan Lear), and literature (by Madelon Sprengnether). For those who may appreciate a steadying sense of how abidingly familiar our core Freudian preoccupations continue to be, in spite of the rapid changes, I highly recommend section II, titled “Core Concepts” (edited by Richard Zimmer). In this section, one finds chapters on transference, the unconscious, defense and resistance, childhood experience, gender and sexuality, and the newer term “intersubjectivity,” which takes up the interactive aspect of each personality and active mind within the analytic dyad.

The topic of treatment and technique, discussed in section IV, is interesting and may be the subject most likely to keep shifting in subsequent editions according to what theory a particular writer employs and which theory is implicitly questioned. All of the authors for this section are well known in the literature, are clinically very seasoned and thoughtful, and give attention to ethics. Child analysis is also included. Research, which is discussed in section V (edited by Linda Mayes), includes some articles on psychotherapy as well as analysis but is covered in only 38 pages in this almost 600-page volume. This topic was covered in 60 pages in the previous edition. I am not sure what this means, especially given all of the criticism that the field of psychoanalysis has encountered from the mental

health world regarding its lack of interest in demonstrating its efficacy. Perhaps it suggests that this particular edition is more importantly designed to demonstrate to its readership the current shift to and rationale for elaborating pluralities of theory, rather than a more clinically pragmatic focus.

This volume should serve to stimulate and nurture the intellectual curiosity and excitement of any student, trainee, or practitioner about learning, exploring, and employing the varying theories of mind under the umbrella of psychoanalysis. Let us hope that young psychiatrists, as well as other mental health trainees, who read this journal or read (or skim) this textbook may see that there is a great deal of room to expand and to explore and that they feel invited into this world of contemporary psychoanalysis. Perhaps the clinical task still holds the discipline together best. The intrapsychic realities of “symptoms, inhibitions, and anxieties,” as described by Freud, that are present in any one of us and in any of our own patients are just as lively as ever, beckoning those who want to know more about how their *minds*, rather than their brains alone, function.

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Book review accepted for publication February 2012 (doi:10.1176/appi.ajp.2012.12020221).

Manual of Panic Focused Psychodynamic Psychotherapy: eXtended Range, by Fredric N. Busch, Barbara L. Milrod, Meriamne B. Singer, and Andrew C. Aronson. London, Routledge, 2011, 230 pp., \$34.95.

Empirical research in psychodynamic psychotherapy has been delayed in its development relative to research for other modes of psychotherapy, but clinician/researchers have emerged both nationally and internationally over the past decades to demonstrate the efficacy of the treatment (1). Among psychodynamic treatments, psychotherapy for panic disorder and other anxiety disorders, the topic of this excellent volume, has been the most thoroughly studied and researched. We benefit from the depth of knowledge and empirical approach that are demonstrated in this follow-up to the authors' 1997 edition (2).

The treatment described adds to the evidence-based cognitive-behavioral treatments already available to clinicians. Having multiple efficacious treatments for panic disorder reflects psychotherapy's version of the trend toward personalized medicine. As researchers and clinicians, our responsibility is to find “the right treatment for the right patient.” A psychodynamic approach offers patients with curiosity about the source of their panic symptoms, psychological avoidance, and inhibitions an empirical model rich in opportunity for exploration of the psychological meaning of their difficulties. The authors describe the extensive pilot work that resulted in this manual. Multiple clinical trials, funded by the National Institute of Mental Health, over the past decade have demonstrated that their panic-focused psychodynamic psychotherapy treatment decreases symptoms and improves general patient functioning.

What distinguishes this book from the previous volume is the extension of the treatment principles beyond symptoms

of panic disorder to a broader range of anxiety disorders. In addition, as the authors explain, the volume presents “a more clearly articulated description of panic-focused psychodynamic psychotherapy as it has been practiced in our successful efficacy studies.” Researchers and clinicians alike will benefit from these refinements that are evident in this current edition. It is important to note, however, that while the authors express confidence in panic-focused psychodynamic psychotherapy as an effective treatment for patients with a variety of anxiety disorders, the treatment has not been formally studied in these contexts using randomized trials like the ones completed with panic disorder patients. It is this extension of treatment approaches beyond panic disorder that accounts for the subtitle of this volume—*eXtended Range*.

The explanation of the treatment protocol itself proceeds from an exploration of psychodynamic theory and formulation to the clearly outlined three-phase treatment model: initial evaluation, interpretation of central conflicts and defense mechanisms, and termination. There is an emphasis on the description of the patient's relationship to the therapist and its possible connection to anxiety and panic symptoms. The authors' research has identified patterns of conflicts around separation, anger, development of independence, and sexuality that guide the focus of the treatment process. This information alone is useful to clinicians pursuing a psychodynamic approach to the treatment of patients with anxiety disorders and represents a wonderful example of how treatments can be designed around change processes that have been identified empirically (3).

The empirically based manualized treatment described stops short of a session-by-session protocol because the authors recognize that patients bring their individual differences to treatment despite their common diagnoses. The authors also recognize that psychodynamic treatment principles and interventions may need to be used flexibly depending on the hour-to-hour complexities of the patient. Our own psychotherapy process research has suggested that it is truly impossible to fully control the process of psychotherapy as it is, and it *should* be a cocreated narrative between the patient and therapist (4, 5). Yet as this volume proves, suggested treatment focus and principles can be clearly articulated in a manner that helps therapists provide effective care for specific clinical problems without constricting or limiting the therapeutic process or detracting from the development of an effective therapeutic alliance.

Completed after years of hard work in the demanding world of empirical research, this manual will be valuable to both experienced and newer psychodynamic psychotherapists. The value of the principles extends beyond panic disorder and the other anxiety disorders discussed. However, to the authors' credit, they make certain to state that their treatment approach should only be used by experienced clinicians because they recognize the need to make complex clinical adjustments based on a patient's course in any given psychotherapy. They ask less experienced clinicians to be supervised when utilizing the treatment.

It is hard not to say that this manual, developed after years of clinical trials, experimentation, teaching, and revisions, represents the most fully developed and useful empirically based treatment that the world of psychodynamic psychotherapy has produced. We are all enriched by the ideas, prin-