

in the water; it is not clear if he took his own life. Looking back upon his life, he must be counted among the saints of his century and of medicine, a person who could confront horrors that others ignored and devote his life to rectifying them. His biographer fills an important gap in medical and world history.

Reference

1. Dimpleby R: Liberation of Belsen, BBC News, April 15, 1945
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Psychoanalytic Terms and Concepts, edited by Elizabeth L. Auchincloss, M.D., and Eslee Samberg, M.D. New Haven, Conn., Yale University Press, 2012, 368 pp., \$75.00.

Writing a dictionary is an audacious undertaking. To capture the way words are used and what they are designed to mean, the descriptive role of the lexicographer, is a bold enough task. To indicate how they *should* be used, the prescriptive function, goes beyond boldness and inevitably invites retort. Yet, as Elizabeth L. Auchincloss and Eslee Samberg note in their masterful history of lexicography—which constitutes a major part of the introduction to their book *Psychoanalytic Terms and Concepts*—the descriptive and prescriptive are part of every dictionary's aim, whether overt or covert. As these editors note, the prescriptive, along with the choices that determine what to include descriptively, the word, and in this case the concept list, inevitably constitute a quasipolitical agenda: to affect the field of inquiry addressed. In contrast to Freud, who thought that with patients he “should show them nothing but what is shown to him” (1)—a perspective, by the way, long since abandoned as a naive take on therapeutic relatedness—Auchincloss and Samberg are up front about the impact on the choices they have made of their theoretical commitments as contemporary North American ego psychologists. For them, ego psychology is the preferred psychoanalytic theory from which they view other perspectives as additive and in certain instances “corrective.” That said, they envision their audience as ranging from student to expert, as multidisciplinary in composition, and as encompassing diversity of allegiance to different models of theory and therapeutics. In this hybrid dictionary/encyclopedia, they aim to explicate terms and concepts in a manner in keeping with the volume's three predecessors, edited by Burness Moore and Bernard Fine, with the first edition published in 1967 as *A Glossary of Psychoanalytic Terms and Concepts*, under the sponsorship of the American Psychoanalytic Association. Each term in the current book begins with a brief definition, followed by an explanation/exploration of the role and significance the term or concept has had for psychoanalytic thought and practice. Next comes, in most instances, the virtually obligatory nod to the origin of the term

or idea in Freud's work, followed by a brief summary of its historical development since its first appearance. Lastly, there is a thoughtful and fair-minded exploration of controversies regarding contemporary meaning and usage, referenced to provide a starting point for users to commence a more in-depth investigation of the subject at hand.

To complicate matters in attempting this comprehensive overview of a discipline as steeped in controversy as psychoanalysis, like its founder Freud, who was described by poet W.H. Auden as a veritable “climate of opinion,” the editors meet head-on the interconnected challenges of subjectivity and pluralism. Much of the subject matter of psychoanalysis centers on phenomena of mind, especially or centrally unconscious processes of mind, apprehensible only via interpersonal observation and inference. The inevitable invasion or perhaps, more accurately, the absolute necessity of a theory-based perspective required to spell out what can only be known from these deeply subjective vantage points creates significant obstacles to precision and clarity. Such subjectivity also gives rise to the theoretical pluralism that interferes with communication even among knowledgeable psychoanalysts whose “schools of thought” define and use the same concepts and terms differently and have internal vocabularies not shared with other schools. The editors attempt to address these problems by virtue of a theoretically ecumenical group of contributors, also including in the text longer essays on alternative theories, highlighting terms and concepts central to their specific perspectives. In the controversies portion of entries of more traditional terms and concepts (more traditional here refers to what the editors, tongue-in-cheek, none too succinctly describe as “ego psychology or modern structural theory, with an admixture of object relations theory, self psychology, and developmental psychoanalysis” [p. xiv]), the editors add commentary regarding alternative points of view, disagreements, and uncertainties and indicate central contributing figures in these controversies with appropriate references for those interested in digging deeper. To this reader, the former format (focused essays on alternative schools) works more successfully than the latter (explication of controversy and alternative perspectives after laying out a “mainstream” view) for at least two related reasons. The former are clearly written by advocates of the schools they describe and are uncluttered by references to other perspectives, mainstream or alternative. The latter sometimes have a sense that the alternative views are obligatory add-ons that appear too brief to feel substantial when compared with the rest of the entry written from the favored perspective of the editors. Thus, for example, the extended section on Bion (founder of an alternative theory, its unique terms appearing as entries under the heading of its founder) is far more understandable to a relatively novice reader than brief reference to a Bionian idea that is part of a discussion on controversies. The same is true of the Lacan entry, which does an outstanding job of laying out a foundation for grasping a large body of gnarly psychoanalytic terms and concepts developed by a theorist notorious for his suspicion of clarity and facile understanding. These difficulties are an inevitable consequence of attempting to update an important text to place it within the context of contemporary pluralistic North American psychoanalysis no longer dominated by any one perspective, as had been the case with earlier editions that were clearly written from the

perspective of what the current editors describe as “the unapologetic Freudian insider” (p. xxii).

Auchincloss and Samberg have produced a volume that, despite the complications and caveats noted, all of which the editors themselves explore even-handedly and with appropriate historical contextualization in their extended introduction, creates a sense of unity regarding the discipline it aims to explicate. The text provides extremely useful definitions and conceptual summaries, inviting readers, especially students, into the complexities and controversies it identifies and includes the crucial references indicating where to get started in further exploration.

Psychiatrists interested in understanding psychoanalytic terms and concepts will find in this work a congenial introduction to complex subject matter, a finely crafted story of the development of each important term or concept within contemporary psychoanalytic usage, and a respectful attempt to indicate where and how differences of opinion are manifest within the discipline. Educators will find it an ideal place to send students to begin their study of psychoanalytic topics, a reflection of the editors standing as leading teachers of psychoanalytic theory and technique.

Reference

1. Freud S: (1912): Papers on technique: the dynamics of transference, in Standard Edition of the Complete Psychological Works of Sigmund Freud. Edited by Strachey J, London, Hogarth, 1958
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Management of Adults With Traumatic Brain Injury, edited by David B. Arciniegas, M.D., Nathan D. Zasler, M.D., Rodney D. Vanderploeg, Ph.D., and Michael S. Jaffee, M.D. Washington, DC, American Psychiatric Publishing, 2013, 587 pp., \$79.00 (paper).

Traumatic brain injury (TBI) is a common and serious medical problem experienced across the lifespan that is associated with a large amount of neuropsychiatric comorbidity. Psychiatrists frequently see these patients for consequent cognitive, mood, and behavioral disturbances. Because TBI has received the most attention within the last decade due to heightened awareness and ascertainment, many practicing psychiatrists may not have received adequate training in the assessment and treatment of patients with TBI.

Management of Adults With Traumatic Brain Injury is a readily accessible clinical guide for psychiatrists who treat patients with TBI. As mentioned within the text, the study of TBI has grown exponentially within the last decade, resulting in a vast and dispersed literature that may not be convenient for the busy clinician to review. Fortunately, this guide does an excellent job of condensing research results, guidelines, and

standards of care that are of enormous practical value for practicing psychiatrists. The text confines itself to the clinical care of TBI patients and provides adequate reference to more basic science aspects of these disorders should the reader be interested in pursuing them.

The text is broken into three general sections: assessment, management, and special topics. An introductory chapter provides an excellent overview of the pathophysiological mechanisms involved in TBI as they pertain to the clinical aspects outlined in later chapters. Because most psychiatrists treat patients with mild TBI (also referred to as concussion), most of the discussion focuses on this population subset, with the exception of long-term complications and management of those with more severe TBI. A strength of the book is its demarcation of the management section according to neuropsychiatric syndromes, since this is often how patients present to psychiatrists (e.g., “Mr. X” is referred to you for depression following a mild TBI). This serves to make the text a practical guide in which data can be quickly looked up during or following a patient encounter, requiring a minimal amount of time. Management of all neuropsychiatric syndromes includes both pharmacological and nonpharmacological treatments in addition to preventive interventions. Somatic symptoms (e.g., vertigo, headache) that frequently accompany neuropsychiatric symptoms are also addressed in a way that is easily understood, and the authors provide the reader with knowledge on when and to whom patients with these symptoms should be referred. The special topics section mostly focuses on specific TBI populations, including the elderly, athletes, and military personnel. Also included within this section is a very informative, but simplified, guide to forensic issues that frequently surround treating a TBI patient. This chapter is written from the perspective of a treating physician, the most likely role of the reader.

The quality of the text is excellent. Classic TBI literature is included but is done in a way that supports more recent research and recommendations. As is often the case, controlled clinical studies may be lacking with regard to treating certain neuropsychiatric syndromes in TBI. In these cases, many of the authors give anecdotal reports and suggestions based on their own clinical practices. Most chapters are written by experts within the TBI field whose primary research and clinical foci are the topic of their chapter. Chapters are comprehensive, and pertinent references are often cited for more in-depth reading. The end of the book includes a list of websites for patients, caregivers, and clinicians that have up-to-date information and recommendations.

In conclusion, this text emphasizes the valid point that all psychiatrists will likely experience caring for a patient with TBI. The psychiatric subspecialties (e.g., child and adolescent psychiatry, geriatric psychiatry, addiction medicine, and psychosomatic medicine) may be more likely to encounter these patients given the increased risk for TBI in these populations. Although possibly a daunting task for clinicians who may not have encountered much TBI in their training, this text provides a comprehensive and practical approach for the assessment and management of these patients and emphasizes the very important point that psychiatrists have the potential to greatly increase the quality of life for these patients and their families.

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