## Handbook of Clinical Psychiatry: A Practical Guide

By Varuni de Silva and Raveen Hanwella. Kumaran Book House, Colombo; Chennai. 2012. Rs 1000. Pages 170

A handbook is generally described as a written or printed work giving information such as basic facts or instructions, a guidebook, an instruction manual, or a vade mecum, in contrast to a standard textbook or a monograph. The authors of this handbook on clinical psychiatry are two senior academic professionals with nearly two decades of experience teaching medical students in the Faculty of Medicine of the University of Colombo. The purpose of the handbook, as succinctly stated in the preface, is to help undergraduates and clinicians to develop a structure they can use in psychiatric patient management. A significant stimulus for writing the handbook apparently was their finding that textbooks in psychiatry were, to use their dainty phrase, "rather thin on management".

The handbook is arranged in the form of 20 discrete chapters on selected topics. The first chapter is on assessment of the patient, and the last two are on electroconvulsive therapy and psychopharmacology. Chapters 2-18 deal with specific problems in psychological medicine, ranging from delirium and dementia, to sleep disorders and problems with sexuality and gender, which cover the gamut of clinical situations that a general practitioner or a specialist physician is likely to encounter in an entire lifetime.

All chapters follow a structured format that, along with clear signposting within each chapter, conduces to easy comprehension, and mental classification and grouping of the information gathered. A large number of tables (unfortunately, printed against a very dark indigo background that markedly reduces clear visibility), provide aides-memoire that help learning as well as recapitulation for professional examinations. Each chapter ends with an extremely useful summary of its content that encourages both contemplation and revision.

The first chapter on assessment of the patient is comprehensive. I found satisfying the initial emphasis placed on hypotheses generation, that starts immediately as the clinician first meets with the patient and the ensuing process of confirmation or refutation of these hypotheses in an orderly sequence, as the key to diagnosis and management. My mind went back to our student days when one of my major problems was to work out how to use the detailed bits of information in the marvellous little book, Hutchison's Clinical Methods, for actual diagnosis and developing a management plan, until a Senior Registrar at the time, Dr Oliver Peiris, tossed a lifeline to me, the single most important thing I have ever learnt in clinical medicine. He saw me struggling with the usual bits and pieces of history-taking and said, "I say, start with the diagnosis. See, this patient has mild jaundice. Write down about five

causes of jaundice that you know, and start taking the history from there. The next patient has bilateral ankle oedema. Write down the causes of ankle oedema and proceed from the there". He did not actually use the phrase 'hypotheses generation', but I intuitively grasped what he meant and that was all I needed for whatever success I may have achieved thereafter in the domain of diagnosis and management.

The other aspects stressed in the first chapter that are in my opinion crucial to patient management in psychiatry include emphasis given to the DSM multiaxial diagnoses, use of scales as tools wherever appropriate, the idea of risk assessment, and the use of ICD-10 and DSM-IV coding to indicate severity of the illness.

Diagnosis and management of the 17 psychiatric conditions in chapters 2-18 are handled competently and by and large in similar fashion, comprising a brief introduction, followed by sections on establishing the diagnosis, identifying the aetiology, assessing severity of the illness, risk assessment, developing a management plan, and a summary of the assessment. The distinctive features of the illnesses receive appropriate emphasis. Diagnostic dilemmas and disagreements, which I venture to presume are commoner in psychiatric clinical practice than in most (if not in all) other branches of medicine, because of the very nature of the variations in clinical features of psychiatric syndromes, are lucidly explained in all the chapters. The structured presentation, several explanatory figures and numerous tables facilitate learning.

I do have a few minor reservations about this hand-book. For example, the large number of lists (of causes, items of a management plan or as structures for assessment, etc), may sometimes cause confusion among students and the younger postgraduates, because of variations in the lists. The book deserves more careful editing. For example again, there are several acronyms, common though they may be, that require expansion when first used in a book; GABA, ACE, and NSAID are examples. Shiny paper is harder to read than the matt varieties, especially under artificial 'white' lighting.

Considered as a whole, the handbook is an enterprising endeavour that fulfils a felt need of students of psychiatry. But its usefulness is certainly not limited to students. Young clinicians will surely widen their clinical repertoire, acumen and awareness by reading it carefully. And the more senior clinicians who read it will be given and uncommon opportunity for introspection, constructive self-criticism and perchance, remediation of their ways.

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