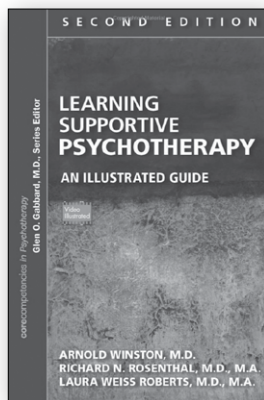


BOOK REVIEWS

Learning Supportive Psychotherapy. An Illustrated Guide. Second Edition



By Arnold Winston, Richard N. Rosenthal, and Laura Weiss Roberts; American Psychiatric Association Publishing; 2020; ISBN 9781615372348; pp 218; \$70 (paperback).

The armamentarium of psychotherapies provided by psychiatrists is relatively narrow compared to the number of psychotherapies available. Supportive psychotherapy is probably the modality most frequently used among psychiatrists in clinical practice. It is also 1 of 3 psychotherapies that the Accreditation Council for Graduate Medical Education specifically requires to be taught during residency training. The field thus needs a solid, updated, modern text to introduce novices to this therapeutic modality. *Learning Supportive Psychotherapy. An Illustrated Guide* strives to be such a text. It is a revised version of a book published approximately a decade ago.

The book consists of 10 chapters covering topics such as the evolution of the concept of supportive therapy; principles and mode of action; assessment, case formulation, and goal-setting; general framework of supportive psychotherapy; the therapeutic relationship; crisis intervention; applicability to special populations; and evaluating competence and outcome research. The last chapter contains questions for self-study.

The authors describe supportive psychotherapy as “a dynamically informed treatment” (p 117) that is “conducted in conversational style, involving examination of the patient’s current and past experiences, responses and feelings. In supportive psychotherapy, the therapist is active and inquires and responds in ways that seek to bolster the patient’s strengths. Although the initial focus is on self-esteem, ego function, and adaptive skills, as with other forms of psychotherapy, the therapeutic alliance may be the most important element” (p 31). Supportive therapy is frequently used in the treatment of patients facing difficult life events or experiences (eg, transition to college, divorce, or bereavement). Although supportive psychotherapy has psychodynamic roots, it has much more limited objectives than psychoanalysis. The

objective of supportive psychotherapy is stabilization and adaptation, not fundamental change. Thus the authors define supportive psychotherapy as “dyadic treatment that uses direct techniques to 1) ameliorate symptoms and 2) maintain, restore, or improve self-esteem, ego function, and adaptive skills with a focus on the patient’s overall health and well-being” (p 8).

This is how supportive psychotherapy has been usually viewed and taught. However, the authors of this volume are putting supportive psychotherapy in a wider context. They postulate that the treatment of each patient does not involve just supportive elements, but also elements of expressive therapy (meaning psychodynamically oriented psychotherapy that may seek change, not to be confused with art or dance therapy). Thus, they posit supportive psychotherapy on a linear continuum where “At one end, the frequency of supportive intervention is high and the frequency of exploratory intervention is low. At the other end, the frequency of supportive intervention is low” (p 5). The supportive-expressive continuum is as follows: supportive relationship – counseling – supportive psychotherapy – supportive-expressive psychotherapy – expressive-supportive psychotherapy – psychoanalysis. The boundaries between some modalities (eg, counseling and psychotherapy) are not clear. Wandering along this continuum is what makes this volume a bit different from other books on supportive psychotherapy and what makes it a bit confusing and at times difficult to follow.

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The chapters are clearly written with teaching and learning in mind. They are well “illustrated” with case vignettes. For instance, the chapter on techniques goes through individual techniques and their elements (alliance building, esteem building, skills building-adaptive behavior, and enhancing ego functioning) step-by-step using examples of patient-therapist interactions. These examples are accompanied by comments on what is happening in these exchanges, what is good, and what is missed or not useful. These case vignettes are also available in video form on the American Psychiatric Association Publishing web site. These videos are very instructive, with a commentary by the authors and at times on-screen text explaining what is going on in the therapeutic exchange. The case vignettes in print and video form are a very strong feature of this book, very useful for both self-study and instructional teaching.

The chapter on general framework delves into issues such as indications and contraindications of supportive psychotherapy, initiation of treatment, office arrangements,

initiation and termination of sessions, timing and intensity of sessions, long-term vs brief therapy, and professional boundaries, in great detail. The chapter on therapeutic relationship is interesting, yet a bit muddled by discussing both supportive and expressive psychotherapy. The subsequent chapter on crisis intervention is relatively short, but to the point. It includes a good table that outlines the differences between crisis intervention and psychotherapy.

I also liked the chapter on the applicability of supportive psychotherapy to special populations, such as patients with schizophrenia, personality disorders, and substance use disorders. This chapter emphasizes the importance of psychoeducation. Finally, the chapter on evaluating competence and outcome research addresses important issues such as psychotherapy supervision and assessment of competence. The authors make an important point about assessing psychotherapy trainees—that “supervisors should look for competence, not a high level of expertise” (p 164). The chapter also includes a list of the

American Association of Directors of Psychiatric Residency Training competencies for supportive psychotherapy, and a nice assessment instrument, Resident Evaluation for Competence in Supportive Psychotherapy. As mentioned, the last chapter contains useful questions for self-study.

This volume is a fairly useful guide to learning supportive psychotherapy that would be appreciated by those who want to learn supportive psychotherapy as well as those who teach supportive psychotherapy to trainees. A relative hindrance of this book is the discussion of both supportive and expressive psychotherapy, as most readers would probably prefer a single focus on supportive therapy. On the other hand, the case vignettes/videos and chapter with questions for self-study are very strong and useful features.

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DISCLOSURE: Dr. Balon is a member of the American Psychiatric Association Publishing Editorial Board.

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Pocket Guide to LGBTQ Mental Health. Understanding the Spectrum of Gender and Sexuality



Edited by Petros Levounis and Eric Yarbrough; American Psychiatric Association Publishing; 2020; ISBN 9781615372751; pp 201; \$58 (paperback).

Most psychiatrists and other mental health clinicians are probably aware that their LGBTQ patients may face specific mental health issues. However, I would guess that many clinicians do not fully understand what these specific issues are and may be confused by the current language and terminology of gender and sexuality. Drs. Petros Levounis and Eric Yarbrough put together this small, edited volume to correct this and “help clinicians (as well as patients, parents, teachers, students, administrators, and anyone else who is interested in how humans operate) master the fundamentals of

sexual orientation and gender identity” (p ix).

The 10 chapters of the book address the following areas based to the acronym LGBTQ²IAPA: Lesbian; Gay; Bisexual; Transgender; Queer; Questioning; Intersex; Asexual; Pansexual; and Allied heterosexuals. The chapters are similarly structured, starting with the psychological and cultural context of each specific facet of human sexuality, followed by questions well-meaning people ask (by “well-meaning people,” the authors mean patients, their friends, their parents, and their physicians); themes that may emerge in therapy; conclusion; 5 take-home points; and resources and references.

The introductory part of each chapter focusing on psychological and cultural context puts each area into historical context and presents various pertinent terms and definitions. The first 2 chapters present small dictionaries of terms that are very useful in the general and clinical sense. In the chapter on lesbians, these terms include ag/aggressive, baby dyke, bicurious, bi/bisexual, BlaQ/BlaQueer, boi, bull dyke, butch, demisexual, dyke, femme, lipstick lesbian, stone butch, and stud. The dictionary in the chapter on gay men is much larger. It covers terms such

as baby gay, bareback, bear, beard, breeding/seeding, bug chaser, butch, clean, cruising, down low, friend of Dorothy, gold star, kiki, party and play, pink triangle, trimming, Stonewall, and versatile. Understanding what these terms mean is very important for understanding the culture and behaviors of each group.

The examples of questions people ask and their answers do not provide just simple answers but also help to understand the culture of each group. For gay men, examples of questions include: What does it mean to be gay? How do gay men know they are gay? Could being gay be just a phase? Is it possible for gay men to change their sexual orientation? Can I tell if someone is gay just by looking at them? Do gay men care about religion? Are gay men more sexual or promiscuous? Do gay marriages work out long term? Are gay men prone to mental illness and substance use? Again, the answers provide not just a lot of material for simple answers to friends and others, but also a greater understanding of psychological and other clinical issues.

The most clinically important part of each chapter is the themes that may emerge in therapy. These themes cover a wide variety of topics, such as addictions, bullying, coming out (at times a lengthy and complicated process), family, same-sex parenting, interpersonal violence, legal issues, religion and spirituality, body, sex, HIV, substances of use, conversion therapy, race and aging. These discussions bring into the forefront issues many heterosexual clinicians may not necessarily realize or think about. For instance, “In recent

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Western culture, gay men are held to the same standards as heterosexual women, in which physical appearance is generally considered to be of higher importance than personality, career, education, intelligence and wealth. Many gay men try very hard to reach the ideal body image that Greek and Roman sculpture established long ago" (p 34). Many chapters emphasize the importance of minority stress among LGBTQ patients. According to the minority stress theory, "someone who belongs to an oppressed group will have more stress and therefore more health issues than those who are not in an oppressed group. For example, the stress connected to being gay will put gay people at greater risk than straight people for mental and physical health issues" (pp 170-171). "Research using the minority stress model has been effective in demonstrating the impact of social stressors on increasing risk for addiction, homelessness, unemployment, isolation, sexual violence, interpersonal violence, suicide, and homicide" (p 12).

The chapters are a bit uneven. I found the chapter on transgender to be the most clinically useful. It includes 2 useful tables: one on common LGBTQ+ terminology, and another on gender pronouns. This chapter discusses gender-affirming treatments

such as hormone replacement therapy (HRT) and gender-affirming procedures such as reconstructive surgeries, which include vaginoplasty, phalloplasty, mastectomy, breast implants, and facial reconstruction, as well as nonsurgical procedures (eg, laser hair removal and voice training). It suggests that HRT could be started by psychiatrists (among others). It also covers the issue of the appropriate age for starting HRT. Most importantly, it outlines the role of a psychiatrist in transgender care, in addition to treating gender dysphoria: "1) treatment of the mood component of gender dysphoria through counseling, psychotherapy, and/or medication management; 2) assessing the patient for readiness for gender affirmation treatment such as HRT and gender affirmation surgeries; 3) monitoring and treating emotional side effects of HRT; 4) providing patients with letters of support for HRT and gender affirmative surgeries; 5) providing patients with documentation needed to change their legal name, gender markers, and birth certificates; 6) referring patients to appropriate medical specialists (e.g., endocrinology, surgery); and 7) working with non-physician support team (nurses, social workers, psychologists, case managers, nurse practitioners, and physician

assistants) to provide comprehensive care" (p 69). It also touches on some important legal issues that may come up in transgender care, and issues related to transference and countertransference in treating transgender individuals. One wishes all chapters were similarly informative regarding the psychiatrist's role in the care of specific groups.

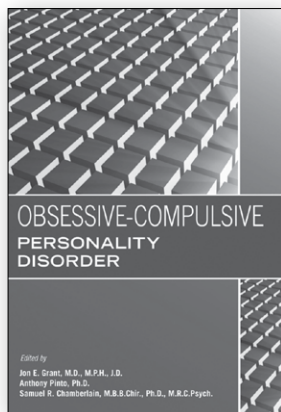
I found that the chapters that cover some of the lesser-known parts of the LGBTQ²IAPA acronym were very informative. The chapter on intersex finds the use of the term *disorder of sex development* (DOD) more useful as an umbrella term for this clinical condition. The chapter on asexuality notes that approximately 1% of the populace in the United States self-identifies as asexual and outlines characteristics of asexuality, emphasizing that it is not a psychiatric condition.

This small volume clearly fulfills its goal of helping clinicians master the fundamentals of sexual orientation and gender identity. It is informative, concise yet comprehensive, and clinically useful. It expands our knowledge of this area. I would recommend it to all clinicians and clinicians-in-training as a useful guide.

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Obsessive-Compulsive Personality Disorder



Edited by John Grant, Samuel Chamberlain, and Anthony Pinto; American Psychiatric Publishing; 2020; ISBN 9781615372249; pp 275; \$54 (paperback).

The description of obsessive-compulsive personality disorder is important and often overlooked. This small text highlights the essential pathology and diagnostic details of the condition quite well. The editors have gathered an impressive group of scientists, academicians, and clinicians who expound on the signs, symptoms, and treatment of the disease.

Many professionals tend to overdiagnose obsessive-compulsive disorder, when the personality disorder variant would be more appropriate. This occurs despite the fact that most clinicians are aware of the distinctions between these conditions. The average practitioner is at least vaguely aware that one illness involves intrusive thoughts and compulsive rituals, while the other

is a more pervasive insistence on order, worry, repetition, and perhaps perfection. In the real world of psychiatric practice, however, the disorders are inexplicably mingled. The authors provide clarity for the perplexed. This book not only delineates the diagnostic criteria but explains the reasoning behind it. The authors cover the development of the diagnostic concept of obsessive-compulsive personality over the past century. This reflects on both the evolution of the theoretical constructs behind the diagnosis and the recent DSM-5 criteria. The arcane history of psychodynamic notions is compared with the interaction of the mesial frontal cortex and its connections. In this discussion, the clinical features of this disorder are well covered and exquisitely described.

This book also discusses several related conditions, which is an interesting bonus. The extensive section on hoarding disorder is a wonderful addition. The information on impulse control disorders is brief but provides a good background on anxiety reduction and the patient's desire to control the perception of loss and disorganization. The portion of the text discussing gender effects, cultural influence, and parenting is also noteworthy and provides interesting footnotes. The material on neurobiology in obsessive-compulsive conditions is well articulated but could be more detailed. I would have

liked to have seen more information on surgical treatments for obsessions and anxiety. The theoretical underpinnings for the medical treatment of obsessive-compulsive conditions is clear and well organized. The authors also explain the neuropharmacologic reasoning for the use of selective serotonin reuptake inhibitors. The inclusion of monoamine oxidase inhibitors and tricyclic antidepressants is a great addition to the basic pharmacology the text describes. These medications are seldom used today, but are still valuable tools for treating intrusive thoughts, anxiety, and depressive symptoms. Using psychotherapy for obsessive-compulsive personality disorder is briefly mentioned in an appropriate manner.

This compact text is a pleasure to read. It is a good reference but is not excessively detailed or verbose. The references are robust and provide more than enough material for those who would like to make further investigations. This is a fine addition to the literature on obsessive phenomena. The level of material is convenient and accessible to medical students and residents. I recommend it for both clinicians and teachers alike. The information is accurate, well-documented, and pleasantly written. Every psychiatry department would benefit from having a copy.

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DISCLOSURE: Dr. Wilcox reports no financial relationships with any companies whose products are mentioned in this article, or with manufacturers of competing products.

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BOOKS RECEIVED

The following books have been received or otherwise obtained and will be reviewed by selected individuals, the courtesy of the sender is acknowledged by this listing.

Tipping scales. Ethical and Legal Dilemmas in Managing Severe Eating Disorders. Edited by Patricia Westmoreland; American Psychiatric Association Publishing; 2021; ISBN 9781615372499; pp 208; \$60 (paperback).

Social (In)justice and Mental Health. Edited by Ruth S. Shim and Sarah Y. Vinson; American Psychiatric Association Publishing; 2021; ISBN 9781615373383; pp 267; \$49 (paperback).

Seeking Value. Balancing Cost and Quality in Psychiatric Care. Edited by Wesley E. Sowers and Jules M. Ranz; American Psychiatric Association Publishing; 2021; ISBN 9780873182256; pp 620; \$85 (paperback).

Infanticide and Filicide. Foundations in Maternal Mental Health Forensics. Edited by Gina Wong and George Parnham; American Psychiatric Association Publishing; 2021; 9781615373512; pp 429; \$67 (paperback).

Good Psychiatric Management and Dialectical Behavior Therapy. A Clinician's Guide to Integration and Stepped Care. Edited by Anne K.I. Sonley and Lois W. Choi-Kain; American Psychiatric Association Publishing; 2021; ISBN 9781615373413; pp 173; \$55 (paperback).

Prenatal Alcohol Exposure. A Clinician's Guide. By Mansfield Mela; American Psychiatric Association Publishing; 2021; ISBN 9781615372393; pp 445; \$72 (paperback).

The American Psychiatric Association Publishing Textbook of Substance Use Disorder Treatment. Sixth Edition. Edited by Kathleen T. Brady, Frances R. Levin, Marc Galanter, and Herbert D. Kleber; American Psychiatric Association Publishing; 2021; ISBN 9781615372218; pp 881; \$183 (hardcover).

Compulsive Sexual Behavior Disorder. Understanding, Assessment, and Treatment. Edited by Richard Balon and Peer Briken; American Psychiatric Association Publishing; 2021; ISBN 9781615372195; pp 201; \$49 (paperback).

Psychotherapy. A Practical Introduction. Edited by Adam M. Brenner and Laura S. Howe-Martin; Wolters Kluwer; 2021; ISBN 9781075126780; pp 401; \$124.99 (paperback).

Dreamland: The True Tale of America's Opiate Epidemics. By Sam Quinones; New York, New York; Bloomsbury Press; 2015; ISBN 978-1-6204-0250-4; pp 384; \$28 (hardcover),

Learning to Lead in the Academic Medical Centers: A Practical Guide. By Jeffrey L. Houpt, Roderick W. Gilkey, and Susan H. Ehringhaus; New York, New York; Springer; 2015; ISBN 978-3-3192-1259-3; pp 219; \$54 (paperback).