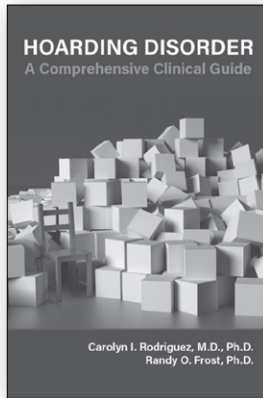


BOOK REVIEWS

Hoarding Disorder. A Comprehensive Clinical Guide



By Carolyn I. Rodriguez and Randy O. Frost; American Psychiatric Association Publishing; 2023; ISBN 9781615373369; pp 306; \$49 (paperback).

Hoarding disorder is a new diagnosis that was included for the first time in the *Diagnostic and Statistical Manual of Mental Disorders* in its 5th edition (DSM-5) in 2013¹ (pp 247-251). Thus, as emphasized in this comprehensive clinical guide, very little is known about many aspects of this disorder, especially about its treatment. Prior to the DSM-5, “hoarding was considered an infrequent symptom of obsessive-compulsive disorder (OCD) or a symptom of obsessive-compulsive personality disorder (OCPD)” (p 3). However, as pointed out in the most interesting chapter of this book (Chapter 1, Introduction and History), some earlier descriptions of hoarding behavior appeared in works of ancient authors such as Theophrastus in Hellenistic Greece, or in Dante’s *Inferno*. Over the years,

important phenomenological differences between hoarding disorder and OCD were recognized. “Perhaps most telling of these differences was that hoarding-related thoughts are not experienced as intrusive or unwanted, as is required for an OCD diagnosis. Rather, they are ego-syntonic—part of the normal stream of thoughts. They are also not repetitive the way that obsessions are, nor are they unpleasant or distressing. Distress in hoarding does not occur with the collecting or saving behavior; rather, it arises only with attempts to discard or curtail acquisition” (pp 27-28). The nature of distress is also different, and “hoarding behaviors, especially acquisition, are associated with positive emotional states” (p 28). There are also differences between the hoarding disorder behaviors and the OCPD phenomenology. Thus, some researchers and clinicians felt strongly that hoarding disorder should be distinguished from these 2 entities and defined as a specific disorder of its own. Two prominent experts on hoarding disorders, Drs. Rodriguez and Frost, put together the first comprehensive text for clinicians that should serve as a practical guide and essential resource for treatment planning.

The book consists of 4 parts: I. Phenomenology; II. Etiology; III. Interventions; and IV. Challenges; plus 5 appendices. Part I includes 4 chapters: Introduction and

History; Diagnosis and Comorbidity; Assessment; and Insight and Motivation. The first chapter, as mentioned, starts with history, including the fascinating case of the reclusive Collyer brothers of New York City, who stacked the 12 rooms of their 3-story brownstone to the ceiling (newspapers, magazines, old stoves, 14 pianos, etc) and made it virtually impossible to navigate. Both brothers died in the house, one of another illness, the other crushed to death by baled newspapers and a heavy chest. More than 170 tons of material was removed from the house, along with 30 feral cats, and thousands of roaches and rats. This is a truly captivating case, demonstrating that hoarding disorder could be deadly! The chapter emphasizes that “Difficulty discarding or letting go of possessions is the hallmark behavior of the disorder, while clutter is the consequence” (p 7). The chapter continues to discuss issues such as ownership; collecting vs hoarding; severity; prevalence (2.6%, with higher rates for people older than 60 and people with other psychiatric diagnoses, especially anxiety and depression); and culture (prevalence seems to be similar across countries and cultures). The second chapter reviews the differences between hoarding disorder, OCD, and OCPD, and then delves into the DSM-5 diagnostic criteria of hoarding disorder, its onset and course, demographics (equal prevalence in men and women), comorbidity, and hoarding-like behaviors in other disorders.

The chapter on assessment presents a stepwise evaluation: Step 1. Assessing risk; Step 2. Conducting a Diagnostic Interview; Step 3. Assessing Symptom Severity; and

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Step 4. Assessing Attachments to and Beliefs about Possessions using numerous instruments and scales (the most important 5 instruments are included in appendices). The last chapter of this part deals with insight and motivation, which are important for treatment. It notes that the gold-standard treatments for OCD such as “exposure and response prevention and medications have not fared well when used to treat hoarding” (p 69). The authors note that people with hoarding may be unwilling to admit that their behavior is problematic when confronted about it, and that over-valued ideas about possessions are part of the disorder itself and not a reflection of poor insight.

The second part includes 2 chapters, one on the cognitive-behavioral model and one on the neurobiology of hoarding disorder. The specific features of the cognitive-behavioral model include vulnerabilities (genetics, comorbidity, trauma history, poor physical health or disability, perfectionism, attachment deficits); information processing deficits (attention, memory, cognitive flexibility, perception, association, decision making); meaning of possessions (eg, comfort and safety-related meanings, aesthetic-related meanings); and reinforcement patterns (negative and positive reinforcement, absence of learning). The neurobiology chapter is a standard, not very contributory text, since research in the neurobiology of this disorder is a newly burgeoning field.

The third part consists of 4 chapters: cognitive-behavioral therapy (CBT); pharmacotherapy; harm reduction; and community. The chapter on CBT points out that the effectiveness of CBT in hoarding disorder was established in randomized controlled trials and that improvements are largely maintained up to 1 year. It also discusses a highly structured, peer-led workshop (Buried in Treasures Workshop) that follows a CBT protocol. The text also mentions that perfectionism and intolerance of uncertainty are poor prognostic factors of CBT in hoarding disorder. In contrast, the chapter on pharmacotherapy emphasizes that there is no FDA-approved medication for hoarding disorder and that there “are no randomized controlled trials or meta-analyses to provide adequate support” (p 149) for medications that have been used for hoarding disorders (some data are extracted from OCD trials), such as paroxetine, venlafaxine, atomoxetine, methylphenidate, fluvoxamine, and risperidone. The chapter on harm reduction states that “Harm reduction is not a treatment for hoarding disorder. The primary goal of harm reduction is to manage symptoms to decrease risk, whereas the goal of treatment is to manage symptoms, distress, and impairment” (p 165). Finally, the chapter on community discusses community partnerships, such as hoarding task forces, public-academic collaborations, and partnerships initiated by individuals with

lived experiences of hoarding disorder. It also includes a discussion on housing and legal issues.

Finally, the last part reviews in 4 chapters issues such as elders (hoarding disorder is more prevalent among elders; cognitive decline may compromise CBT), animal hoarding, squalor (including Diogenes syndrome), and future directions.

The chapters include Key Clinical Points summarizing the salient issues, and some chapters include good case examples. The 5 appendices are the most important evaluation tools: A. Structured Interview for Hoarding Disorder (SIHD); B. Clutter Image Rating (CIR); C. Saving Inventory - Revised (SI-R); D. Hoarding Rating Scale (HRS); and E. Activities of Daily Living - Hoarding (ADL-H) scale.

This book is a solid guide to the clinical aspects of a new diagnostic entity, hoarding disorder. The information provided is understandably limited, but it is mostly useful. The book will be welcomed by all clinicians who are either interested in hoarding disorder or are dealing with it in their practice.

REFERENCES

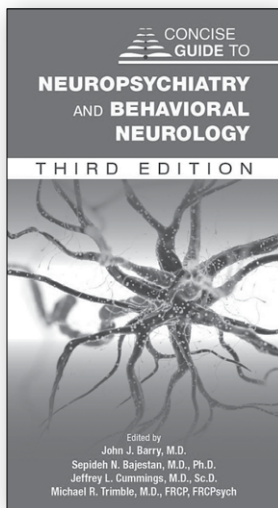
1. American Psychiatric Association. *Diagnostic and Statistical Manual of Mental Disorders*. 5th ed. American Psychiatric Association; 2013.

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DISCLOSURES: Dr. Balon is a Deputy Editor of the American Psychiatric Association Publishing Editorial Board.

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Concise Guide to Neuropsychiatry and Behavioral Neurology. Third Edition



Edited by John J. Barry, Sepideh N. Bajestan, Jeffrey L. Cummings, and Michael R. Trimble; American Psychiatric Association Publishing; 2023; ISBN 9781615374090; pp 395; \$68 (paperback).

Neuropsychiatry and behavioral neurology usually cover areas that some would consider “borderlands” between psychiatry and neurology that are shared, contested, and probably not well covered by either specialty. Some define neuropsychiatry and behavioral neurology as “specialties devoted to understanding and treating behavioral disturbances associated with neurological dysfunction” (p 1). As the editors of the first edition (and also this edition) of this Concise Guide,

Jeffrey Cummings and Michael Trimble write, “Substantial expertise in understanding of how to examine an individual experiencing delusions, hallucinations or aphasia combined with deep understanding of brain structure and function in health and disorder is required of the neuropsychiatrist/behavioral neurologist.” Thus, with the help of 2 new editors they brought together a group of 35 experts who authored with them 23 chapters concerning issues and areas of neuropsychiatry and behavioral neurology.

The first 3 chapters address general issues, such as neuropsychiatric assessment, behavioral neurobiology, and neuropsychiatric symptoms and syndromes. The chapter on assessment includes a review of clinical and laboratory examinations, such as initial observation, neuropsychological testing (with a nice table of bedside mental state testing), neurological examination, metabolic and biochemical investigations, electroencephalography (including evoked potentials), and brain imaging. The chapter also includes a very good table of formal tests of neuropsychological function with test names and brief descriptions of what they test. The text is brief and supplemented by several tables. The

reader would probably welcome a bit of synthesis, especially in the case of neuropsychological tests. The chapter on behavioral neurobiology discusses essential neuroanatomy and includes a table of neuroreceptors of clinical relevance. Finally, the chapter on neuropsychiatric symptoms and syndromes is a hodgepodge of various areas of psychopathology, such as mood and anxiety, symptomatology of mood and anxiety disorders, mood and affect lability, psychotic symptoms (tables of types of delusions and of neuropsychiatric disorders associated with delusions), obsessive-compulsive disorder and other repetitive behaviors, personality change (included is a very good table of personality alterations in neurological disorders), dissociative disorders, altered sexual behavior, and paraphilic disorders (paraphilic behavior could occur in various neurological disorders, such as temporal lobe epilepsy, Huntington’s disease and others), and aggression.

The following 18 chapters cover specific neuropsychiatric disorders and syndromes. I will just list them to illustrate the breath of the topics covered: functional neurological symptoms disorder; frontal lobe syndromes; aphasia and related syndromes; visual, visuospatial, and right brain disorders; memory and its disorders; epilepsy and limbic system disorders; delirium; dementia; movement disorders; cerebrovascular disease/stroke; brain tumors; white matter diseases; head injury and its sequelae; alcohol and other substance use disorders; autism spectrum disorder; evaluation and treatment of endocrine disorders

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with neuropsychiatric symptoms (thyroid and adrenal); limbic encephalitis; and HIV neurocognitive disorders. The chapters are informative, though a bit uneven, and at times very short (eg, the chapter on brain tumors). Some discuss the treatment of specific disorders. As with the first 3 chapters, much of the information is tabulated, and at times illustrations are included (eg, normal and abnormal performance on the design fluency test or the multiple loop test). The tables are a very useful feature of this volume—I liked many of them, such as the table on assessment of patients with dementia, which lists clinical assessment, clinical examination, laboratory evaluation, genetic testing, optional informative laboratory tests, brain imaging, and elective assessments such as lumbar puncture, carotid Doppler studies in a clear, well-arranged fashion, or the table on

the treatment of Alzheimer disease, which is up-to-date with all available medications, including aducanumab. The review of Parkinson disease (included in the movement disorders chapter) is very useful, as it includes a good description of the underappreciated nonmotor symptoms.

The last 2 chapters review the treatments in neuropsychiatry and interventional psychiatry. The chapter on treatments is another hodgepodge of various psychopharmacological treatments that is not very useful. The last chapter on interventional psychiatry briefly reviews noninvasive interventions (transcranial magnetic stimulation, theta burst stimulation, and electroconvulsive therapy) and invasive interventions (ablative surgery, deep brain stimulation, and vagus nerve stimulation).

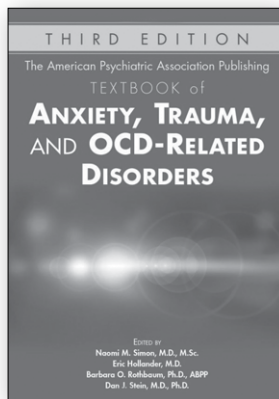
This small volume is what it is called: a concise guide. Concise guides have the advantage of

providing a large amount of information about many things, and the disadvantage of providing specific information that is compressed and not always complete or sufficiently detailed. This volume probably fits both of these. Nevertheless, it is useful and stimulating and may help young or old clinicians (both psychiatrists and neurologists!) in the initial management of neuropsychiatric symptoms, syndromes, and disorders. This applies especially to the diagnostic deliberation, as the treatment parts of the chapters are not always nuanced enough. I would recommend this guide especially to the novices in neuropsychiatry and behavioral neurology. Hopefully it will inspire them to get more interested and, if needed, they can move on to the textbook(s).

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The American Psychiatric Association Publishing Textbook of Anxiety, Trauma, and OCD-Related Disorders. Third Edition



Edited by Naomi M. Simon, Eric Hollander, Barbara O. Rothbaum, and Dan J. Stein; American Psychiatric Association Publishing; 2020; ISBN 9781615372324; pp 721; \$155 (hardcover).

A good book focusing on anxiety has been long overdue. This is an excellent book for reference, teaching, and clinical reading. It contains a very large amount of information on anxiety and related disorders. The pathophysiology, phenomenology, and current treatments on a variety of related conditions are well covered. Like most texts from the American Psychiatric Association, it is well-researched and finely written. The text covers 40 chapters, divided across 10 major parts. The broadly spanning parts typically begin with a

good introduction to the neurobiology and descriptive phenomena of anxiety pertaining to the condition at hand. The rationale behind each of the diagnoses and various treatments (both pharmacologic and nonpharmacologic) is well explained. The chapters typically end with a conclusion and a few key points. The brief key point portion is very handy and makes for a quick reference for a variety of topics. Each part has a sufficient bibliography to back up the statements made in the text.

A good text on anxiety and trauma-related disorders should explain why these conditions are important in clinical practice, and this book does so elegantly. There are good sections on special populations such as children and older persons. The clinical importance of anxiety in people with other psychiatric comorbidities is mentioned. There are great sections on phobias, social anxiety, and insomnia. The portion on panic disorder draws particular attention. The topic of panic holds a unique quality of combining severe anxiety and remarkable physiologic symptomatology. Many patients with panic attacks end up in the emergency department and a variety of

medical problems must be ruled out. As such, it is important that the differential diagnosis of panic disorder be handled in detail. This text does a reasonable job of dealing with the diagnosis and treatment of panic. This area, however, could easily be expanded to >100 pages and contain even more important material. There are multiple pages on the occurrence of anxiety in grief, a topic often overlooked in other academic conversations. It was a wonderful idea to include grief in this book, but one wishes that more detail was provided. As with several American Psychiatric Association textbooks, the topics chosen are important and well-written, but leave the reader wanting more information than is reasonable in a single volume.

There are very few things to fault with this edition. One wishes that some areas could have been more detailed, but this is already a very large volume. The tables are helpful and compliment the text appropriately. The treatment discussions are fair and balanced. The use of benzodiazepines is handled in a fair and reasonable manner. The efficacy of buspirone is dealt with in an honest way.

It is obvious that the authors do not take anxiety lightly. Patients need a balanced approach that is more than generic selective serotonin reuptake inhibitors and typical psychotherapy. This text delivers a fair and reasonable treatment approach that our patients desperately need.

Some expert clinicians may find this text too basic to be useful, but most psychiatrists will find that it covers a broad range of topics very well. The diagnostic groups are well

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covered and written in such a way as to contribute to digestible and useful reading. This is a comprehensive and enjoyable textbook. I think that it is an excellent addition to any

office or departmental reading list. I highly recommend it.

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

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.

Gabbard's Textbook of Psychotherapeutic Treatments. Second Edition. Edited by Holly Crisp and Glen O. Gabbard; American Psychiatric Association Publishing; 2023; ISBN 9781615373260; pp 808; \$145 (hardcover).

Psychotherapy in Corrections. A Supportive Approach. By Peter N. Novalis, Virginia Singer, and Carol M. Novalis; American Psychiatric Association Publishing; 2023; pp 513; \$89 (paperback).

Race and Excellence. My Dialogue with Chester Pierce. By Ezra E.H. Griffith; American Psychiatric Association Publishing; 2023; pp 187; \$40 (hardcover).

Psychodynamic Formulation. An Expanded Approach. Second Edition. By The Psychodynamic Formulation Collective; John Wiley & Sons Blackwell; 2022; ISBN 9781119797265; pp 330; \$49.99 (hardcover).

The SCID-D Interview. Dissociation Assessment in Therapy, Forensics, and Research. By Marlene Steinberg; American Psychiatric Publishing; 2023; pp 169; \$92 (paperback).

Struggle and Solidarity. Seven Stories of How Americans Fought For Their Mental Health Through Federal Legislation. Edited by Michael T. Compton and Marc W. Manseau; American Psychiatric Publishing; 2023; pp 243; \$59 (paperback).

The Object Relations Lens. A Psychodynamic Framework for the Beginning Therapist. By Christopher W.T. Miller; American Psychiatric Publishing; 2023; pp 240; \$52 (paperback).

Loneliness. Science and Practice. Edited by Dilip V. Jeste, Tanya T. Nguyen, and Nancy J. Donovan; American Psychiatric Publishing; 2023; pp 252; \$53 (paperback).

The Clinician's Handbook on Measurement-Based Care. The How, the What, and the Why Bother? By Antoinette Gledzinska and Aaron R. Wilson; American Psychiatric Publishing; 2023; pp 152; \$68 (paperback).

Textbook of Hospital Psychiatry. Second Edition. Edited by Harsh K. Trivedi and Steven S. Sharfstein; American Psychiatric Publishing; 2023; pp 659; \$155 (hardcover).