

## Book review

### UNDERSTANDING TROUBLED MINDS: A GUIDE TO MENTAL ILLNESS AND ITS TREATMENT

By Sidney Bloch

2011. Melbourne University Press, Melbourne.

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This 360-page book is the second edition of a book first published in 1997. The author is Emeritus Professor in the Department of Psychiatry at the University of Melbourne. For this edition, Bloch built on earlier collaboration with Prof Bruce Singh, both in relation to the first edition of the book and also following on from publication of *Foundations of Clinical Psychiatry*, a textbook for medical students from which this book is derived.

Bloch has worked as a psychiatrist for decades and was editor of the *Australian and New Zealand Journal of Psychiatry* for 13 years. He has written thirteen books and is well known for his film *The Wrong Side of the Bus* (2009) in which he confronted his own feelings of guilt in relation to his time in apartheid South Africa.

*Understanding Troubled Minds* is a very thorough examination of the range of mental illnesses which affect so many of us and some of the key treatments available for such illnesses, including pharmaceutical and non-drug therapies. Illustrative case studies are presented so that the reader can gain better insight into the practical problems faced by psychiatrists. Quotations from famous people are also used to highlight the author's key points.

The book is as authoritative as it is claimed to be. However, at times it is as if elements of the original medical textbook were left unedited, with lay readers left trying to understand quite technical terms. For example, in introducing the system for classifying mental illnesses, one part of Bloch's explanation reads:

[The APA's] three innovations were classification of illnesses according to their observable clinical features rather than their assumed cause (with the striking exceptions of post-traumatic stress disorder and acute stress disorder); explicit criteria to improve diagnostic agreement between psychiatrists; and a 5-axis system to provide for a more comprehensive evaluation, including the presence of any physical conditions, the role of life stressors, and a quantitative estimate of the person's level of psychological and social functioning.

The book also leaves readers to try to understand some quite complex concepts:

Typically, the borderline person is a total stranger to themselves and unable to retain a consistent integrated concept of the self over time or in various aspects of their life.

The author is keen to distance himself from the purely medical model of clinical care and at several points embraces a much broader psychosocial philosophy of practice. However, the book does not explore this philosophy in great detail, spending more time ensuring readers understand first the disorders, then the treatments, both clinical and pharmaceutical.

The book sets out Bloch's support for electroconvulsive treatment (ECT). Yet although the evidence to support this position is strongly put, there is no mention of memory loss as a key side-effect.

With this focus on treatments, the book makes little if any mention of 'recovery' as a concept, nor does it dwell on links between mental illness, psychiatry and homelessness or unemployment. The consumer and carer advocacy movement in Australia is barely mentioned, nor is the role of other health professionals, particularly general practitioners, in providing services to people with a mental illness.

Bloch's perspective on psychiatry is summed up at the end of the book, as a stool with three legs: science, art and ethics. Readers are left in no doubt as to the author's belief that psychiatry is in large measure an art, and by implication psychiatrists are artists.

Some of the illustrative case studies chosen are also a little alarming, indicating that clues about possibly aberrant behaviour lie everywhere, for example when one man 'closes his eyes when talking about his wife' or 'laughs uproariously at his own joke'. Guilty as charged.

The choice of yet other examples could indicate a narrow view of what is normal:

A 45-year-old woman is dressed in brightly coloured clothes, wears heavy make-up and has purple nail polish. Her general personal care is clearly inadequate, her hair unwashed and tousled. She has trouble remaining seated and constantly fidgets. She lacks appropriate restraint as she winks and tries to touch the psychiatrist. (All these features alert us to a likely manic state).

The book does include several stories where the focus of treatment does seem to be on making the patient more cooperative and compliant rather than on identifying and then enabling consumer-led recovery.

In the end, however, it is not the tone of the book nor the examples used that are the focus on any critique of this largely helpful book.

Rather, it is way the book makes it seem as if people with a mental illness must be crazy if they did not avail themselves of the abundant care and treatment offered to them by health professionals, particularly psychiatrists. With these artists-in-residence ready to capitalise on the 'huge strides' made in psychiatry, patients simply had no excuse not to be in care.

The fact is that the massive microeconomic reforms to which Australian industry has been subject over the past 30 years have largely passed medicine by. The old guilds and professional colleges still dominate and work practices for specialties like psychiatry remain largely unchanged; fee-for-service medicine relying on a patient going to a specialist's rooms, at the convenience of the specialist for face-to-face service.

New models of collaborative care, where a psychiatrist might coordinate a team of professionals and peer support workers to provide effective and holistic home-based support have largely failed to emerge.

In 1997, only 38% of people with a mental illness in the preceding 12 months got any care for their illness. In 2007, this figure had dropped slightly to 35% (ABS Surveys of Mental

Health and Wellbeing). One reason for this is that the number of patients seen by psychiatrists today is about the same as 30 years ago. Although treatments and drugs may have improved, there is little incentive for psychiatrists to take on new clients, work practices remain unchanged and the psychiatric workforce is dwindling.

Although this book illuminates a great deal about mental illness, it could have been even more useful to consumers and clients if it provided more of this general perspective about the

state of mental healthcare in Australia, so as to help them get ready for the battle they will face to find quality mental healthcare in Australia.

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