

## Book Reviews

Edited by César A. Alfonso, M.D.

***Comprehensive Textbook of AIDS Psychiatry*, edited by Mary Ann Cohen, M.D. and Jack M. Gorman, M.D. New York: Oxford University Press, U.S., 2007, 619 pp., \$98.00**

Few textbooks ask to be read from cover to cover, and even fewer textbooks deserve to be. The *Comprehensive Textbook of AIDS Psychiatry*, edited by Mary Ann Cohen (a member of our Academy) and Jack Gorman is one of those textbooks. In its careful organization and global scope it invites the reader to begin with the first page and read carefully through the text to the last section. I can assure the reader of being well-rewarded for the effort. This textbook is unusually strong, both in the writing and the organization of the material. This may have much to do with the involvement of Dr. Cohen in so many of the chapters in the book (more than 25%, in fact) The writing is at a very scholarly level, with plenty of clinical examples which sharpen the insights offered in the text.

I feel in a particular position, having been at the very beginning of my training at the very beginning of the AIDS pandemic, as were both Cohen and Gorman. There is no substitute for personal experience in bringing the “sticky floor sign” or the “sheet sign” to life, as Cohen does in her opening chapter. Both of these “signs” were the clinical manifestations of gross discrimination borne out of the fear, aversion, and pessimism which accompanied the opening phases of the pandemic. The “sticky floor” was the result of the weak and ataxic patient who would spill, who couldn’t always make it to the bathroom, and the lack of attention to mopping the floors. The “sheet sign” resulted when a patient literally hid under the sheet, a combination of negativism and depression coluded with by staff who were just as happy not to be confronted by a cachectic, mortally ill young person, who would die no matter what we did, and who we feared might infect us, and by extension, those we loved. In the future, others may write about such things as of historical interest, or they may be dropped entirely from textbooks which instruct contemporary practitioners on the best current practices. To my mind,

however, having lived the times as they happened, these first chapters are essential to orienting the clinician.

Stigma and its manifestations remain a major theme in the evaluation and treatment of patients with AIDS, and it is addressed both explicitly and implicitly, with much subtlety, throughout this work. "Risk Behaviors" are well known to elicit the antipathy of the medical community, and are here addressed both as aspects of HIV transmission, as well as issues in adherence and prevention of transmission.

Unique to this text, is the consideration of AIDS through the life cycle, including chapters on childhood and adolescence, young adulthood and the issues faced by serodiscordant couples, and the protean manifestation of AIDS in the elderly. While we are fortunate to have arrived at a place where AIDS is no longer an immediate death sentence, and there are many who live with HIV infection into old age, the lives these patients live have predictable complications. How wonderful to have such knowledgeable clinicians describe them for us.

The authors should be commended for the chapters on Fatigue and HIV, the unique manifestations of HIV-Associated Dementia, and Distress in Persons with HIV. Distress and fatigue are debilitating clinical symptoms, with multi-factorial, overdetermined etiology, and resistant to simple treatment measures. These chapters are a model of how one goes about untangling such a complicated clinical 'knot' and devising coherent treatment strategies which address the many issues in a rational way. I particularly recommend the small chapter on Suicide, co-written by (Academy member) César Alfonso with Dr. Cohen. There is a small, particular section on Psychodynamics that deepens the general "bio-psycho-social" approach which pervades the book so admirably.

Psychopharmacologic treatment issues in AIDS psychiatry receive a specific, lengthy chapter. It contains the usual and necessary charts, which are always daunting. The medications involved in the primary treatment of AIDS and the treatment of secondary manifestation of the illness include many medications which have profound effects on the metabolism of the drugs themselves as well as significant drug-drug interactions. Here we are in luck, because chapter authors Kelly Cozza, Scott Williams and Gary Wynn are well-known for their clear presentation of these confusing issues. They provide an ample sampling of clinical cases, which always helps one remember these interactions.

AIDS psychiatry is an example of a syndrome which reflects all five of the dimensions Lipowski defined for "Psychosomatic Medicine" in the 1960s: the psychiatric presentation of medical illness, psychiatric complications of medical illnesses and treatments, the psychological response to medical illness and treatment, the medical presentation of psy-

chiatric illness or treatments, and co-morbid medical and psychiatric illnesses. In this complicated, circular, sometimes chaotic clinical morass, it is useful to have clear, thoughtful, sophisticated and nuanced guidelines for the evaluation and treatment of patients and their families. *The Comprehensive Textbook of AIDS Psychiatry* is such a book, and it receives my unreserved endorsement. Having completed my studying for the Psychosomatic Medicine Boards several years ago, I am sorry that this textbook was not yet available to me as a resource, and I will be looking for the later editions as they emerge.

Sherry Katz-Bearnot  
New York, NY  
spk1@columbia.edu