

and shakers whom they pay to give "industry sponsored" seminars, complete with free meals and giveaways that assure massive attendance.

In summary, I highly recommend this book to anyone in training in the mental health field and any of my colleagues who are concerned with current trends and fashions in our discipline, which is shaped, much as Foucault said it would be, by the powers in society.

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RICHARD CHESSICK, M.D., PH.D.

ANNE SHEFFIELD: *Depression Fallout: The Impact of Depression on Couples and What You Can Do to Preserve the Bond*. Quill, New York, 2003, 276 pp., \$13.95, ISBN 0-06-000934-9.

This easy-to-read, popularly written book explores the fallout of depression on other family members. Most of the information gathered in this book was obtained from an Internet chat-room for nondepressed partners who had to deal with the depressed member of the dyad. Hence the position that the fallout of depression is "a family affair." This position offers a powerful argument, albeit impressionistic, to view depression, as well as most psychiatric disorders, as affecting intimate others as deeply as the disorder itself affects the sufferer. This impact is felt even and when the etiology of the disorder is viewed solely as internally intrapsychic, and genetically organic developing in a vacuum of relationships, regardless of the influence of intimate others. Those relationships are crucial no matter what the etiology of the disorder may be. They need consideration even if treatment, medical or psychological, is focused only on the individual.

The volume consists of nine chapters: depression and depression fallout, unraveling the mind-brain mysteries of depression, overcoming denial and the art of persuasion, drawing a line in the sand, a partnership approach to treatment, the virtues of being selfish, I love you I love you not, mending or breaking the bond, and life beyond depression. An appendix contains a guide to Internet resources on depressive illness. The selected bibliography, more extensive than usually found in popularly written books on psychiatric illnesses, is useful.

Sheffield divides the process of fallout on nondepressed partners according to an interesting, and to this reviewer, novel model of five stages: confusion, self-blame, demoralization, fighting back, and longing to be free of the unhappiness and of the person who is its source. Testing the validity of this model could become an important area of research.

Professionals, who may consider a book of this kind beneath them intellectually, think again. Even though popularly written, this book enters and explores an underresearched area that extends depression well beyond the sheer statistics of depressed individuals. If there are about 20 millions sufferers of this disorder in the US, not even counting masked and subsyndromal depressions, then one must double that number by adding nondepressed partners. The children and/or parents of depressed individuals vastly increase the numbers of those who are co-sufferers during the process and aftermath of depression.

This book could be useful to therapists with an individual, intrapsychic orientation, to make them aware that treating depression itself, as well as most psychiatric disorders, separately from intimate relationships is no longer enough. Couple, group, and family therapists will find support to maintain their contextual positions. The staggering numbers of depressed individuals and their partners, do suggest the need for using additional modes of intervention, besides medication and face-to-face talk. TV, mail, faxes, telephones, computers, and the Internet should be harnessed to reach as many depressed individuals, their partners, and their children in ways that were unexplored and not experienced a generation ago.

In addition to the above-mentioned media, prevention of depression could be furthered by psychological and behavioral "vaccines" like exercise, sport activities, relaxation training, increase of the frequency of positive behaviors, e.g., prolonged hugging and touching in couples and families. If psychotherapists want to enter into this century, this book demonstrates the need for them to adopt and adapt as many creative, alternative additions to face-to-face talk and medication to treat depression, its fallout, and its aftermath, as they can find.

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LUCIANO L'ABATE, PH.D.

BARBARA GELLER AND MELISSA P. DELBELLO (EDS.): *Bipolar Disorder in Childhood and Early Adolescence*. Guilford Press, New York, 2003, 342 pp., \$36.00, ISBN 1-57230-837-0.

There has been substantial controversy in the mental health field about the existence and diagnostic boundary of childhood (i.e., early-onset) bipolar disorder. Although it is now accepted that symptoms of mania can be manifested in children and adolescents (see National Institute of Mental Health Research Roundtable on Prepubertal Bipolar Disorder, 2001, *Journal of the American Academy of Child and Adolescent Psychiatry*, 40, 871–878), many questions remain about the diagnosis, natural history, neurobiology, and treatment of early-onset bipolar disorder. The book *Bipolar Disorder in Childhood and Early Adolescence* is an edited collection of 15 chapters that address these questions as well as a range of other aspects of early-onset bipolar disorder. The authors of the chapters are established scientists whose work in this area is recognized as "state of the art."

The first 4 chapters of the book address the diagnosis and phenomenology of bipolar disorder in children and adolescents. In chapter 1, Peter Lewinsohn and his colleagues describe the epidemiology, clinical characteristics, and longitudinal course of early adolescent bipolar disorder. Chapter 2, by Barbara Geller and her colleagues, discusses a recently developed diagnostic instrument for pediatric bipolar research and presents data that help to clarify the diagnostic boundary between attention deficit/hyperactivity disorder (ADHD) and early-onset bipolar disorder. In chapter 3, Sandra DeJong and Jean Frazier review phenomenological characteristics, diagnostic issues, and pharmacological treatments for children and adolescents with co-occurring pervasive developmental disorders and early-onset bipolar disorder. Chapter 4, by Demetri Papolos, examines the common comor-