

arena of child-serving agencies and organizations, including primary pediatric care, schools, child protective services, and the juvenile justice system. The book is also recommended for parents and family members of

youths with serious emotional disturbances as an aid to providing information to these essential partners in the overall effort to allow youths with psychiatric disorders to stay in their homes and local communities.

The Postpartum Effect: Deadly Depression in Mothers

by Arlene M. Huysman, Ph.D., and Paul J. Goodnick; New York, Seven Stories Press, 2003, 222 pages, \$14.95 softcover

Vidushi Babber, M.D.

Why is it that nearly half a million women suffer from some form of postpartum depression? In the latest revision of *The Postpartum Effect: Deadly Depression in Mothers*, Arlene M. Huysman, Ph.D., and Paul J. Goodnick refresh our memory of shocking news reports of infanticide and filicide. Huysman, drawing from her personal experience as a clinical psychologist, adds credibility through vignettes and patient anecdotes that nicely complement our knowledge about publicized cases heard over the years in the national media. In addition, the book sheds light on several international cases, thus illustrating the global prevalence of this deadly form of depression.

Listing numerous references and sources, the book's strength lies primarily in its well-written and reader-friendly approach, making it a comfortable read for audiences ranging from the general public to health professionals. The authors begin by focusing on postpartum depression and on the many myths that surround the postpartum period. Each successive chapter addresses—and in some cases answers—various questions that have intrigued many people about this mysterious illness. Several possible causes of the disorder are identified: hormonal, chemical, and life stressors.

The Postpartum Effect strongly reinforces the need for careful patient

monitoring during the crucial time after childbirth. Examples are provided to illustrate the unfortunate consequences of postpartum depression when it is left undetected and untreated. Furthermore, the book goes on to define a less common term—progressive postpartum depression—which may last many months or even years after the postpartum period. Later chapters of the book attempt to identify patients who are at risk of developing mood disorders and describe criteria for diagnosis and treatment modalities.

The authors boldly bring out controversial views among the medical and justice communities. The book attempts to add clarity to the raging debate about who should screen patients, who is responsible for treatment, who should stand trial, and who is at fault. A glossary defining commonly used terminology and a detailed list of resources complete the book. The authors' passion for informing the public is evidenced by the pedagogical nature of their writing. The ongoing messages of early prevention, accurate diagnosis, and prompt intervention are consistently integrated throughout the text.

As a fellow in women's mental health, I found that many parts of this book hit very close to home. I applaud the authors for their courageous personal anecdotes in addressing the lack of knowledge about postpartum mood disorders. This well-written book meets its goal of educating not only the public but the entire medical profession.

You Are Not a Stranger Here

by Adam Haslett; New York, Anchor Books, 2003, 240 pages, \$13 softcover

Harriet P. Lefley, Ph.D.

Voted one of *Time* magazine's five best books of the year in fiction and winner of the Winship/PEN Award, *You Are Not a Stranger Here* is a group of powerful short stories, each dealing with some manifestation of mental illness and its effects on others.

In the first story, the reader is caught up in a spiraling manic episode so vividly depicted that it evokes the colors of a brain scan. A bipolar father spews forth a torrent of feverish plans while making public scenes and running up huge hotel and restaurant bills that cannot be paid. His son wearily tries to divert him, fully aware of his own powerlessness to stem the tide, and terrified of his own bipolar symptoms. On each side, recollections of tender childhood moments and mutual love highlight the tragedy of a relationship splintered by illness.

Each subsequent story reflects an interaction with a startling core of truth. A woman who has survived trauma and profound personal losses reduces a young psychiatrist to an insensitive neophyte when he keeps insisting that her history requires talk therapy to supplement her medications. Frustrated by merely prescribing in a rural clinic, the psychiatrist is anxious to try his hand at psychotherapy, while the patient is convinced that talking with an inexperienced therapist cannot ameliorate—and may intensify—the tragic memories in her life. This story is a beautiful counterposition of conflicting patient-therapist motivations and needs.

The palliative relief of self-inflicted pain pervades a story of two teenagers, simultaneously struggling with homosexual feelings and parental

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