# Can't Get a Bed, But Got a Couch

### 72 Hour Hold

by Bebe Moore Campbell; New York, Alfred A. Knopf Publishing, 2005, 319 pages, \$24.95 softcover Mr. Muo's Travelling Couch by Dai Sijie; New York, Alfred A. Knopf Publishing, 2005, 304 pages, \$22

Jeffrey Geller, M.D., M.P.H.

The novels 72 Hour Hold and Mr. ▲ Muo's Travelling Couch cast psychiatrists and professionals in related mental health fields in a strange light indeed. From novelist Bebe Moore Campbell, author of three New York Times bestsellers and a woman who has been active in NAMI, I had expected a fine, sensitive product. What I read was bizarre and not very engaging. I wasn't sure what to expect from Dai Sijie, a Chinese filmmaker and novelist who has lived in France for the past 20 years and who wrote Mr. Muo's Travelling Couch in French. What I found was a quirky main character in a quirky tale told in a quirky fashion.

In 72 Hour Hold, Keri, a divorced working mother, is struggling to keep her only child, Trina, on track to start her freshman year at Brown University after a one-year hiatus due to Trina's decompensation from bipolar affective disorder. Keri's ex-husband is upwardly mobile and asset oriented. She also has an off-again/on-again struggling actor lover/ex-lover. Other characters in her life include two women who work in Keri's business, an upscale recycled women's clothing store.

The first half of the book will be familiar to anyone who works with individuals with chronic mental illness but will provide a reasonable education for the uninitiated. The plot is centered on Keri's difficulty in getting adequate treatment, particularly acute inpatient treatment, for her daughter. Keri rarely achieves the 72-hour hold she seeks, and on the few occasions she does, her daughter is discharged without that 72-hour stay

being extended. The mother's anguish is clear; the daughter's pain is perhaps underplayed. Keri describes her daughter: "My daughter's smile was bright and expectant, manipulative. Regardless of what it had taken away, mental illness had conveyed to her a kind of protracted childhood. A long pause filled with delusions of grandeur, no responsibility, very few apologies, and endless adventure."

The second half of the book is inexplicable. From out of nowhere, Campbell adopts an Ian Fleming mode, with a renegade psychologist playing her James Bond. Unable to obtain the treatment that Keri would like to get for her daughter, she finds a cohort of psychologists, psychiatrists, and former clients' families who are running an underground railroad type of operation to illegally hustle individuals who don't want psychiatric treatment to secret locations where they are involuntarily treated. This cohort of practitioners proclaims, "We are a group of psychologists and psychiatrists who believe that the mental health system in this country is a sad joke." This group's remedy is to break every rule; violate enumerable statutes; abuse individuals' rights; and treat them at the remarkable cost of \$12,000 a month for an average stay of six months to a year—hence, a cost to the family of \$72,000 to \$144,000.

Imagine that! In upscale Los Angeles, Keri could not find any private psychiatric hospital that would have managed to provide treatment to her daughter at a \$100,000 price tag. And 72 Hour Hold, besides degenerating into a cat-and-mouse pulp fiction thriller, has other surprising problems. From my read, it stigmatizes mental illness through its use of demeaning language. For example, when Trina

takes up with a boyfriend who has a psychiatric history, Keri wonders, "What was he, a bipolar on a manic tear? A schizophrenic with just enough meds in him to silence his inner voices? A crack-head, a speedfreak, an alkie? How has his mental state undermined my child's thought process?" And although perhaps not politically correct, I thought Campbell's efforts to insert African-American history into this tale of an African-American family seeking good psychiatric treatment was forced. I was emboldened to include this in the review by finding that other reviewers had the same take (1).

Campbell has made it clear that although her book is fiction and not autobiographical, she has a family member with mental illness and has, for the last nine years or so, been involved with that family member's efforts to get adequate psychiatric treatment (2). If 72 Hour Hold is an attempt by Campbell to decrease stigmatization to, as she has said, "get people to come out of the closet about having mental illness" (2) and explicate that recovery is possible, she fails in 72 Hour Hold. As much as I am sorry to say so, I can't recommend this book.

In Mr. Muo's Travelling Couch Dai Sijie presents the tale of Mr. Muo, "a Chinese-born apprentice and psychoanalyst recently returned from France." The tale is not told in chronological order, which sometimes makes it difficult to follow. The plot through the first one-third of the book is mostly an introduction to Mr. Muo and his prowess as a psychoanalyst. Psychoanalysis, however, is somewhat mixed up with shamanism and fortune telling, often by the uneducated populace of China, with whom Mr. Muo interacts, but sometimes by Mr. Muo himself. Mr. Muo, who is a small bespectacled man, more naive than even the barely pubescent female peasants who have never left the commune and with whom he has many interchanges, is a little bit like Charlie Chaplin, bumping into himself at every turn.

Mr. Muo's Travelling Couch also departs radically from its opening

Dr. Geller is professor of psychiatry and director of public-sector psychiatry at the University of Massachusetts Medical School in Worcester.

chapters. Much of the book is written as if the author were a Cervante emulator writing about a Don Quixote variant in China. Mr. Muo seeks to obtain the release of the woman on whom he has had a crush since childhood, who is a political prisoner. In his quest to get her released, Mr. Muo participates in getting his first and only sexual partner imprisoned in the same prison. The means by which he can obtain their release? He must present a virgin to the judge who can be bribed not by money but by the deliverance of this virgin.

Mr. Muo is probably one of the few bicycle psychoanalysts that one will encounter either in literature or in real life. He makes a banner, attaches it to his bike, and rides out into the countryside to drum up business for instant dream analysis. Everywhere Mr. Muo goes, misfortune befalls him: he is robbed, beaten, mistaken for a dangerous escaped psychiatric patient and psychiatrically hospital-

ized, proposed to by the most unattractive woman he could imagine, doubted, discredited, and jeered at.

What does one learn from *Mr. Muo's Travelling Couch*? That an educated man can know nothing? That a psychoanalyst can be a fool? That persistence doesn't pay off? I really don't know.

The last line of *Mr. Muo's Travelling Couch* is, "Tell me, my dear, are you a virgin?" While the reader travels all over China with Mr. Muo and hears lots about his days in France, that last sentence tells the reader that we haven't gotten anywhere. One thing is for sure, *Mr. Muo's Travelling Couch* should have psychoanalysts quaking in their offices.

### References

- Freeman J: Mental illness goes underground. Available at www.chron.com/cs/ cda/ssistory.mpl/ae/books/reviews/3276982
- Being on "72 hour hold." Available at www.closnews.com/stories/2005/08/01/earl yshow/leisure/books/main713145.shtml

### Adrian

by Patrick J. Schnerch; Bloomington, Indiana, Authorhouse, 2003, 404 pages, \$22.95 softcover

#### Mark H. Backlund, M.D.

As the book jacket proclaims, Adrian, Patrick J. Schnerch's first novel, seeks to be "dark, graphic, and grim." It weaves the horror and mystery of a serial rapist and killer in New York City with an insider's knowledge of mental illness. The main character "evolved from the author's acknowledged experiences" with "severe mental and emotional problems" and "bipolar depression."

The story's first mystery lies in uncovering who is responsible for the "murderous rampage": is it the title character, Adrian, who suffers from a combination of what appears to be bipolar affective disorder and a child-hood trauma—based dissociative disorder, modified by substantial quantities

of alcohol? Is it his long-estranged brother, who has basically the same maladies? We are teased with the interspersed journal of a megalomaniacal psychopath, "Madman," who alternately philosophizes on the ills of society, exhorts parents on how to better raise their children, and seethes with hatred and revenge for the police who are tracking him down. This mystery is resolved by the tenth of 24 chapters.

The second—and more impenetrable—mystery lies in trying to comprehend the story's characters. Schnerch manages to make the title character both disturbing and likeable, despite the improbability of his actions and feats. This character starts out unemployed and winds his way from strip joint voyeur to, by discovery of birthright, mob member to chief of a commando-like raid on a warring mob family to owner of all the strip clubs and

head of the entire mobster organization. He drinks heavily and dissociates regularly, often to his advantage and apparently with some degree of purpose and intent. He is wracked with guilt and despair yet is capable of ruthless murder, with few apparent ill effects.

This book suffers mightily from a lack of editing. There are critical spelling errors, awkward syntax, and misdirected or out-of-place metaphors. And if the repetitions were cleaned up the length of the book would be reduced by a welcome percentage.

The dialogue has a curiously formal and stiff quality, and almost all the characters are given to crass comments and abrupt and profane explosions, followed quickly by inexplicable reconciliations. They seem to operate in a primitive, black-and-white mode, and their ethical frameworks shift widely and at times rapidly. Given the author's and the protagonist's repeated concern with morality, the choices that are made are perplexing to the reader. Schnerch explores but oversimplifies the notion of "not guilty by reason of insanity."

It seems that, as likeable as Adrian may be, he succumbs in the end to the mob family loyalty, greed, and lust for power he has so criticized and feared. The sources of literary tension shift and strangely dissipate, leaving the novel with something of a picaresque "Adventures of Adrian" quality. The conclusion of part 1 could really be the end of the book, perhaps leaving part 2 for a "Further Adventures" sequel.

Nevertheless, Schnerch makes meaningful observations about society, loyalty, parenting, mental illness, and the criminal mind. I liked his advice to alcoholics: "find something to do that alcohol affects the enjoyment of that activity. Then a choice has to be made . . . you have to find things that you would rather do than drink." He is ultimately optimistic about the effects of treatment for both mental illness and substance abuse.

The author's notes state that writing for the author "became therapeutic and increased his well being." To that extent, *Adrian* can be considered a success. As a novel, it should be considered, like life itself, as a work in progress.

Dr. Backlund is a psychiatrist with Compass Health and is also in private practice in Mount Vernon, Washington.

#### **Enter Sandman**

by Stephanie Williams; New York; McWitty Press, 2004, 328 pages, \$22

### Nancy Glimm, L.C.S.W.

Enter Sandman, Stephanie Williams's first novel, is both intriguing and maddening. The main character, Trisha Portman, is a young woman who comes from college to New York City and struggles to establish herself in the competitive art gallery and museum world. But the novel unfolds from this simple story line into so much more.

Stephanie Williams is an accomplished writer, a journalist by trade. She writes with intensity and passion. At times the reader wishes the hand of the editor had been stronger. One is asked to make leaps in logic and sequencing. The novel flows back and forth in space and time from college to Trisha Portman's life in New York City.

The descriptions of life in college evolve around the main character's relationships with her friends. Trisha's parents divorced with little familial concern for her. She has a number of relationships with young men and also develops a deep friendship with her female roommate, who becomes another important character. Along the way a man who lives down the hall becomes a haunting presence in her life. James, her lover's roommate, is attending college and has a substantial intellect. He is profoundly disfigured from a traumatic fire. He is reclusive, moody, and artistic. James's story and Trisha's story have parallel play; while in college, both find themselves alone in the dorm during the holidays. Trisha meets James's mother, a gifted painter who is dying of cancer. She is amazed to see the compassion and caring James and his mother share for each other. Trisha sees that James is more than an angry disabled young man and that he has amazing tenderness and caring, especially after Trisha goes though a cancer scare and a biopsy that proves negative. They completely lose touch with one other after college ends, un-

Ms. Glimm is affiliated with the Bronx HIP Mental Health Center in New York.

til a mysterious painting is forwarded to Trisha in her new job at a prestigious art gallery.

The story shifts, with some improbable meetings and events. Although some events challenge the reader, it is possible to stay with Trisha's character on her journey. The surprises in the novel are many. James returns to the narrative, and one is struck by the complexity of his apparent internal deadness. Trisha's plight and the manner in which she handles herself all keep the reader's interest. Many of the descriptions of life in New York and the milieu of the young professional New Yorker feel very accurate.

Without giving away the story, I will say that this novel transforms into a touching description of life lived and life taken too soon. The novel speaks directly about the kinds of transformations that occur when one life leaves this world and is touched by another. The novel moves effortlessly to describe the communications that occur when one dying person asks another to bear witness, to stand by them and accompany them to the moment when life is no longer. The helper is then transformed and lives anew. The wounded helper becomes somehow more alive.

Health care professionals will be reminded of the ways in which bearing witness to the suffering of others can bring healing to the care provider. The author does a remarkable job describing states of illness, helplessness, fear, and the desire to let go. These descriptions are gifts to the reader. This book appears to be improbable when one starts reading and then takes the reader to a deep place of connection, love, and transformation. Working in health care can also have just such an effect. You really do not know what a patient may bring to you, what amazing gift and story individual might relay to you. Stephanie Williams has given us a fine first novel. I hope the Sandman has been kind and generous to her.

### The Family Tree

by Carol Cadwalladr, New York, Penguin, 2005, 400 pages, \$23.95

### Annette Matthews, M.D.

I know of no way of reviewing a novel without giving some part of it away. So here is the bottom line, before the others: I think this is a good summer novel; many characters are introduced early, which can be confusing, but if you wait it out, it is worth the effort, and you will understand. Ultimately the novel is about biology, mental health, and being a grown-up. I have probably already given away too much information . . . but now I can explicate without guilt.

The Family Tree, by Carol Cadwalladr, is set in Britain. Its chapters alternate between the present and the past, and between exploration of what it means to be family in terms of developmental family relationships and in terms of biology. Ultimately it is about family secrets, such as bipolar disorder, Alzheimer's disease, and whom you have slept with. Ultimately it is about developing oneself into an adult and the reality that, no matter what history or biology has contributed to our development, we have to live in the present.

The protagonist is Rebecca Monroe. In the chapters that trace her growing up, we learn with Rebecca about her family, one character at a time. Her companion in discovery is her sister Tiffany. Throughout the book these characters bring an entertaining concreteness to everything from their understanding of sex to what it means for their grandmother to live in a "home" because of dementia. They provide entertaining commentary on the mystical behaviors of adults as seen through the eyes of children, and the mystical behaviors of family as seen through the eyes of other family members.

In the chapters about the future, Rebecca negotiates her relationship with her husband, Alister. Alister is a behavioral geneticist and is por-

Dr. Matthews is affiliated with the Portland Veterans Affairs Medical Center, Vancouver Division.

in the Wright home. Through the nar-

rator's keen and compassionate eye

for motivation, character, and rela-

tionship, we come to know the

Wrights, their hoped-for places, their

sins, and their graces. As Jonah Boyd

says of his novel, "It's about the Apol-

lonian desire to touch the sun and the

forces that seek to suppress it, to push

us earthwards." And so it is. And

trayed, as an adult, as someone who is as concrete as Rebecca and Tiffany were as children. His concreteness arises from his portrayal of relationships as deriving from genetics.

Later in the book the chapters shift from childhood to adulthood to just some of the tasks of adulthood: discovering who our family is and what their secrets are, discovering who our partners are and what their secrets might be, and that encounter with life and the eventual death that we all face.

The Family Tree is Cadwalladr's first novel. Like many first authors, she introduces many new characters early, perhaps in an effort to make the story richer. Confusing as this can be, it may be a calculated risk on her part. To her credit, she does resolve the issues with the side characters in the second half of the book, which is where the denouement lies. That said, there is no doubt that Cadwalladr has a great novelistic future ahead of her, and this book makes a highly entertaining summer read.

Brain Work: Stories

about how we get by anyway.

by Michael Guista; Boston, Mariner/ Houghton Mifflin Company, 2005, 208 pages, \$12 softcover

### Richard E. Kellogg

Brain Work: Stories, a collection of 14 short stories, is Michael Guista's first fictional work. Guista was the winner of the 2004 Katharine Bakeless Nason Prize for Fiction awarded by Middlebury College and the Bread Loaf Writer's Conference. In this book he explores the regions of ambiguity and perception that permeate the mental and physical lives of the many characters introduced in these stories.

Guista looks at many types of relationships: between a psychiatrist and a patient, a husband and wife, parents and children, and a teacher and his students. His subject matter is human relations—self to others and self to self. The "brain work" of the characters is visible to the reader through a narrative sharing of the characters' inner lives. The author's writing style is somewhat dispassionate; his language simply and effectively supports the complexity of his subject matter.

The first story is "Filling the Spaces Between Us." On the surface, it concerns the relationship between a psychiatrist and his wife. The psychiatrist is the narrator. His wife, a horse lover, suffers a brain injury while caring for their horses. As the story progresses the reader may find a subtle shift in

### The Body of Jonah Boyd

by David Leavitt; New York, Bloomsbury, 2004, 224 pages, \$23.95

### Stephen Jarvis, M.D.

We strive for our place in creation, a space, an identity, an achievement that helps lift us beyond the mundane and the dangerous. But the ambition to obtain and maintain our place requires an attention and struggle that pulls us away from the very transcendence and bliss that our space was to provide. And in our struggles we at times forfeit our truest places, or force those we love to forfeit theirs, and we crash.

These are the themes I discovered in my reading of The Body of Jonah Boyd, along with destiny, legitimacy, the co-creative nature of narrative, the poverty of pretense, love as bestowal, the nature of inspiration, the destructive or saving power of the imagination, and the role of usurpers. Along the way there is sensitively presented an intimate pageant of oedipal reenactments, small shops in Venice, draft dodgers, cars that won't run backwards, hot air balloons as flying beds of love, murderers, lost children, astute secretaries and oblivious Freudians, and the besieged Madame Carcas throwing her squealing medieval pig over fortress walls.

Something that is the body of Jonah

like that reluctant prophet or red kryptonite, to have metamorphic consequences for all of those involved. The something that is "Boyd's body" is his talismanic-almost-to-be-finished-novel. Like Mozart's scores, the novel is composed in elegant unedited handwriting, contained in four Venetianmade journals, which in and of themselves are evocative of Renaissance beauty and proportion. In his love, Boyd carries them everywhere. In his love, he is losing them everywhere. After once again losing and finding his novel, Boyd and his wife arrive late to the home of Ernest Wright, a Freudian psychologist and professor. Boyd gives a reading to Wright and his family from the novel that is to lift into flight his upuntil-now grounded career as an author. Beginning with the phrase "to make love in a balloon," he entrances his small audience with his descriptions of things he has never seen nor done. But the balloon has to come down, and the next day Boyd once again loses the novel, this time for good.

is sure to be swallowed into a dark

place, only to be coughed up, and then,

What happens to the lost novel, and how it reshapes the destinies of those around it, becomes the plot of the book as told through the voice of Denny, Dr. Wright's secretary, who becomes a part of the Wright family but silently yearns to belong forever

Mr. Kellogg is director of communitybased care services and state facilities and interim director of the New Hampshire Office of Medicaid Business and Policy.

Dr. Jarvis is vice-chair in the department of psychiatry of the University of Missouri Kansas School of Medicine in Kansas Citu.

what the story is about—or not about. The meaning of love and the experience of despair may be at the heart of this story, yet a question of one's relationship with one's self lingers. The soul of the psychiatrist appears to be up for grabs.

"Down to the Roots" is about a mother, a father, and their two young sons. The family is struggling, and the father is an alcoholic. There is a rhythm to this story like a classic blues song: you have a feeling you know what the resolution or turnaround is going to be, yet there is an element of revelation when you get there. The story includes an act of violence that resolves in an ambiguous manner, leaving the reader to reflect on the meaning of the transpired act and the possible reason for it.

The final story, "The Year of Release," involves an English professor with Tourette's syndrome. It is about

the relationship between the professor and a standout student who experiences increasingly debilitating epileptic seizures. Both characters engage in a give-and-take dialogue about contradictions, with the class serving as a stage and the other students as an audience of sorts. Eventually the student undergoes treatment that extracts the richness of thought and assertion that attracted the attention of the professor in the first place. The question of the value and quality of life is raised, and who is to judge?

I would recommend *Brain Work:* Stories to readers of *Psychiatric Services* on the basis of its subject matter and professional bent as well as the quality of the writing. The book is especially recommended to those who work with large numbers of long-term patients with treatment-refractory illness.

breast cancer at the age of 59 is coming to terms with her fading beauty and embracing a simpler, less complicated life. She provides an example of living less critically and more generously. She perhaps foreshadows Rachel's own future of learning to forgive oneself while living a kinder, gentler life.

This chaotic story is told with tenderness and humor, and without judgment. Although some characters receive more attention than others, all have full and robust traits that will pique the reader's interest. Glatt's prose is authentic and pure. The structure, however, is rough at times, with a lot of back and forth between different characters' stories and between past and present tense. The ending is appropriately vague, leaving the reader unsure of whether Rachel will find that "real love" she seeks. The uncertainty is just right; the reader wouldn't want it any other way.

### A Girl Becomes a Comma Like That

by Lisa Glatt; New York, Simon & Schuster, 2004, 290 pages, \$22

#### Kathleen Biebel, Ph.D.

isa Glatt's debut novel, A Girl Be-Lomes a Comma Like That, tackles the complexities of women's relationships with friends and family, their bodies, and themselves. Rachel Spark, a 30-something university poetry teacher, is the "girl" looking for love and meaning in a life burdened by having to care for her sick mother, in between her sexual encounters with various unsuitable men. Rachel is constantly looking for something she can't seem to find. "If I slept only with men who knew my full name, if I signed up for dance classes, if I ate more fruit—even then there was no guarantee I'd get what I wanted."

Rachel tells her story in a first-person account while intertwining thirdperson accounts of three other young women: Rachel's best friend Angela Burrows, a socially inept young woman who suffers from mysterious allergies and chases men she can't quite seem to capture; Ella Bloom, an adult student in Rachel's poetry class who discovers her new husband is having an affair with a coworker; and Georgia Carter, a promiscuous 16-year-old who is a regular client of the Planned Parenthood clinic where Ella works and where Rachel has an abortion.

What connects these women is exactly what keeps them apart from each other and everybody else. They share a common loneliness they try to fill with sex. As the title indicates, "A girl becomes a comma like that, with wrong boy after wrong boy; she becomes a pause, something quick before the real love." Each woman craves authentic love that she cannot, or will not, allow herself to experience.

Juxtaposed against these women is Rachel's mother, who while dying of

### Dialogues

by Stephen Spignesi; New York, Bantam, 2005, 368 pages, \$23

#### Eben L. McClenahan, M.D., M.S.

With Dialogues, Stephen Spignesi makes his novel debut. Spignesi has authored more than three dozen nonfiction anthologies with such varied topics as Stephen King, the Beatles, the Titanic, J.F.K., UFOs, Robin Williams, jewelry, and films. He stated that he felt a strong impetus to write this psychological mystery over a period of six weeks, during which he suspended his usual work.

The story begins with the first of several dialogues between the protagonist, Tory Troy, and her psychiatrist, Dr. Bexley, hired by the court system to evaluate her competence to stand

Dr. Biebel is research assistant professor of psychiatry at the Center for Mental Health Services Research of the University of Massachusetts Medical School in Worcester.

Dr. McClenahan is assistant professor of clinical psychiatry at Tulane University School of Medicine in New Orleans and medical director of region 3 of the office of mental health, Louisiana State Department of Health and Hospitals.

trial. She has been accused of murdering six coworkers at an animal shelter, where she was a euthanasia technician. The plot continues through a series of dialogues, including those between Bexley and each of Troy's parents, Bexley and the defense attorney, Troy and a priest, jury members among themselves, Troy and a psychiatric nurse whom she befriends, and two corrections officers inspecting pancuronium bromide and other chemicals held in stock for lethal injection. By means of these dialogues, Spignesi quickly engrosses the reader. He leaves one grappling with confounding intertwined uncertainties ensuing toward a climax that possesses a quality of legerdemain, a literary trompe l'oeil. Of course, I may not divulge the conclusion. I can, however, guarantee that, until the final 15 pages have been read, the reader will be altogether unable to discern the outcome.

I would be interested to know what my colleagues in forensic neuropsy-

chiatry would think about this book. Troy, a college graduate with a Mensa IQ, reads James Joyce's Ulysses while confined to the psychiatric facility. She had lost her job in pharmaceutical sales because the company switched to marketing via the Internet. She thought working at the shelter would be rewarding because of her love of animals. We also learn that she has a history of childhood sexual and physical abuse. One gains a few additional glimpses into her psyche by way of some of her poems and short stories. Spignesi depicts Bexley as a deft psychiatrist who maintains good reflective listening and appropriate therapeutic neutrality throughout his encounters with Troy, notwithstanding her frequent sarcasm. Up until the very last few pages, the reader continues puzzling as to why indeed Troy might commit such a ghastly crime. I quite readily recommend this thriller and look forward to other fictional works by Spignesi in this genre.

## The Number We End Up With

by Beth Goldner; New York, Counterpoint, 2005, 288 pages, \$24

### Katherine M. Napalinga, M.D.

Tave you ever wished someone Hyou loved would die?" "Have you ever cheated on your husband?" "Is it possible to love two people at the same time?" Anjou Lovett, a 30something obsessive-compulsive enumerator, tries to make sense of her topsy-turvy life by injecting such questions at the end of her census form. Periodically deserted by a philandering father when she was growing up in Glyn Neath, "a time-encapsulated hamlet outside Philadelphia," she repeatedly experiences loss in the abandonment of an unfaithful lover. his death, her mother's death, and, with the unraveling of her own sanity, the loss of her job.

Anjou also finds comfort in crunch-

Dr. Napalinga is the assistant chief resident in psychiatry at the Albert Einstein Medical Center in Philadelphia.

ing numbers. Accounting for all her gains and losses, she notes that her father's phone will ring as few as seven but as many as 30 times before he picks up, that it is 17 years since they have spoken to each other, that it is eight years since her sister has moved away with her husband, that she has loved two men wholeheartedly and desperately, and that she has had three close friends, including her dog. She stops counting for only one person, her married lover, saying, "In the three-dimensional presence Quinn's spiraling and buzzing mind, I didn't need numbers." But her psychiatrist isn't impressed, saying, "What do you want, Anjou?" Anjou admits that she isn't getting what she wanted, but "love is devastating by nature." In the end, Anjou finds her own peace with the help of friends and family as well as the courage to

confront the sources of her conflicts.

Philadelphian Beth Goldner gives a bittersweet take on loss, infidelity, sorrow, grief, and healing. Philadelphia residents get an extra added bonus of familiar scenes from the city as well as the small, quiet "hamlets" that surround it. One cannot help but feel for Anjou as she tries to keep afloat in her sea of grief, insecurity, and crazy behavior and later in her search for forgiveness and acceptance. The supporting characters also make the universality of loss more tangible. In a seemingly peaceful town, each home reveals its own sense of loss and the ways in which this has been endured or resolved.

The fact that Anjou sees a psychiatrist seems incidental, despite Goldner's experience writing for a medical journal. All we know about David is that he is 32 years old, will not disclose personal information, and—as revealed later in the book—might have given Anjou a misdiagnosis. However, the course of events may open one's mind to how a similar situation can be handled in real life and how we as clinicians can open our doors wider to our grieving patients to make them realize that we can be part of their quest for answers, their sense of self, and, most of all, their healing and growth. The book can also be recommended for patients who have experienced grief and loss in their lives, and Anjou's questions could spur interesting discussions.

### A Brief Lunacy

by Cynthia Thayer; Chapel Hill, North Carolina, Algonquin Books, 2005, 241 pages, \$22.95

### Mark H. Backlund, M.D.

Both cliffhangers and "interior" stream-of-consciousness novels can tell a story that spans an hour or a day. Cynthia Thayer has combined both in *A Brief Lunacy*, a 24-hour

Dr. Backlund is a psychiatrist at Compass Health and is in private practice in Mount Vernon, Washington. look at a day like no other in the life of Jessie and Carl Jensen.

Carl, a retired orthopedic surgeon, and Jessie, a retired teacher, live amiably enough in rural Maine, painting still lifes, knitting, house mending, and pondering the lives of their grown children and the seagulls outside. He is loving, competent, and commonsensical but harbors a traumatic past in Nazi Germany, which he never discusses. She is also loving, is a ruminator, and leans on Carl as "Mr. Fix-it." Neither love nor a handyman, however, has been able to "fix" their mentally ill daughter, Sylvie, who is alternately childishly loving and spouting venomous rage.

In an unexpected phone message, Sylvie announces she is leaving the family home and hitchhiking to South Dakota for no apparent reason. "And guess what," she adds, "there's a guy here in the loony bin who loves me." Through flashbacks and interior monologues, we learn of the devastating impact of Sylvie's gradual slide into schizophrenia and the source of her parents' immediate angst over her runaway.

Time slows to a crawl, barely disturbed by a nosy neighbor and finally punctuated by a knock on the door. Enter a handsome young man who will bring about irrevocable and terrifying changes over the next 20 hours.

The identity of this individual, "Jonah," and the effect of the self-declared "mission" he imposes on Carl and Jessie drive them through a life-changing transformation. The two discover barely imagined facets of themselves, deeper truths about Carl's ordeal in Nazi Germany, the strength of Jessie's character, and the power of self-deception.

Thayer does a remarkable job of interweaving plot and character development and gives a credible portrayal of mental illness, traumatic stress, the uncertainty of our inner world, and the puzzle of motives that drive our choices and therefore our lives. And she keeps us close to the edges of our chairs as the ordeal unfolds up to the denouement. Her characters are both internally consistent and able to develop and evolve through the crucible of their torment. The extraneous is melted away, and the truths at the core are exposed.

Although the book is dedicated to "the memory of the thousands of Roma, taken in the night from the Gypsy camp at Auschwitz-Birkenau," it is equally an homage to the tyranny of mental illness. Anyone whose life has been touched by mental illness, as well as readers who just fancy a good psychological thriller, will find ample sustenance on which to chew.

### All That Matters: A Novel

by Jan Goldstein; New York, Hyperion, 2004, 208 pages, \$17.95

#### Lorrie Garces, M.D.

an Goldstein, an ordained rabbi who has contributed to the world of self-help literature, takes on the "feel-good" novel with his latest project, *All That Matters: A Novel.* It is interesting that he has inserted that subtitle, because this book frequently feels more like a parable intended to reinforce messages from his earlier writings than a novel.

Dr. Garces is a community psychiatry fellow at the University of Florida in Gainesville.

We first encounter the main character, Jennifer, on Venice Beach after an attempted overdose. We quickly learn that she has been experiencing depression for several years after her mother died as a result of being hit by a drunk driver and the subsequent immersion of her father into his movie-producing career and new marriage. She has also gone through a painful breakup. However, the pivotal character is Jennifer's Jewish grandmother, Gabby, from whom Jennifer has been estranged for several years.

Gabby, in poor physical health with end-stage chronic obstructive pulmonary disease, flies from her home in New York to Los Angeles when she hears about Jennifer's overdose in order to try to provide some support.

This book is, in a sense, all about Gabby's ability to provide lay therapy for Jennifer by teaching her about the importance of love and family. Gabby's eccentric and likeable character is probably the most successful thing about the book. Whether you are able to engage with this message, however, will depend on whether you can tolerate the fact that Goldstein has turned everything else in Jennifer's life into a caricatured cliché. The "big-shot" psychologist her grandmother arranges for her to see in New York is more worried about his book signings than Jennifer's mental health. The boyfriend who recently broke up with her is described as "the white knight of her childhood fairy tales, the prince she long dreamed would rescue her from a life she had no wish to live." Her father, an easily agitated Hollywood workaholic, is now married to "Ms. Beverly Hills Aerobics" and is observed at one point "muttering and shifting in his seat like a kid off of Ritalin."

Gabby's retelling of her experience as a Holocaust survivor is a crucial part of the story that appears to have the greatest impact on Jennifer's recovery. In fact, when we are able to see where Gabby's character has come from and understand her core strength and survival instinct, we feel the undercurrent and excitement of character development for the first time. Unfortunately, Jennifer's development is so superficial that when we reach the final emotional climax of the story, the transformation seems over the top and too facile.

This book is an extremely fast read, with brief, rapidly paced chapters. A remarkable amount of territory is covered given the book's length, including a new love interest for Jennifer, who is mentioned only twice but talks about their future together. As a result, almost everything stays superficial because of the structural constraints—which seems to be a dis-

service both to the reader and to Gabby's character. I suspect there is a specific audience who will be willing to ignore the deficits in plot and character for a "feel-good" story. However, for many in the mental

health field, Gabby's message may resonate individually, whereas the depiction of clinical depression, the psychosocial environment, and character structure will fall significantly short of expectations. tions of hurtful realities, and the dimensions of their resilience, this book will be of considerable interest to psychiatrists and could provide excellent material for clinical training.

### The Lost Mother

by Mary McGarry Morris; New York, Viking, 2005, 274 pages, \$23.95

### Harriet P. Lefley, Ph.D.

A New York Times critic has called Mary McGarry Morris one of the most skillful writers in America today. Her work has been compared to that of John Steinbeck and Carson McCullers. Like the works of these authors, The Lost Mother is set in the great depression of the 1930s. It was a time when there were no jobs, no government welfare, and no crop loans. Poverty and hopelessness frayed the threads that held communities together and stressed families to the breaking point.

During these hard times, a mother deserts her family and ceases all contact with her children. Her proud and angry husband, barely able to provide basic sustenance, is determined to raise his children alone and rebuffs offers of help. Living in squalor, the children inevitably blame themselves for the loss of their mother, whom they believe to be good because she is beautiful. The deserting mother becomes idealized, the desperate father demonized.

The mainstay of the novel is a strong brother-sister bond and a father whose fierce love for his children cannot prevent the cruel events that lead to the family's dissolution. The father, unjustly accused of a minor crime, is in jail. The children, aged eight and 12, go looking for their mother with fantasies of happy reunion.

The mother is portrayed as a frightened, dependent woman who

Dr. Lefley is a professor in the department of psychiatry and behavioral sciences at the University of Miami Miller School of

cannot cope with the demands of parenting, nor even of maintaining employment. The thought of reunion with her children is experienced not as joyous, but as threatening to her newfound security as the mistress of a wealthy man. She projects her inadequacies onto her rejected husband. But there is no easy remedy for the anxieties that compel her to sever all connections with her children, whom she clearly once loved. Desperately seeking alternative caregivers, she is willing to place them in an orphanage, have them adopted by others, and never see them again.

This novel will be of particular interest to those who work with children and families. It is exceptional in its depiction of how children interpret adverse events, invent rationales for adult behavior, endure uncertainty, and erect protective shields of silence. Unable to distinguish between disclosures that may be harmful or helpful, they deliberately withhold information that may be essential to their cause. They continue to fantasize that the lost mother will redeem their lives and forgive the deficiencies that led to their rejection. Yet from their ability to overcome unimaginable hardships, from near starvation to serial betrayals by adults, we see the adaptive strengths of children who share a sibling bond and have been nourished by the love of at least one parent.

This is a story rich in psychological insights. In portraying the trauma of child abandonment, the texture of parental anxieties, children's magical attributions and unique reconstruc-

### Rage

by Jonathan Kellerman; New York, Ballantine, 2005, 384 pages, \$26.95

#### Lee Combrinck-Graham, M.D.

Tonathan Kellerman is a respected psychologist who first came to my attention in the 1970s when I read some of his research in pediatric oncology. I so admired his work that, I admit, I was disappointed when I learned he was writing mystery stories.

That I haven't read many of Kellerman's 23 novels speaks mostly to my own taste in mysteries, but also to their disappointing lightness. The novels may be more saleable this way, but ultimately, for a child and adolescent psychiatrist like myself, *Rage* is too contrived and, finally—sad to say—not that interesting. In contrast are the psychologically complex characters and plots of Laurie King, P. D. James, and Karin Fossum—oops, all women.

Kellerman's formula characters include Alex Delaware, the forensic psychologist who is divorced and romantically involved with a clinical psychologist. The two have long separations that give him time to work night and day, intense romantic moments, and a traumatic intertwining of his work and hers. The formula for such independent gumshoes doesn't allow for a stable partner—for example, Robert Crais's Elvis Cole, Michael Connelly's Harry Bosch, and Henning Mankell's Kurt Wallender. The next formula character is the fat, self-indulgent sidekick. In Rage, this is Milo. He is huge and has prodigious appetites for fatty foods and liquor. Milo's appetites are connected with many consultations in restaurants in

Dr. Combrinck-Graham is associate clinical professor at the Yale Child Study Center in Stamford, Connecticut.

the Los Angeles area, whose specialty foods are deliciously described in the book. Hard-eating, hard-drinking detectives are found in J. D. Wingfield's Jack Frost and in Clint, the ex-cop colleague of James Lee Burke's Dave Robicheaux. Of course, the refinement of the gourmand extraordinaire, Nero Wolfe, is in stark contrast to these rough, rowdy, and lewd fellows.

Remember the shocking murder of a little boy by two ten-year-olds in England a few years ago, and the two young boys who dropped a little boy out of the window of a high-rise in Chicago? At the beginning of this story it looks as if Kellerman will explore the motivations of the two young perpetrators of the abduction and murder of a two-year-old girl. One is mentally retarded, and the other has a transient life with inconsistent caretaking. However, the motives of these two young killers quickly recede into

the background of a plot with twists and turns around the other characters in the drama of the murdered girl, her parents, two religious counselors, and the attorneys involved in defending the youngsters. In the end the boys' crime is really the fuse leading to a bomb that fizzles in its convoluted logic.

For mystery writing that describes refinements of eating, I would recommend Donna Leone, whose Guido Brunetti eats lunch with his wife and children almost every day. For descriptions of marital harmony, cheerful support, and sometimes hilarious engagement by the distaff, I recommend Reginald Hill. And for a penetrating presentation of the developmental, social, and psychological underpinnings of criminals and those children who remain in their thrall, I would suggest the incomparable Minette Walters.

### People I Wanted to Be: Short Stories

by Gina Ochsner; Boston, Houghton Mifflin Company, 2005, 192 pages, \$12 softcover

### Marcia L. Zuckerman, M.D.

Gina Ochsner's collection of 11 Short stories, People I Wanted to Be, was much anticipated. The author's first collection of stories, The Necessary Grace to Fall (2002), won a number of awards, including the Flannery O'Connor Award for Short Fiction. Her stories have been published widely, including in the New Yorker, The Best American Nonrequired Reading, and the Kenyon Review.

Ochsner brings a number of strengths to her writing. Interested in Eastern Europe and Slavic culture, she very credibly sets many of the stories overseas, or peoples them with immigrants from faraway places. She also has a sense of humor. One of the stories in this new collection, "A Blessing," concerns a run of remark-

Dr. Zuckerman is clinical psychiatrist at the Cambridge Health Alliance in Cambridge, Massachusetts, and associate editor of The Carlat Report. able luck that visits a couple from Siberia who have emigrated to Oregon. "First came a dozen roses meant for a woman at the end of the hall who had moved away but left no forwarding address. On another day, a man in a brown uniform delivered an enormous basket filled with pears and apples and chocolate from secret admirers, 'Harry and David.' 'Who's Harry? Who's David?' Vera asked Nikolai, showing him the baskets stuffed with Anjou and Bosc pears."

And she has a good ear for language, as well as a knack for providing quirky details about even her minor characters. The narrator of "The Fractious South," who lost his father to the Soviet war in Afghanistan, and who will himself be the only one of his schoolmates to come back from the Chechen conflict, says, "Part of being invisible is being quiet, so if any of this bothered us, we didn't complain. Except Grandpa Ilya, who

grumbled that all the dust and the noise had completely unnerved the fish." In "A Darkness Held," Imogene McCrary fills in for the dying nun whose austere teaching had made her miserable as a girl. When she tells her students that Sister Clement has passed away, one of them asks, "Is this going to be on a test? Because that's not an essential mystery, and today is Wednesday, and we always talk about essential mysteries on Wednesdays."

Many of the stories involve ghostly presences or near-magical occurrences. This approach works well in some stories, such as "From the Fourth Row," in which the narrator, a lonely illustrator of advertisements in a Prague marketing firm, suffers increasingly sharp invectives from the characters he's created. On the other hand, "The Hurler" comes across as heavy handed when the narrator builds a contraption to rid herself of her dead parents' junk—starting with Ferdinand, the stuffed pet hedgehog, "who'd quilled me many times when I was a girl for no good reason"—and ultimately hurls away her own heart.

The weakness in Ochsner's work is really in the tales themselves. After she skillfully draws her characters and puts them in interesting places, she often doesn't do much with them. Fans of James Joyce may find this style to their liking, but I hope to see Ochsner move on to focus her considerable talent on the story.

### A Seahorse Year

by Stacey D'Erasmo; Boston, Houghton Mifflin, 2004, 368 pages, \$24

### Chuck Joy, M.D.

Thumbs up for this novel about an adolescent boy presenting with severe mental illness and his unconventional family.

That boy is Christopher, age 16, whose prodromal symptoms burst

Dr. Joy is a child and adolescent psychiatrist at Presque Isle Psychiatric Associates in Erie, Pennsylvania. into crisis when he disappears from his home in San Francisco to be located days later in Phoenix, thanks to a benevolent trucker. His illness is indeed severe, characterized by elaborate delusions, and persists through two periods of hospitalization as well as a longer stretch in what seems to be residential treatment.

Christopher's treatment is, however, never really the center of attention, although it is described realistically enough so as to at least not fatally distract a child psychiatrist who may be reading. The author's primary concern is Chris's reality and the realities of his family members and their friends as well as their experiences and the relationships between them.

Specific aspects of treatment are of interest primarily for the glimpse they provide into how the mental health profession appears to an adequately informed author focused on an adolescent patient in the early 21st century. Here neurobiology reigns supreme, with an intense reliance on medication, perhaps appropriate for a boy with such psychotic illness. Nevertheless, psychotherapy barely appears, except occasionally in a supportive sense, and psychiatrists function overtly as psychopharmacologists. Perhaps this is reality. Nevertheless, one may wonder what grist for the therapeutic mill may have been churned for Christopher. He and his family have issues.

The achievement of this book is its

depiction of Chris and his family and their friends—memorable characters, all of them, often perceptive, always human, remarkably sensitive to the nuances of their relationships with each other. Marina, Chris's mother's lover; Hal, his dad, who falls in love with Dan; Nan, Chris's mother; and a deep cast of other characters, finely detailed, including several mental health professionals as well as other patients.

And then there's Chris. With his character, the author, Stacey D'Erasmo, attempted the difficult challenge of creating the individual experience of mental illness—and triumphed. Chris's symptoms are expertly drawn, in all their perplexity and false significance. His dangerousness to others drives the plot to not just one but two wrenching peaks of breathless suspense.

When Chris's delusions enmesh innocent others, the pages fly by. The actions of the characters, in terms of their relationships with each other, are also of interest. There is a modicum of graphic sex. There is little humor. And there is not much deep consideration of certain givens of the characters: their sexuality, their distance from their families, their various relationships to performance. There is a gripping depiction of how one particular family copes bravely with the reality of severe and persistent mental illness. A Seahorse Year is a memorable book. I'm glad I read it. Maggie herself is not so mysterious. Klass tells the story in pieces, weaving together the different but related threads of Maggie's development from a very deprived childhood to her current status as a fiercely devoted neonatologist, her relationships with colleagues and with her husband (an urban doctor who is more inclined to the practical than she is), and her struggles not only with conception but with the conflicts over whether to become a mother.

This book intends to be psychologically astute, and as such it will be of interest for psychiatrists and other mental health professionals. Without spoiling the book for the reader, and therefore without revealing its few surprises, I will say that Klass makes some rather pedestrian connections between her heroine's childhood deprivations and her current adaptation to her role. Maggie Claymore is certainly resilient, but at the cost of some of her authenticity. The only time the reader can be sure that Maggie is living her true self is when she's saving babies, so the smear campaign against her is certainly devastating, aimed right at her heart. Maggie doggedly fights for her good name, which the reader never doubts is entirely deserved. In other aspects of her life, as wife, friend, mentor, and colleague, and even in her dealings with the babies' parents, the good doctor seems internally deficient, going through the motions that to her prove a point about her competence but do not express her essential self.

As a doctor, Klass tackles the often unspoken topic of the relationship between usually female nurses and female doctors. This is a bold move, and one of the more satisfying portrayals in the book. And as a female doctor, Klass does not shrink from another central issue, not just for Maggie Claymore, but for all the Maggie Claymores of the world: What about the children? This theme underlies all Maggie's actions, permeates hospital politics, affected her career choice, and is never out of her mind. Its resolution remains for the reader to discover.

# The Mystery of Breathing

by Perri Klass; Boston, Houghton Mifflin Company, 2004, 344 pages, \$24

Ellen B. Tabor, M.D.

Perri Klass is a well-known pediatrician-author. In *The Mystery of Breathing* she has written a novel that is more than just a mystery.

Dr. Tabor is medical director of the adult inpatient service at Kings County Hospital Center in Brooklyn, New York, and assistant professor of psychiatry at the State University of New York Downstate Medical Center. True, there is a mystery at the heart of the story: Dr. Maggie Claymore, neonatologist extraordinaire, is being vilified at the very hospital where she regularly works miracles, saving impossibly small babies who would not stand a chance of survival in anyone else's hands. And it appears to be an inside job. Who would besmirch the reputation of such a paragon as Maggie?

Readers who work in hospitals—as opposed to relatively private offices—will enjoy the mild frisson of fear that a good mystery brings when contemplating the fact that the hospitals they love can become hostile and threatening. (The exposition of the mystery is revealed

slowly enough that its final revelation is no surprise at all.) And *The Mystery of Breathing*, although "about" a woman doctor, is not just "chick lit." Certainly doctors of all specialties and genders will recognize some of their own issues in Maggie Claymore.

### The Secret Goldfish: Stories

by David Means; New York, HarperCollins, 2004, 211 pages, \$22.95

### Joseph Berger, M.D.

David Means is a well-known short story writer who has been published in the *New Yorker* and other publications. *The Secret Goldfish* is a collection of short stories—and they are certainly unusual.

The first story is of a man who has been struck by lightning on many occasions and has survived; we follow his passage through life as marked by these incidents—from a randy teenager hoping to have sex with his girlfriend to an old man who expects that the eighth lightning episode will be his last (because of course he is not a cat). Surviving these numerous bolts has brought him some local fame, but not fortune. He has drifted into poverty.

In a variation on a Bonnie and Clyde theme, two young people, egged on by a violent third, have been on a killing spree, but the pair are really in an almost constant drug-induced stupor, besotted with each other. We know their own violent end will come soon, but for now their passion renders them oblivious.

A blind man falls down some steps while exiting a bank. Was he pushed? Did he fall deliberately, with suicide intent? Was it an accident that resulted from his pushing away an innocent bystander who intended to help?

A young woman who is abused by her father refuses her lover's plea that she stay the night with him. She insists that she return to her father and

Dr. Berger lives in Downsview, Ontario, Canada.

is killed driving off a bridge in a snowstorm. Was it an accident, or did she decide to end her life?

Of more interest to psychiatrists is a classic case of a conversion symptom experienced by a professional musician that interferes with his career. The author traces back the possible origins of the symptom through an affair the musician has been conducting with a dancer and further back to the musician's wife's discovery of the affair, and her reaction to it.

Some years ago Commentary magazine published a wonderful article by psychoanalyst Allen Wheelis, titled "How People Change." It began with a succinct description of a conversion symptom—Dr. Wheelis and his patient discovering the contributory psychodynamics—leading to relief through relatively brief psychotherapy. Means's writing style—in which one passage after another appears in brackets—comes across as clumsy compared with Wheelis's elegance.

I could not find one likeable character in these stories. They are often drug addicts, heavy smokers, or poor dropouts. One is even the fantasy of a body that has lain in the ground for perhaps hundreds of years. British thriller writers Gerald Seymour and Graham Hurley can powerfully describe the harsh grit and squalor of life while advancing a thoroughly gripping and meaningful plot. Means too often seems to be going nowhere.

However, my wife enjoyed Means's writing. She saw his language as clear

and his "quirky" style as energetic and exciting, even though the stories end badly and nothing could have been done to change that ending.

### The Center of Winter

by Marya Hornbacher; New York, HarperCollins, 2005, 336 pages, \$23.95

#### Sandra Walker, M.D.

When the review copy of this book arrived in the mail, my spirits sank. It arrived at the height of summer. A passage from the book itself somewhat describes my attitude as I approached my reading of it: "I wasn't sure who had died this time, but it was a suicide, and upsetting because it was completely out of season. No one killed themselves in summertime. It was rude." However, I read on.

In The Center of Winter, Marya Hornbacher, author of Wasted: A Memoir of Anorexia and Bulimia, tells several sad stories that emerge from one suicide. These stories are intertwined through the voices of three narrators, who show us loss from the inside out. Kate is six years old when her father, Arnold Schiller, shoots himself in the head on Christmas Day while her 11-year-old brother, Esau, is a resident at a state psychiatric hospital for adults. Their mother, Claire, is left to cope with living, loving, and raising the children. Each of the survivors narrates his experience of reweaving the fabric of life after Arnold's death rips a piece from the center.

Arnold Schiller is depressed and both feeds and soothes his internal demons with alcohol. Esau has bipolar disorder. After Arnold's death, Esau and Kate get drawn into the world of Dale, a neighbor and father whose experiences in Vietnam leave

Dr. Walker is a clinical assistant professor of psychiatry and behavioral sciences at the University of Washington and a member of the faculty of the Seattle Psychoanalytic Society and Institute. a legacy of posttraumatic stress disorder steeped in drinking until it becomes psychosis. He recruits the children in the staging of his final self-directed assault. These illnesses are not the focal point of these stories but, rather, part of the logic and illogic of the lives of people who bear them or can't.

The book is well written. It allows the reader to experience what each narrator experiences in a way that seems genuine. Its imagery is rich so that the novel plays in the imagination like a film. For the clinician, it brings mental illness out of the realm of diagnosis and treatment and into the realm of the experience of people whose lives get caught up in it and who have to go on living their lives despite it.

I let myself get caught up in the book, and I was glad to put it down and go on with living and with working with people whose experiences are in some way like those of Hombacher's Schiller family. I think I gained something by reading *The Center of Winter*, and I recommend it.

healing. Silverman somehow ends up in Toronto, where he has built a voluntary career serving surplus restaurant food to the homeless outside downtown Union Station. Realizing Silverman has saved himself through altruism, Clem says "I need a Canada of my own."

After he returns to Britain, he then goes to take care of his recently discharged sister, a university lecturer recovering from a psychotic breakdown, whom we have met earlier in the book. Drawn less clearly, because we see her though Clem's eyes, her diagnosis is not clear—probably schizophrenia.

This book is full of insights and descriptions of recovery from mental illness and the experience of caregiving. For example, Clem is grateful for the way a family member talks to his sister "as if there was nothing wrong with her at all . . . though he could not yet tell if that was good style or plain ignorance."

Clare is the only one who has received professional care, and mental health professionals are described realistically and positively. General practice psychotherapy comes off particularly well, with astute observations on the therapeutic relationship. "Clem tried to guess what it was that made her [his sister's doctor] someone to whom he immediately wanted to tell everything . . . what was this atmosphere radiating from her skin." He decides "it is the ability innate or learned to take another person's difficulties as seriously as your own."

This book is a timely reminder of the struggles of a neglected group. In contrast to research and help in response to the problems of war veterans, police officers, survivors of motor vehicle accidents, and rape victims, discussing and responding to journalists' psychological reactions to witnessing violence, suffering, and bloodshed is a relatively new phenomenon.

The Dart Centre for Journalism and Traumas at the University of Washington in Seattle was opened in 2000 to educate journalists and editors about trauma issues related to journalism. Roger Simpson (1), its di-

### The Optimists

by Andrew Miller; New York, Harcourt Trade Publishers, 2005, 313 pages, \$24

#### David S. Heath F.R.C.P.

Lature after a day's work in psychiatry, I would normally stay away from the topic of mental illness, and I would certainly avoid grisly subjects like Rwanda. However, two pages into *The Optimists*, I was hooked, aware that I was in the hands of a master prose writer and gladly carried along by the strong narrative thrust.

One is immediately oriented by a quotation on the first page, from the award-winning book *Season of Blood*, about celebrated BBC foreign correspondent Fergal Keane's experiences in Rwanda: "It was unlike any other event I have reported on and in different ways it changed everybody. . . . We had learned something about the soul of man that would leave us with nightmares long into the future."

The main character, Clem Glass, is a top British photojournalist who has just returned to London deeply traumatized by his experiences in Rwanda, and the reader sees the world through his eyes. This gives the book a feeling of ironic, at times humorous, detachment, and we also vicariously see with his original, visual creative sense. His psychological struggles, the various settings, and his sister's mental illness are all described with some of the freshest most piquant prose I have ever read. I was not surprised to read that Miller's first book, *Ingenious Pain*, won the prestigious International IMPAC Dublin Literary Award in 1997.

All the signs and symptoms of post-traumatic stress disorder (PTSD) are there, but they are described with such an original sparkling light touch that the book never reads like a case history: for *DSM-IV*'s "numbing of general responsiveness," substitute "his heart had locked fast the night he had straddled the dead with his lenses."

The narrative thrust is provided by one's quick engagement with Clem's predicament: how is he going to get himself out of this mess? Because of this character's interesting occupation, and because he is drawn sympathetically, we eagerly follow his attempts, sometimes tinged with humor, to repair his shattered life. He tries frequenting movie theaters in the afternoon, seeing an old flame, having sex with a prostitute, and drinking.

It is only after he visits a fellow journalist who was with him in Rwanda, an American named Silverman, that he gets onto the right path to

Dr. Heath is a psychiatrist in Waterloo, Ontario, Canada.

rector, attributes reluctance to talk about PTSD in the profession to the "culture of journalism": a combination of reporters' desire to be objective and uninvolved emotionally, some machismo, and the fear of editors' reprisal if the reporter admits to having a problem.

Novels can be used to shed a distinct light on the human mind and its

problems. This one is likely to be particularly convincing in illuminating a neglected area but also has much to teach us about mental illness in general.

### Reference

 McLaughlin C: Stage 3-Interviews Refugees Related Issue, Post-Traumatic Stress Disorder. Available at www.columbia.edu/itc/journalism/nelson/rhode/refugees\_stress.html etic passages, even about seemingly ordinary things, such as harvesting honey. It is a pleasant, enjoyable, and recommended read for long winter evenings. I hope and bet that even hard-core fans of Doyle's original Sherlock Holmes will enjoy it as much as I did.

# A Slight Trick of the Mind

by Mitch Cullin; New York, Doubleday, 2005, 272 pages, \$23.95

Richard Balon, M.D.

Vague memories of reading Sherlock Holmes stories in my youth made me a bit hesitant to read a Sherlock Holmes story written by someone other than Sir Arthur Conan Doyle. I was thinking, How can a young American write a new story of Sherlock Holmes, an iconic figure of mystery literature lovers? How real and credible could that be? As it happens, Mitch Cullin, who has written six other novels, has written a fairly authentic novel about Sherlock Holmes, living, at the twilight of his life, in post–World War II rural England.

The book intertwines three story lines. The first begins as the 93-year-old Sherlock Holmes returns from a trip to postwar Japan. His household is run by a widow whose young son, Roger, takes care of Holmes's beloved apiary. Holmes, who does not have a child, develops a paternal affection for this intelligent, caring, and respectful fatherless boy. They share a passion for bees, and Holmes teaches Roger everything about beekeeping and the mysterious life of bees.

The second story line involves an unknown Holmes case from the early 1900s. It is a sad story of "The Glass Armonicist"—Mrs. Ann Keller, with whom Holmes was seemingly infatuated. It is also the first case undertaken by Holmes himself, while his part-

Dr. Balon is professor of psychiatry at Wayne State University School of Medicine in Detroit, Michigan.

ner, Dr. Watson, was "lazing at the seaside with the woman who would soon become the third Mrs. Watson." Unknown to Holmes, young Roger is secretly reading the story as Holmes is trying to finish it.

The last story line deals with Holmes's visit to 1947 Japan. He is invited by a Japanese admirer, Mr. Umezaki. While they travel around, visiting, among other places, harrowed postwar Hiroshima, it becomes evident that Mr. Umezaki had an ulterior motive in inviting Holmes to Japan. He wants to find out what happened to his long-missing father, a Japanese diplomat. All three story lines come to a surprising end, which I won't reveal here.

Cullin brings us a loving portrait of an old and frail detective whose memory and mental acuity are slowly fading—a result, as Holmes worries, "of changes in his frontal lobe due to aging—how else could one explain why some memories stayed intact, while others were substantially impaired?" The Holmes of this book is a man contemplating his life, his image of a "man incapable of feelings"—a perception he believes to be his fault. However, through these three intertwined stories, Holmes becomes a more caring, thoughtful human being.

A Slight Trick of the Mind is a moving depiction not only of aging and age-related mental changes but also of the reflective nature of old age. It is beautifully written, with many po-

### **Oblivion**

by Peter Abrahams; New York, HarperCollins, 2005, 352 pages, \$24.95

#### Alan D. Schmetzer, M.D.

The main character in this detective story, or psychological thriller, is Nick Petrov, a former police detective turned private investigator. The story begins as Petrov concludes his testimony in a trial. His expertise is finding missing people, especially children. Exiting the courtroom, he is retained to find a missing teenaged girl, and for the first eight chapters we follow his methodical sleuthing.

Petrov is bright and meticulously organized—he carries a three-dimensional map in his head. He has classified human expressions into 93 distinct entities, which he can describe by both name and number. He takes all his notes in code. And he actually finds the missing daughter over the course of what becomes a "Lost Weekend," the name of the first segment of the book.

But just as he is trying to get medical attention for this supposedly lost girl and get her home, he has a seizure, which immediately brings the reader to part 2, "Brain Work." It turns out the seizure is due to a cerebrovascular event coupled with a brain tumor. Because of ensuing amnesia, Nick has to try to figure out what he's been working on, what he has found, and what it all means. But he can no longer recall the code he used to take his notes. In an instant, Nick is transformed from a typical hardboiled detective "super-

Dr. Schmetzer is professor and assistant chair for medicine in the department of psychiatry at the Indiana University School of Medicine in Indianapolis. hero" into an invalid, struggling to exercise his body, especially his damaged brain. But interestingly, Nick finds that his symptoms bring some new strengths. He certainly seems like a nicer person—which the reader can infer through the book's piecemeal revelation of his past. He begins a new relationship with his son—he had been distant, like his own father was, and a divorce didn't help—and discovers ways of being more open in his interactions with others.

The author paints a picture of brain damage from stroke and tumors that creates awfully convenient moments of weakness and strength. But the tale itself is well paced, and the characters and their relationships are interestingly drawn. Old cases are revealed, and one of them has a strong connection to the current investigation. This link and its implications are the main subject of the third and final part of the book—given the politically incorrect title of "Retards Picnic."

Overall, *Oblivion* is well written, entertaining, and suitable for any mental health professional who likes such mystery thrillers. The main characters have both strengths and flaws, like real people. Plenty of action is mixed in with the human journey of a man who has a terminal illness and a past of which, as the "new" Nick, he isn't always very proud.

### The Position

by Meg Wolitzer; New York, Scribner, 2005, 307 pages, \$24

### Suzane Renaud, M.D.

couple sprung from the 1960s, Acontent lovers still enjoying discovering their sex life despite being parents of four children, have written a book with "nerve and arrogance" about their favorite sexual positions, complete with explicit drawings of the pair making love. Does the title of this novel refer solely to a sexual position, the product of a couple's erotic imagination? Or is it a psychological position on what to reveal to children about their parents' sexuality? Or a romantic position on sexual politics in the 1970s, with an analysis of its consequences for the next generation? Or a description of the erosion of love?

Unaware at first of the couple's narcissistic issues, we discover that their book brings fame and exposition to their bedroom life, thus contributing to its downfall. This is a forbidden pair, blossomed out of the meeting of a trainee analyst and a beautiful analysand, both all too eager to engage in the quiet revolution of mores and lifestyle that the 1970s promised. But we read mostly about their four

children, between the ages of six and 15, who are passively invited to discover the book, located on a high shelf in the family's library. The viewing of the primal scene in all its splendor, as well as its traumatizing effects, is developed in this romantic web.

The children will indeed lose their childhood naivete and react to the parental exhibition in their own ways. Holly, at the age of 15, will act it out like an incest victim or a shameful derelict. Michael, in the throes of depression in his 30s, will struggle with intimacy. Dashiel will attempt to socially assume his homosexuality. And Claudia, the baby girl, will simply decide to shun a genitalized life . . . until she goes back to film the scene of the crime in that very suburban Wontauket, Long Island, where ordinary life, with its tragedies and wonders, went on.

This fiction depicts the dire consequences of sexual openness on the prematurely exposed children and thus on the next generation. It is also about a couple's inter-exploitativeness and the emotional neglect of their children. The book falls short of the psychodynamic knowledge that an informed mental health clinician would find obvious and might wish to see

considered. It is nevertheless an astute and intuitive rendition of the exposure of the primal scene onto the children's psyche, a traumatic event causing shame and inhibition. The novel also flirts with other themes dear to the psychiatrist's heart, such as family life on asylum grounds, supervisor-supervisee issues of power, breaching of boundaries, and the benefits and side effects of antidepressants—enough to titillate us into reading it. And there is even more to surprise us in terms of the identity of the pilfering and victorious observer of this primal scene.

Various sexual revolution by-products are thus exemplified, such as the difficulty of adjusting the light and free sexuality of the 1970s to today's context, the strange matching of gayness with republican politics, and interethnic love for the not so beautiful—themes explored in a circumvoluted drama evolving in a nicely unfolding plot.

The writing is rich, so much so that one has to savor it slowly to pick up the intense sensual descriptions. Evocative and funny, Wolitzer's novel is a shrewd description of life in the suburbs in different corners of the United States, a tribute to life itself when one does pay close attention to one's senses and events relative to love and its decay. The Position sometimes falls short of providing us with the pleasures of the author's usually witty observations, sensual descriptions, and thoughtful explanations when it comes to sexuality, the central theme of the book. As psychologically minded voyeurs, we might have wanted more.

Author of *Sleepwalking*, and *Surrender*, *Dorothy*, Meg Wolitzer became better known with *The Wife*, published in 2003, and *This is Your Life* which was made into a movie. *The Wife* and *The Position* share common family dynamics. Wolitzer will probably get to be known more and more.

### **BRIEF REVIEWS**

♦ The characters in *Calamity and Other Stories*, a collection of 12 short stories by Daphne Kalotay (New York, Doubleday, 2005) appear from story to

Dr. Renaud lives in Montreal, Quebec,

story, at various phases in their lives, interacting with circumstances and with each other. The events take place in and around Boston, the author's home. The characters live through the affairs, divorces, remarriages, and relocations of their parents. Their parents worry about them. They go to school and university. They have barbecues and go to summer homes. They receive advice and absorb, follow, and ignore it. They find their own mates, right or wrong. They are neither evil nor saintly; their desires and foibles are common ones. Several of the stories are written in the first person, but the first person varies from story to story. Never having been an adolescent boy, I cannot attest to the accuracy of a first-person account of male puberty, but this one seems to make sense despite its being written by a woman. These stories are very short and might be better described as vignettes. They capture a time, an episode, in ordinary life, but they often don't come to expectable conclusions. Well, that's how life is. If you like your vicarious slices of life rather slim and not too intensely flavored, you may find these ones digestible and tasty.— Nada L. Stotland, M.D., M.P.H., Chicago

♦ Missing Persons, by Stephen White (New York, Penguin, 2005), shows the sure hand of an accomplished wordsmith. White is an experienced author with 12 previous suspense novels under his belt, including The Best Revenge and Warning Signs, which were both New York Times bestsellers. He is also a clinical psychologist, which informs and colors his fictional work. In this book, the story flows and is eminently readable within a one- or twoday sitting. White's facile style makes the 76 chapters seem much shorter. The story basically involves the circumstances surrounding the mysterious death of a therapist, Hannah Grant. She is one of the professional partners of the protagonist, psychologist Alan Gregory. The story weaves in many directions, asking fundamental questions: Was Hannah murdered? Was her death an accident? Was the death related to the suspicious life cir-

cumstances of one of her clients? There is a statutory investigating detective called Jaris Slocom, who is a bit one-dimensional. However, Alan Gregory's old detective friend Sam offers a multidimensional counterpoint to the crude chauvinistic Slocum. Although the story is set in Boulder, Colorado, we are treated to a wild Las Vegas ride involving Diane, Alan, and Hannah's therapist colleague, who decides to do some investigating herself and pursues the shady origins of one of Hannah's clients who could be a prime suspect. The author's sensitivity to therapistclient confidentiality becomes an interesting tributary at the end of the story, when the author poses the ethical dilemma of disclosing confidential therapist-client information to the police even if it is in the service of a murder investigation. The protagonist officially resigns from the local state psychologist licensing board because he believes he has violated therapistclient confidentiality in a number of instances. But you will have to read the book to find out what the board decides to do.—Kieran D. O'Malley, M.D., Seattle

♦ Denise Mina is a contemporary murder mystery writer and professor of law in Glasgow, Scotland. Since 1999 she has written six books with themes of interest to mental health professionals engaged in forensic work. Deception (New York, Little, Brown and Company, 2003), written from the vantage point of a physician husband, details the conviction of his wife, a prison psychologist, of murdering her former patient. The complexity of the plot is heightened when the reader learns that the former patient, a convicted and imprisoned serial killer, had recently been released and newly married when he and later his bride were found murdered. The author then guides her readers along the husband's meticulous investigation of his psychologist wife's private case notes. Reported in a diary format, Deception offers the reader the unusual opportunity to review this husband's inner thoughts and feelings as he plumbs for deeper understanding of his wife's involvement in these crimes. Initially unshaken in his belief in her innocence, he soon becomes more conflicted and doubtful of her faithfulness as he explores the former patient's illegally obtained medical records and his wife's interviews with the press. The husband is tortured with questions of his wife's fidelity and possible love relationship with her former patient and seeks to understand this defection from the marriage. His quest carries him far from home and deep within himself as he considers the impact of this tragedy on his marriage as well as his own possible contribution. The unexpected finale reveals the husband's transformation as he discovers the "truth" and gains unexpected insights into his own moral compass.—Donna M. Norris, M.D., Boston

♦ None of the typical demons are after Richard Jury, Martha Grimes's detective creation for her series of mysteries set in England and often named after an English pub, real or imagined. The latest in the series is The Winds of Change (New York, Penguin, 2004). Jury is a straightforward kind of guy, single, pretty good-looking, and dedicated to his job, but not because of some need to escape his private life. Not even a craving for ethanol or nicotine. Orphaned during World War II, he has one personal challenge: sorting out his personal history. Are his childhood memories true? Apparently not, according to his sole surviving cousin. And, if they are not, how can he discover the reality of his past? Given that Jury's cousin dies toward the start of the novel, it's a good thing figuring out his past isn't a particularly strong drive either. Things are not what they seem. But how to know? And when should he leave well enough alone? Not unlike his professional challenges, you might note. So unfolds a plot in which well-groomed children are in fact victims of disgusting abuse and beautiful women are plain beyond recognition once the make-up comes off. Families under duress pull off implausible lies, best left untouched even by a detective. Because this book was assigned to me to review for this journal, I expected psychological depth or at least one good character with a major mental illness. Not so. But I did find a pleasant distraction with a pleasing hero, some memorable characterizations, and good fun. The evil is mainly offstage and gets conveyed without too much gore. To a large degree, the good guys win and the loose ends get tied.—Sharon Farmer, M.D., Everett, Washington

♦ In Sight Hound, by Pam Houston (New York, W. W. Norton & Company, 2005), we find a story of love and grief. Rae Rutherford is a famous playwright who cannot relate to humans as well as she does to her dog, Dante, an Irish wolfhound who does not take his eyes off her. Through multiple voices we hear Rae's life story: her trauma as the only child of a distant father and a histrionic mother who struggles with an eating disorder and motherhood. We get to know about Rae's unsuccessful relationships and chronic sadness. We get a glimpse into her therapy and her therapist's mind. Most important, we get to learn that the healer is Dante, through his dedication to teaching her that she deserves to be loved. This book in not for everyone. It has multiple narrators, including two dogs and a cat, as well as some stereotyped characters, such as the altruistic veterinarian and the idealistic veterinary student. Dante, "the evolved one," quotes the Buddha among others, and is clearly a spiritually gifted dog in everyone's eyes. However, the book teaches all of us is that therapy comes from multiple sources. Rae demonstrates, with all her attempts to keep Dante by her side, how once we have found a healing source, it is hard to let it go while we are still in pain. The narrators walk us through Rae's grief process, including the eminent loss of her dog. Dante shows us how his consistency is his strongest teaching tool. He is a caring, nonjudgmental presence and the true therapist among all the characters in the book.—Nancy Diazgranados, M.D., Philadelphia

♦ In *Envy* (New York, Random House, 2005), Kathryn Harrison offers a rivet-

ing narrative of choice and consequence, exploring a breadth of key human themes—bereavement, jealousy, betrayal, sexuality, spirituality, and isolation. These themes are played out through the development of the protagonist, Will, who offers insight into the humanness and vulnerability of the mental health clinician. Harrison explores Will's fallibility, writing, "He's not a blameless father or a perfect husband, and though he's made a career of listening to other people's problems, he can't always respond with patience and insight . . . he's also a tortured agnostic, suffering spasms of private, even desolate, self-examination." Will is an individual in crisis, constantly questioning his life choices and the degree to which factors beyond our control influence the person we become. Through Will, Harrison explores broader existential questions that resonate with the mental health clinician and the everyday reader alike. Harrison employs sexual themes to explore the more core existential issues of the novel. Will searches for connection and fulfillment in his sexual relationships but ultimately is left feeling empty and disillusioned. Harrison sheds light upon the often overlooked role of sexuality in establishing interpersonal connection. At times, Harrison's narrative lacks subtlety. Will's estranged wife is portrayed as unidimensional for the bulk of the novel. It is not until the conclusion that Harrison truly addresses the wife's more vulnerable nature. Although Harrison's writing is for the most part sophisticated and insightful, the wrapup in the final chapter seems overly sentimental. Her suggestion that simply having another baby would resolve the couple's marital conflict seems contrived after her more thoughtful exploration of the complexity of human relationships. Despite these few shortcomings, Envy is a thoroughly enjoyable and thought-provoking read. Harrison inspires discussion of critical issues that are paramount to our understanding of human nature.—Isabel Bergman, M.D., Boston

♦ Life Sentences, by Alice Blanchard (New York, Warner, 2005), is a med-

ical thriller whose main character, Daisy Hubbard, is a research scientist with the life goal to "be the first person in the world to cure a neurodegenerative disease using gene replacement therapy." The disease she seeks to cure is an inherited one, Stier-Zellar's disease—an autosomal recessive enzyme deficiency. It causes erosion of the myelin with gradual paralysis, mental retardation, and early death; symptoms generally manifest at two years of age, with death by eight years. (Daisy's only brother died from this disorder.) Unfortunately, the death and disorder in Daisy's family extends well beyond her brother. Her father died in a car crash when she was three years old, her mother has depression, and her sister has bipolar affective disorder or schizophrenia, "depending upon which doctor you talk to." As if that weren't enough, both Daisy and her sister were molested as children her sister between ages five and nine. Her sister had her first psychotic break at age 13. Child molestation is not the only boundary transgression in Life Sentences. They show up everywhere. Sometimes they are central to the theme, and sometimes they are peripheral and rarely commented upon. Life Sentences is an engaging read, and I leave the plot to your discovery. Blanchard could have been much more informative, and it is too bad she didn't do a little bit more homework on mental illnesses. One unfortunate tendency Blanchard has is to use comparisons, similes, and metaphors that range from preposterous, through silly, to just simply confusing, providing no useful images to the reader—for example, "He had more culture than Yoplait" and, my favorite, "She stumbled around in a state of liquid suspension like a million-year-old swamp mummy." Life Sentences had the potential to be realistic as well as fun. It fails in the former, succeeds in the latter. The less you know about medicine, the better you'll like Life Sentences.— Jeffrey L. Geller, M.D., M.P.H., Worcester, Massachusetts