

amenable to pharmacotherapy and another that lists considerations when choosing a medication. This chapter also subtly suggests that despite the newness of child psychopharmacology, there is a standard of care. It challenges the use of empirical prescribing by proposing a more formal strategy.

Most of the rest of the book contains chapters that directly address the major axis I disorders. There are also chapters on pervasive development disorders, aggressive behavior, Tourette's syndrome, and medical psychiatric conditions. Discussion of each of the disorders includes a review of what is known about prescribing for them, much of it from research among adults. Some of the chapters make it seem as though the

diagnostic boundaries of these disorders as they present in childhood may still be quite unrefined. For example, the chapter on pervasive developmental disorders describes the gradual differentiation of these disorders into categories such as low- and high-functioning autism and Asperger syndrome and then suggests that still more delineation may be yet to come.

*Practical Child and Adolescent Psychopharmacology* would be an excellent book to use as an introduction to child psychiatry for residents, nurse practitioners, and others in training; it provides sound and conservative advice on the current practices in the field. It also provides a sense of both the history and potential future of child pharmacotherapy.

## Eldercare 911: The Caregiver's Complete Handbook for Making Decisions

by Susan Beerman, M.S., M.S.W., and Judith Rappaport-Musson, C.S.A.

Marc Zisselman, M.D.

*Eldercare 911: The Caregiver's Complete Handbook for Making Decisions* is a comprehensive, user-friendly handbook that delivers practical problem-solving information, directed primarily toward female family caregivers. The authors, Susan Beerman, M.S., M.S.W., and Judith Rappaport-Musson, C.S.A., have neatly divided the book into 19 sections progressing from the decision to become a caregiver to providing end-of-life care.

In general, the book is designed to be read piecemeal and is well organized, well referenced, and well indexed so that the reader can easily look up the problem at hand. Practical work sheets designed to make caregiving more effective and efficient conclude most chapters. The clear, straightforward writing style is punctuated by testimonials from female caregivers that emotionally amplify the factual information presented.

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I found the chapters about overseeing medications and managing medical issues to be particularly strong. The questions and bulleted points on what to ask the physician and how to avoid medication problems and complications should be in every caregiver's possession. The sections on the pros and cons of hiring a private health aide as well as how to most effectively supervise the hired caregiver are also particularly well developed. The theme that the caregiver is not alone pervades the book. The authors back up the rhetoric by encouraging readers to visit their Web site, post messages on their bulletin board, subscribe to their free newsletter, or sign up for a caregiver's workshop.

A few sections of the book could have had more elaboration. I found the chapter on coping with Alzheimer's disease to be the weakest. Specifically, techniques for optimizing communication with a person who has Alzheimer's disease and the section on understanding and dealing with behavior problems were incomplete. The signs for recognizing di-

minished sight were nonspecific and did not provide a useful guide for caregivers. The section on taking away the patient's car made no mention of the availability of driver evaluations. Hospital discharge and homecoming were described as exhilarating experiences. We know discharge often means dealing with delirium or significant ongoing morbidity with limited resources.

Overall, I would go beyond the authors' recommendation that limits the book primarily to women. *Eldercare 911* is filled with sound advice and facts that will benefit caregivers of both sexes. I do not see this book supplanting *The 36-Hour Day* (1), which is more comprehensively focused on Alzheimer's disease and related dementing illnesses. However, *Eldercare 911* can be confidently recommended by health care professionals in conjunction with *The 36-Hour Day* or as the primary resource for caregivers of persons with nondementing illness.

## Reference

1. Mace NL, Rabins PV: *The 36-Hour Day*. Baltimore, Johns Hopkins University Press, 1981

## How to Be Alone: Essays

by Jonathan Franzen; New York, Farrar, Straus, and Giroux, 2002, 278 pages, \$24

Laura L. Post, M.D., Ph.D.

When American readers hear the name of this author, perhaps their first thought, a disparaging and dismissive one, is of Franzen's uneasy and short-lived status as a writer selected by Oprah Winfrey for her book club. This pejorative association is unfortunate, because Mr. Franzen's writing is crisp, sharp, and timely, of a toughness reminiscent of Ralph Nadler and a personal clarity echoing Erma Bombeck. The association is also, ironically, appropriate because, in Franzen's reticence about becom-

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