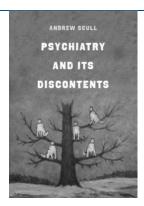
Book reviews

Edited by Allan Beveridge and Femi Oyebode



Psychiatry and Its Discontents

by Andrew Scull University of California Press. 2019. £25 (hb). 376 pp. ISBN 9780520305496

The resurgence of interest in the history of psychiatry that began in the 1980s saw the sociologist Andrew Scull emerge as a key figure. His *Museums of Madness* (1979), a study of asylums in Victorian Britain, stimulated research not only by historians, but also by clinicians, who were keen to discover whether the inmates of these institutions suffered from recognisable psychiatric illnesses or whether they were merely the disaffected and discontented of society. At the time, Scull was regarded as the history of psychiatry's *enfant terrible*, challenging the assumptions of those who told of the benign progress of psychiatry.

Psychiatry and Its Discontents is based on the essays, mainly book reviews, that Scull has written in the ensuing decades and that have appeared in the Times Literary Supplement, History of Psychiatry, Brain and various American journals. Scull covers the scholarship of Michel Foucault, the fall of Freudian psychoanalysis, the rise of the asylum in the 19th century and the recent dominance of a biological perspective in contemporary American psychiatry, as reflected in the latest editions of the DSM and in the widespread influence of 'big pharma'.

At the start of the book Scull strikes a conciliatory note. He states that he does not seek to minimise or deny 'the reality of mental disturbance and the immense suffering it often brings in its train' (p. 2). He also praises 'clinician-historians' who have made valuable contributions to the discipline. In his first essay, Scull examines the work of the great iconoclast Michel Foucault and argues that it is seriously flawed; the historical sources that Foucault cites do not justify his sweeping assertions, in particular his contention that there was a 'Great Confinement' of the mentally ill throughout Europe in the early 19th century, or that the mythical story of the 'Ship of Fools', carrying the insane down the waterways of medieval Europe, actually happened.

Scull looks at another legendary figure in the history of psychiatry, Sigmund Freud. In the past he has been scathing of the efficacy of psychoanalysis. However, in his discussion of the 'Freud Wars', in which Frederick Crews and his fellow combatants have launched unremitting fire on the man and his theories, Scull argues that their obsession has paradoxically kept Freud's ideas alive, which, perhaps surprisingly, he judges 'is not entirely a bad thing' (p. 8). Elsewhere we find Scull lamenting the fact that modern biological psychiatry attaches no importance to the meaning of a patient's symptoms, something which Freudian theory held to be fundamental and at least tried to grapple with.

Scull reconsiders the history of the asylum and concedes that the notion that it could be characterised as 'a cemetery for the still breathing' has been shown to be more complicated than previously

admitted. He refers to recent scholarship that reveals that many patients were actually discharged from these institutions, and that the family played an important role in the committal process. He could have added that 'clinician-historians' have demonstrated, in their analysis of asylum case notes, that 19th-century patients exhibited the same kind of symptomatology as their modern-day counterparts, thus emphasising that the presence of mental illness was of crucial importance too.

In an interesting passage, Scull casts new light on the famous 1973 study by the American psychologist David Rosenhan, in which he claimed to show that people who pretended to be mentally ill by saying that they heard a voice saying such things as 'empty' or 'thud' were admitted to hospital and diagnosed with psychosis. This study dealt a major blow to the legitimacy of psychiatry in the USA, but Scull, on the basis of the work of the investigative journalist Susannah Cahalan, with whom he collaborated, suggests that the results were falsified and that the original data have been conveniently lost, thus avoiding subsequent scrutiny.

Scull inveighs against what he sees as the crude biological reductionism of contemporary mainstream psychiatry, which has led to its narrow focus on medication as the answer to mental disturbance. He criticises the role of the pharmaceutical industry in fostering and maintaining this approach, but also feels that relatives and patients collude in the process. He contends that recent editions of the DSM, with its checklist of symptoms linked to specific drug treatments, have served to reinforce the claims of biologically oriented psychiatry, at least in American practice. He is also concerned that biological reductionist theory has infiltrated other areas, such as American legal circles: some of its practitioners claim that brain scans will bring a new objectivity to judging the guilt or innocence of defendants. Scull rightly ridicules such absurdist claims.

Throughout the book Scull writes with style and wit. He is, by turns, sceptical, combative and passionate, especially in his denouncement of treatments, such as lobotomy, which have been meted out to psychiatric patients over the years. Although one may not agree with all of Scull's opinions, these essays offer a stimulating and provoking account of psychiatry, past and present.

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The Cambridge Handbook of Psychology, Health and Medicine

Edited by Carrie D. Llewellyn, Susan Ayers, Chris McManus, Stanton Newman, Keith Petrie, Tracey Revenson and John Weinman 3rd edn. Cambridge University Press. 2019. £82.99 (pb). 900 pp. ISBN 9781316783269

At medical school we learn about the biopsychosocial model of illness, which emphasises the intrinsic interaction between these components in any disease. Despite this, health services still frequently deliver care in discrete silos that differentiate between physical and mental illness. Training and education often follow this false dichotomy, not adequately considering the effect of psychological processes on physical health, or biological process on mental illness. Policy initiatives