

Review of **Greenberg** (2014) *The Book of Woe: The DSM and the Unmaking of Psychiatry*.

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An important contribution to the history and understanding of applied psychology, psychiatry and medicine, this volume recounts the creation of a remarkable classic 'book' series and its use (or perhaps misuse ?) by practitioners and academics all over the world. Viewed by many as the 'Bible' of psychiatric condition diagnosis, and thus shorthand treatment guide, each issue of the Diagnostic and Statistical Manual (DSM-x) since its first release in 1952 (from the American Psychiatric Association, APA) has not been without its controversies. Each time, nonetheless, it has often become the 'book' of choice in providing 'established' (if not entirely agreed upon) nomenclatures of psychiatric condition presentations, as may be based upon their presumed nosology, and characteristically associated client-patient behaviours. Greenberg's *Book of Woe* tells the story of the most recent edition of the DSM-x (DSM-V, 2013), and relates many of the controversies surrounding its new content, often including first-hand accounts of the people responsible for creating it, and the *hows* and *whys* of its departures from the content of previous editions. Most remarkable perhaps, is Greenberg's own public confession here that he himself (like many another professional practitioner) will likely NOT be using it as his primary diagnostic tool-kit in the future.

However, and in so doing, Greenberg is by no means positing an anti-psychiatry stance (in the mould of Szasz, Leary, or Laing), but is instead simply showing his readers what exactly laid behind the creation of the latest edition (DSM-5) – following extensive interviews and conversations with those responsible for its creation, modification, and final publication. Those wishing to learn of the history of DSM-x and the various controversies surrounding what was (and what was not) included each time, will find much enlightening discussion, presented as an easy (if sometimes playful) read. Much is also related regarding the more scientific aspects of the DSM-x enterprise, and their ever-lacking attention to solving its diagnostic *validity* problems (though admittedly, many of its *reliability* shortcomings have improved over time).

Entertaining as those section may be, of greater value perhaps (at least as perceived by this reviewer), was the author's frequent commentary with regards the significance of each DSM-x version's changes for particular client/patient cohorts. For example, Greenberg's discussion of the 'liberation' of those making gay-lifestyle choices for themselves gained much needed momentum following the later exclusion of homosexuality (per se) as a psychiatric condition diagnostic, but perhaps troubled those no longer eligible for insurance company-funded sex-changes. Likewise, the current DSM-5 may disenfranchise those currently benefitting from

treatments optimised for Asperger's Syndrome (many of whom have received comfort simply having received and since shared such a 'socially-acceptable' diagnosis !), only to now discover there is no such psychiatric condition at all (at least when comparing the last two DSM-x editions).

Although many questions will remain in the minds of practitioners and academics with regards the practical application of the new DSM-5 to their own professional activity (the DSM-5 itself even states two different 'starting dates' for the implementation of its own diagnostic criteria), Greenberg's citing of the importance of ICD9 (and then ICD-10, to be implemented Oct, 2014 ?) as preferred reference sources for psychiatric diagnosis are both welcome and mature (health insurance companies in the USA at least, require the use of ICD codes for payment authorisation, and NOT DSM-x criteria !), it is the unresolved scientific validity issues that make it likely there will be no DSM-6 (or DSM-VI). Greenberg does not discuss this in any length as such, though any second edition might include the recent NIMH statement from its Director Tom Insel that he had authorised an alternative program, bypassing the APA's DSM-x enterprise altogether, and instead creating a more scientific criteria set along the lines of the RDC (1970s).

Whether a pre-clinical counsellor, an old hand still drawing by your client-patient's couch, a clinical psychiatric intern, or an ardent student of the human mind and behaviour, the *Book of Woe* is altogether a great read. Both informing and entertaining at the same time, this work is unlikely to cause the unmaking of psychiatry (in and of itself), but enlightens its readers as to why the authors of the DSM-x (or the APA committees overseeing the work of the most recent DSM-x authors) are perhaps engaged in behaviours which may have possibly lead to the demise of their own diagnostic criteria, both for use by practitioners, and those designing therapies for those found to be in the greatest need of them.

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