

Cognitive Therapy with Schizophrenic Patients: The Evolution of a New Treatment Approach
Marco C. G. Merlo, Carlo Perris, & Hans D. Brenner (Eds.), Cambridge, MA: Hogrefe & Huber
Publishers (www.hhpub.com). 2002, 218 pp., \$46.95 (hard cover).

This compilation of chapters by various clinicians and researchers from Europe and the United States provides updated information from the field of cognitive therapy in schizophrenia, including theoretical, clinical and research issues. There is a wealth of information on programs designed for treating patients with schizophrenia using psychosocial approaches, most notably various integrated treatment programs.

However, just as one cannot judge a book by its cover, one cannot judge a book by its title. As with this field in general, this book lacks a precise, clear distinction between use of the term “cognitive therapy” or “cognitive behavioral therapy” when referring to psychotherapy aimed at examining and altering beliefs, assumptions and automatic thoughts of patients, and using the same terms when applied to training patients to improve their skills relating to processes such as attention, memory, planning, and decision-making. Using the same term for both of these types of therapy can be confusing and was so in reading this book. The title itself could induce those interested in the cognitive psychotherapy developed by Ellis and Beck to purchase the book, but they might be disappointed by the heavy leaning toward issues of cognitive rehabilitation, to which the latter use of the term “cognitive therapy” is sometimes applied. Even a chapter by Kraemer that distinguished between the two types in the text (referring to cognitive rehabilitation as “cognitive training” and cognitive behavioral therapy as including problem solving, cognitive restructuring, differentiation of feelings and stress management) has both types listed in a table as subtypes of cognitive behavioral therapy. The field needs to clearly distinguish these two types of treatment. Naming the treatment of microcognitive processes of attention, memory, planning and decision-making with the use of the terms “cognitive rehabilitation,” “cognitive remediation” or “cognitive training” should be clearly distinguished from the terms used to describe macrocognitive processes of thoughts, images, beliefs, assumptions, that is “cognitive therapy,” or “cognitive behavioral therapy (CBT).” This should be made clear at the beginning of the volume (starting with the title) and adhered to in each chapter. Unfortunately, the current lack of an overall term for both types requires the use of a longer title (i.e., “Cognitive Remediation and Cognitive Therapy with Schizophrenic Patients”).

For those solely interested in cognitive psychotherapy, there are some theoretical aspects explained by one of the earliest authors regarding its use in schizophrenia, the late Carlo Perris, and there is a chapter on the use of CBT for schizophrenia in the setting of a community mental health service by Kingdon & Turkington, two other pioneers in this field. The other chapters at times include CBT for schizophrenia as part of a larger psychosocial rehabilitation program.

The other format issue is that the section labels - Theoretical Aspects, Practical Aspects, and Empirical Evaluation - do not truly distinguish the chapters since a number of chapters include a theoretical introduction, clinical descriptions, and relevant studies. If a reader chose to focus on one or two of these general topics, valuable information would be missed by only reading the relevant sections of the book based on section titles. For instance, the beginning of Corrigan’s chapter in the second section contains an excellent theoretical review of information processing deficits in schizophrenia.

Terminology aside, the book contains a number of descriptions of programs taking an integrative approach to the treatment of schizophrenia, detailed descriptions of studies examining

the efficacy of these programs (including cases of negative results), theoretical considerations throughout the book, and appendices containing terminology in the field (with distinct definitions for “cognitive remediation” and “cognitive therapy”) and rating scales and neuropsychological tests referred to in the chapters. There are also interesting chapters such as one by Zapparoli et al. in which a patient with schizophrenia is first seen by a psychodynamic therapist and then by a cognitive therapist. The complementary aspects of the two approaches is emphasized. A chapter by Liotti & Reda questions the feasibility of individual as opposed to group psychotherapy. Merlo & Hofer discuss the importance in a ward setting of considering actions and attitudes of staff in addition to those of the patients. The chapter by Merlo & Gekle discuss how an understanding of information processing deficits in schizophrenia is important for anyone interacting in a therapeutic manner with these patients. The question of which specific aspects of a rehabilitation program (such as specific social skills training for residential, vocational and recreational needs, and coping with maladaptive emotions) bring about what kinds of changes is examined in chapters in the final section.

This book does contain important information for practitioners in the fields of both cognitive remediation and cognitive therapy as well as those using general rehabilitation, social skills training and even psychodynamic and supportive therapy. The organization and title could have been better but that should not inhibit interested parties from gleaning significant data and advice.

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