The Complete Family Guide to Schizophrenia
Kim Mueser and Susan Gingerich
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I first worked with people with schizophrenia when I was a graduate student in the 70s. I continued to work with this population for a few years after graduating but I had been away from work with psychosis for 25 years when some life changes led me back to this work. As a student I had learned that the prognosis for people with schizophrenia was grim. I understood it to be a disorder with a chronic deteriorating course. Although medication might calm a troubled mind I understood that these people were destined to a life characterized by repeated hospitalizations, interspersed with time spent in group homes or on the street. On those occasions when I met with a family of a newly diagnosed individual with schizophrenia I am sure I passed on my dismal expectations.

Learning that a family member has schizophrenia is likely to be a terrifying experience for most people. It is likely to follow a crisis where the family member has behaved in confusing or perhaps even a frightening or bizarre manner. Family members may be believe that their loved one is destined for a life of repeated hospitalization or relegation to a back ward. They may hear such a prediction from well meaning professionals. Fortunately the prognosis today is much more hopeful. With modern treatment options the diagnosis of schizophrenia need not be devastating.

Mueser and Gingerich's book is intended to provide family members with information and resources that will enable them to fulfill the more promising life that can be achieved despite the burden of schizophrenia. It begins with an overview of schizophrenia including information about epidemiology, course, symptoms and treatment. The information is presented in a highly readable form and is current. Coverage is comprehensive and includes samples and descriptions of typical symptoms. The reader is helped to make the symptoms of schizophrenia understandable and to recognize the impact on others. This newer more hopeful understanding of schizophrenia is the result of the rise of what is called the recovery model. The first section of the book also devotes a chapter to the recovery mode. Most of us have probably been exposed to a biological model of major mental illnesses that includes a grim prognosis for schizophrenia. Schizophrenia is, after all, a disease of the brain involving some sort of “chemical imbalance” and perhaps a deteriorating course marked by structural changes in the brain such as enlargement of ventricles. A much more hopeful picture is presented by the examination of actual outcomes. Both people with schizophrenia and their families can have hope for a meaningful life even though the individual remains symptomatic. The book discusses community resources, and comprehensive treatment, providing a description of empirically supported treatment as well as checklists and information on finding resources and support in the community.

The recovery model is a great step forward but is limited by accepting the assumptions of a medical model of schizophrenia. This model can be traced back to Kraepelin who described dementia praecox which is the conceptual predecessor of what is now called schizophrenia. Kraepelin is also responsible for developing a diagnostic classification for mental disorders that has evolved into today's DSM. This approach classification is merged with a biological disease concept lead to looking for explanations and treatment in the biological sphere. Most sources
addressing treatment of schizophrenia will explain that it is a brain disease. It seems to involve some problem with neurotransmission with the primary difficulty involving dopamine pathways. It logically follows that treatment will be primarily by means of modification of this “imbalance” of brain chemistry. It is now recognized that while this approach to treatment brings major relief to many somewhere between 40% and 60% of people diagnosed with schizophrenia and fully compliant with pharmacological treatment will still have positive symptoms such as delusions and/or hallucinations.

A newer conceptual model has emerged which while incorporating a biological understanding recognizes that the arguments from genetics and biological psychiatry leave a great deal unexplained. The book presents a stress vulnerability model. The idea is that some people have a genetic vulnerability to develop the disorder but this interacts with other factors such as what coping skills the individual has, and the balance of stress and support in their environment. This then leads to the position that an effective response involves attention to all these areas. Comprehensive treatment involves biological interventions, social support, development of coping skills and management of environmental stress.

All of this leaves aside the question of validity of the diagnosis of schizophrenia as a unitary disorder. It allows the authors to touch on the idea of a spectrum of disorders which are somehow related. The assumptions underlying biological models of schizophrenia and the idea that it represents a meaningful diagnostic category has become the center of a vigorous debate. Arguments of a newer conceptual model of what is happening in people we call schizophrenic have argued that treatment needs to focus on symptoms, distress and dysfunction not on some amorphous disorder. The book, wisely, ignores this controversy while at the same time outlining an approach that is focused on distress and dysfunction.

The book is divided into six sections. The first is an overview of schizophrenia, including diagnosis and symptoms, the recovery model and treatment approaches. The following sections address various aspects of dealing with the disorder and factors understood to affect its course. This includes family concerns, relapse prevention, providing a supportive environment, dealing with specific problems and symptoms and ending with efforts to address quality of life.

The book is structured so each chapter follows the same pattern. Each chapter provides a list of resources such as readings, videos and web sites. There are thoughtful discussions of common concerns such as medication compliance. Family function is known to have a major impact on the prognosis for people diagnosed with schizophrenia. The book provides a guide to developing positive supportive communication and establishing a functional household with a rational structure and a collaborative approach to rules and expectations. They also carefully address other sensitive issues including substance abuse and even estate planning. They provide guidelines for a collaborative problem solving approach.

The authors have managed to provide comprehensive collection of information and links to resources that should prove to be of great value to anyone dealing with a family member diagnosed with schizophrenia.

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