

In the last decade several epidemiological studies, such as the Epidemiological Catchment Area (ECA), the National Comorbidity Survey (NCS) and the British Psychiatric Morbidity Survey, have shown an important association between mental disorder and psychoactive substance use. Clinicians have become increasingly concerned that many of these dually diagnoses patients do not fit very well into standard drug treatment or mental health services. As a consequence, comorbidity, or dual diagnosis, has become one of the most pressing issues facing psychiatrists, drug misuse specialists, researchers, policy makers and service providers. The solution to the problem has been to either create a psychiatric super-speciality to deal with these patients or to improve the ability of staff working in generic mental health and specialist drug services to recognise and manage the most prevalent and treatable comorbid disorders.

Kranzler and Rounsaville's book is perhaps the most important book to have been produced in this field. It is certainly the most complete and well researched book on the subject that I am aware of. Each chapter presents a thorough scientific review of the issue, enough to satisfy even the most critical of readers. Thirty-three American and Canadian researchers have produced the seventeen chapters. The first section acts as a kind of introduction to the basic concepts of comorbidity. Chapter 1 deals with the epidemiology and gives a very good historical review of the epidemiological studies in psychiatry, alcohol misuse and drug misuse prior to much of the more recent “comorbidity” research. It also summarises the principal surveys of psychiatric comorbidity as well as studies of treatment intervention and longitudinal follow-up studies that have examined the course of comorbid disorders. Although comprehensive, it has a North American emphasis, largely ignoring studies from other countries. Chapter 2 deals with the models of transmission of comorbid disorders and presents a very useful conceptual framework for the others chapters. Chapter 3 is an impressive review of diagnostic methods, a key issue in comorbidity. It discusses the fundamental principals of psychiatric diagnosis as well as the strengths and weaknesses of the main structured diagnostic instruments that are currently in use. At the end of the chapter there is an important discussion of future directions for research and clinical recommendations. Chapter 4 is an overview of treatment modalities for dual diagnosis patients, with models of integrated treatment options being discussed. The second section has 13 chapters each focusing on a specific comorbid disorder. Each chapter presents a detailed discussion the diagnostic process relevant to that disorder. Due to the greater wealth of scientific research, both mood disorders and anxiety disorders are given separate chapters for their association with alcohol and drugs. These chapters are critical of the literature and provide a well-balanced evaluation of this difficult area. Other chapters present critical reviews of clinical problems that are rarely addressed in other either psychiatric or substance misuse textbooks, such as nicotine dependence and psychiatric disorder, post-traumatic stress disorder and addiction, as well as eating disorders and attention-deficit hyperactivity disorder. There are three chapters on what might be considered more specialist issues: substance abuse and traumatic brain injury, HIV infection and drug misuse, and triple diagnosis (drug misuse, psychiatric disorder and physical problems). These are very interesting chapters and offer a good deal of practical information as well as ideas for further research.
This an excellent book and a must for anyone involved in developing mental health and drug misuse services and is a good source of reference for clinicians and researchers alike. Although expensive, it is a worthwhile addition to the library shelf.

Ortman's book has a completely different approach. It is a much more personal view - a therapist's view of managing dually diagnosed patients. There is significantly less of an evidence base to the book but no shortage of personal opinion. From the author’s clinical experience, a series of guidelines have been developed which the author calls, “Sixteen Treatment Principles”. They are in fact quite helpful, especially for someone who is just beginning to work with dual diagnosis patients. However, it is not an essential book or even a well researched one, but certainly an interesting read.

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