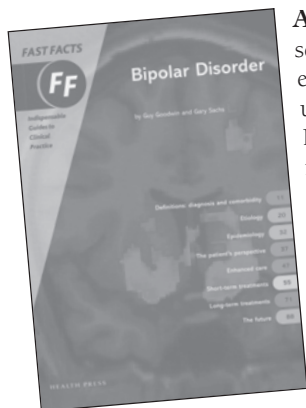


Incisive guide to bipolar disorder

Fast facts: Bipolar disorder. Guy Goodwin and Gary Sachs. Oxford: Health Press, 2004 (99pp, \$35.20). ISBN 1 903734 50 9.



AT FIRST BLUSH, a book from a series called *Fast facts* does not evoke enthusiasm — suggesting, rather, an uninspired commercial opportunism. However, this small volume is pleasingly pithy, erudite and accessible, as well as being helpfully informative.

Goodwin and Sachs are eminent in the field of bipolar disorder, representing research groups from both sides of the Atlantic (Oxford and Harvard, respectively). The dominant style, however, is that quintessentially English amalgam of droll

understatement and incisive intellectual directness.

The authors are unabashed apologists for the scientific method in clinical medicine, while at the same time compassionate clinicians: “We believe that the medical model is useful in diagnosing bipolar disorder — indeed, we cannot see a viable or reliable alternative.”

The richness of their clinical experience is apparent in their accounts of the condition, referring, for example, to the “mischievous state of elation” that characterises milder presentations of mania. When discussing the somewhat dry issue of aetiology, they engagingly describe the interplay of genetic vulnerability and life-event precipitants: “Triggers have the same relationship to the real causes of severe bipolar disorder as a spark has to gunpowder.”

It is the sharp observations and commentary that make this volume distinctive. One striking instance is their discussion of the controversial issue of childhood bipolar disorder, which is being diagnosed at alarmingly high rates in the US: “It represents another of the ways in which practice in North America is different from that in most other parts of the world ... It is still possible for the sceptic to say that this is diagnosis inflation.”

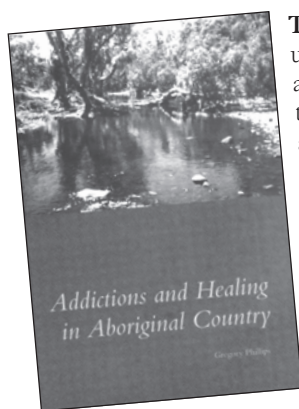
Bipolar disorder is a condition that is tentatively emerging from the shadows of shame, misunderstanding and fear. Thoughtful volumes such as this are a critical component of the process of destigmatisation.

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Cultural issues in Indigenous health

Addictions and healing in Aboriginal country. Gregory Phillips. Canberra: Aboriginal Studies Press, 2003 (xix + 210 pp, \$29.95). ISBN 085575408.



THIS IS NOT THE FIRST BOOK documenting the problems of addiction and healing in Aboriginal communities. It is, however, the first written by an Indigenous academic. It is also important because it puts forward a methodology for an Indigenous science that seeks to provide a theoretical and practical basis for Indigenous ways of knowing and working.

The study is based on ethnographic research in an Indigenous community in north Queensland. Phillips first discusses his own role

and responsibilities as an Indigenous academic working in an Aboriginal community. He articulates an Indigenous-defined methodological theory and culturally appropriate knowledge production, an issue that has received very little discussion in research among Indigenous Australians. Interweaving the voices of the community of “Big River” with a range of historical, anthropological and medical material, the experience of trauma and substance misuse is explored. Arising from these explanations, the

author reflects on some of the ways the Big River community talk about addressing addiction problems.

One fascinating chapter explores approaches to treating addictions among Native Canadians, where the author, together with a suicide prevention officer from Big River, made a number of visits to different communities and treatment programs. Through these experiences, the author provides a provisional approach to the treatment of addictions, one that acknowledges the importance of culture and spirituality, but which also incorporates a number of other approaches, such as harm reduction, Alcoholics Anonymous and residential treatment.

One criticism would be that the approaches to an Indigenous science outlined at the beginning are not clear in the following chapters. How would the Indigenous methodologies be replicated elsewhere? Do they rely on identification as an Indigenous person and in what ways can non-Indigenous academics and health professionals engage with this approach? In order for such important ways of knowing to be transferred elsewhere, it is important that such methodologies be clearly formulated. Nevertheless, this is an important book on a difficult subject, and one that successfully conveys the individual and social traumas of substance misuse and the ways communities are addressing them.

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