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**Mending Minds: A Guide to the New Psychiatry of Depression, Anxiety, and Other Serious Mental Disorders.** Leonard L. Heston. New York: Freeman, 1992, 244 pages, \$24.95 hard, \$13.95 paper.

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Leonard L. Heston, M.D. is a Professor of Psychiatry at The University of Washington and is the Director of The Washington Institute for Mental Illness Training and Research. Dr. Heston writes about "a QUIET revolution [which] has been occurring in psychiatry" (p. 1). Dr. Heston's "new psychiatry" focuses on the "actual study of the brain as a biologic tissue" (p. 3) and avoids "elaborate theorizing, guru-isms, blaming of mothers for unhappiness, backbiting among contending schools, or [popular and simple] prescriptions for instant mental health. Such topics were a product of prescience . . ." (p. 4). Heston wishes to distance himself from traditional Freudianism. Most importantly, according to Heston, his biological and scientific psychiatry portends greater hope for the "nearly one person in five [who] will develop a major psychiatric illness . . ." (p. 1).

Heston's enthusiasm may be premature. Our knowledge of environmental influences on common mental disorders is far more infantile than our collective scientific wisdom on DNA segments and brain biochemistry. Psychiatrists will undoubtedly adjust their therapeutic paradigms, again and again, as more is learned. In fact, Wakefield (1992) argues persuasively that definitional debates over fundamental concepts, such as mental disorder v. illness v. "harmful dysfunction," should still rage. Hedging is the most productive "investment" strategy in Las Vegas, Wall Street, and your neighborhood mental health clinic. Replacing one dogmatism with an earlier one is ill-advised. Be receptive.

Regardless, Heston delivers a chatty dialogue about common adult mental and personality disorders. Not included are statistically rare afflictions and childhood disorders which, our author feels, deserve their own treatments. So, Dr. Heston has written a nontechnical but authoritative everyperson's "*Diagnostic and Statistical Manual for Mental Disorders*" (DSM). Psychiatry's real DSM-III-R (American Psychiatric Association, 1987) is the most commonly used clinical handbook of labels and diagnostic criteria for mental disorders. Its widely accepted nomenclature allows mental health professionals to talk to health insurance companies and to one another. *Mending Minds* should enjoy a wider readership; at least, it is more understandable.

*Mending Minds'* first nine chapters describe common mental disorders. Included are depression (Chapter 1); bipolar affective (or manic-depressive) disorder

(Chapter 2); schizophrenia (Chapter 3); dementias (Chapter 4) associated with aging; anxiety (Chapter 5); alcohol and drug abuse (Chapters 6 and 7); an unique admixture of antisocial and somatoform disorders in Chapter 8; and sexual disorders and diseases (Chapter 9).

Chapters introduce each category of disorder with abbreviated case studies. These well-written illustrations are followed by succinct diagnoses (and descriptions), prognoses, an evaluation of behavioral and drug treatments, and realistic hints for those afflicted and those affected. Add Heston's appendices on resources, and *Mending Minds* amounts to a helpful handbook which wisely circumvents the commercial biases of pharmaceutical advertisements, DSM's jargon and technical obfuscations, and self-help gibberish from mental health opportunists.

Persons, for example, who are depressed, or phobic, or addicted are vulnerable to the whims of unscrupulous and misinformed practitioners. Effective intervention is especially problematic for rural Americans (e.g., Davidson, 1990; Murray and Keller, 1991). Disordered clients and their friends and families are quite distressed, naturally. They are unlikely to make the wisest consumer mental health choices, even when services are available. Information and sound advice as in *Mending Minds* will help. Unfortunately, Heston's appraisal is not complete.

Heston overlooks regressive cultural attitudes which make it difficult to fund new mental health treatment initiatives and, personally speaking, for rehabilitated clients to be socially reintegrated. Put directly, physical illnesses are judged differently than mental disorders.

The mentally disordered must stride two substantial hurdles. They confront not only their personal emotional travails; they must also circumnavigate insensitive attitudes and poor social planning to find affordable and efficacious intervention. Heston overlooks America's dis-ease with emotional health and focuses instead on clinical symptomatology and technologies for relief. Nonetheless, *Mending Minds* is useful and very readable. It is highly recommended.

## References

- American Psychiatric Association. (1987) *Diagnostic and statistical manual of mental disorders* (third revised edition) Washington, DC: Author.
- Davidson, O.G. (1990). *Broken heartland: The rise of America's rural ghetto*. New York: Free Press.
- Murray, J.D., and Keller, P.A. (1991). Psychology and rural America: Current status and future directions. *American Psychologist*, 46, 220-231.
- Wakefield, J.C. (1992). The concept of mental disorder: On the boundary between biological facts and social values. *American Psychologist*, 47, 373-388.