Health anxiety: Clinical and research perspectives on hypochondriasis and related conditions
By Gordon Asmundson, Steven Taylor & Brian Cox

Some degree of health anxiety, realistic or not, is a universal experience and has very important implications for effective health care delivery. For example, it is an important determinant in responses to medical reassurance, compliance with treatment and decisions to seek medical help. Despite this, the area had received relatively little attention until the 1980s. As the preface to this book points out, up to now, no single book has provided a comprehensive coverage of issues and developments in research, theory and treatment of health anxiety. This book is therefore very welcome, and it is not a disappointment. It is well structured, clearly written and provides an excellent and comprehensive overview of the subject.

The book includes some chapters that are largely descriptive, covering classification, clinical features and how health anxiety relates to other concepts and disorders such as somatization, hypochondrosis, anxiety disorders and personality factors. Other chapters look at understanding the psychological processes that may underlie health anxiety. This includes an excellent chapter by Martin, Lemos, and Leventhal on the psychology of symptom perception, illness representations and illness behaviour and a chapter by Salkovskis and Warwick on the cognitive model of health anxiety.

The book also includes chapters on assessment and psychological and pharmacological treatments. The chapters by Furer, Walker, and Freeston on cognitive–behavioural therapy for ‘intense illness worries’ describe in some detail a 14-session treatment programme. It will be of particular interest to therapists, and complements the chapter on the cognitive model. It also highlights other issues such as fear of medical procedures, health anxiety in those with chronic medical conditions or risks and fear of mental illness. Another chapter looks at patients who present with medically unexplained symptoms in primary care and considers some cross-cultural issues. It considers problems such as irritable bowel syndrome, fibromyalgia and chronic fatigue syndrome and primary care-based interventions for health anxiety.

I was pleased to see a separate chapter on health anxiety in the elderly given the impression that health anxiety and preoccupation with symptoms are more prevalent in old age. In fact, the authors point to evidence that hypochondriacal concerns are no more common in the elderly than in other age groups. They also look at the application of the cognitive model to the elderly and assessment and treatment issues. The book then has four chapters on health anxiety/hypochondriasis in related conditions: heart-focused anxiety; pain patients; psychotic disorders; and death anxiety.

I would strongly recommend this book to researchers and clinicians working throughout health care. It has up-to-date contributions from leading researchers and clinicians, the various contributions are well written and set out, and clinical vignettes are frequently used. It provides a good balance between a broad overview of the area and specific areas of interest and between the
theoretical and the practical. It is no surprise that the cognitive model is the predominant model throughout the book. This may be seen as a limitation but reflects the lack of convincing alternatives.

MIKE LUCOCK (Wakefield and Pontefract Community NHS Trust and Huddersfield University)

**Conquering anorexia: The route to recovery**

By Clare Lindsay


Although based on the author’s experiences of anorexia nervosa, this book is aimed towards anyone wishing to overcome an eating disorder. Through sharing her personal experience of living with anorexia and providing a detailed explanation of how she overcame her illness, the author aims to offer hope and proof that recovery from an eating disorder is possible.

The book is divided into four parts. In part one, the author explores the roots of her difficulties through reflecting on her childhood experiences. She talks about some of the personal characteristics and behaviours that she believes influenced the development of her anorexia, including a negative thinking style, low self-esteem and the intense sense of personal ineffectiveness she experienced in her day-to-day life. The second part of the book focuses particularly on the author’s experiences of seeking help. These include the support she received from her GP, her experiences of psychiatry, as well as the knowledge and understanding she gained from counselling.

In part three, she describes her experiences of day patient treatment and provides a step-by-step explanation of how, through learning to think and behave more effectively, she recovered from her anorexia. This process is highlighted throughout by detailed examples of the techniques she used to change the negative thought patterns and maladaptive coping strategies that were serving to maintain her eating disorder. In the final part of the book, the author provides further detail of the self-help strategies and exercises she employed throughout her recovery, including techniques to challenge negative thoughts and feelings, as well as exercises aimed towards developing assertiveness and an enhanced sense of personal effectiveness.

Although not written from a specific theoretical perspective, the author’s experiences can be understood within a schema-focused cognitive–behavioural framework. In particular, the author highlights the role her anorexia played in helping her deal with emotion, interpersonal difficulties and low self-esteem. In the latter sections of the book, she highlights the various cognitive techniques that she used to challenge and change her negative thoughts and feelings, whilst also emphasizing the importance of addressing underlying maladaptive schemas, such as personal ineffectiveness.

Anorexia is a complicated disorder that can be frustrating and difficult to understand. In many ways, this book tells it how it is, the text is easy to read, and diary entries give the reader a vivid insight into the experience of living with anorexia, as well as the challenges that accompany recovery. The book contains a variety of practical exercises, and as such would be a useful complement to therapy, although, given the recalcitrant nature of anorexia, I was unsure as to whether it would form an effective intervention in its own right. However, through highlighting that recovery is possible if one is willing to engage in the process of change, this book offers a realistic message of hope. As such, although primarily aimed towards sufferers, this book would be an insightful read for anyone wishing to understand the logic that lies beneath an eating disorder as well as the challenges that accompany recovery.

HANNAH TURNER (Clinical Psychologist, Specialist Eating Disorder Service, Southampton)
A tribute to the work of Beate Hermelin

Bright splinters of the mind: A personal story of research with autistic savants
By Beate Hermelin. Foreword by Sir Michael Rutter.

What a pleasure it is to read the stories in Beate Hermelin’s wonderful book. Stories about an artist who, despite having very little language, can produce stunningly accurate sketches of complex architecture. Stories about a mute man with autism who can signal to you, in lightning speed, whether a number is a prime number—no matter how big that number is. Stories about other people with autism who can compute faster than is believable what day of the week any date will fall, be it a date near the present, or far into the distant past or future. Stories about a person with autism who can simply hear a difficult piece of classical music once, and reproduce it with remarkable accuracy immediately. And all this in a person who has received no formal training in musicianship. Stories about a person with autism who can acquire vocabularies and grammars easily and quickly, and apparently without limit. And more.

But Beate Hermelin, as she is known, is much more than just a story-teller. This is a woman who, from the outset of her career, now spanning four decades, has combined her own wonderful artistic sensitivity with a detective-like rigour in experimental psychology. As a student, she studied at the Jerusalem Art School and then trained as a developmental neuropsychologist to work in one of the most important units set up by the Medical Research Council in the UK, the Developmental Psychology Unit. Together with her long-standing collaborator, the late Professor Neil O’Connor, they pioneered the experimental investigation of the psychology of autism. Her incisive observation and hypothesis testing in the field of autism have generated important research, which, over many decades, has proven reliable and valid.

In this delightful book, she provides beautiful illustrations of the products of these savant minds, who, despite clear evidence of learning disability, can function at a superior level in one domain. Hermelin and O’Connor correctly recognized that such individuals might be able to teach science a lot about the nature of intelligence and talent in the general population, even though savants are an anomaly. At a single stroke, the existence of such cases disproves the notion of ‘g’, or general intelligence, in the sense of a person’s ability being wholly defined by some general learning mechanism that is domain-independent. Rather, such cases strongly suggest there may be some kind of modularity within the cognitive system. Hermelin is as comfortable when trying to track down the causes of savantism as she is in exploring the theoretical significance it holds for models of the typical mind.

But in writing this book, Beate Hermelin also reveals much about her own mind. She has a mind that is drawn to understand particular things in their larger context. To understand the person with autism who is a ‘calendrical calculator’, she takes us on a tour of the history of calendars and the measurement of time. To understand the person with autism who can draw with astonishing accuracy in 3D, she takes us on a tour of the history of art. To understand the mathematical genius of another person with autism, she walks us through the history of the theories surrounding that mathematics question. To make sense of the person with autism who can learn languages so easily, she considers what we really understand about language acquisition. The result is a book full of erudition and fascination, a woman who can see both the detail and the larger picture.

Beate Hermelin decides in this book to adopt the theory advocated by her former Ph.D. student, Uta Frith, as a useful framework within which to make sense of autistic savants. The theory is that of ‘weak central coherence’, which asserts that people with autism devote too much attention to local detail at the expense of processing the larger, global picture. Her claim is that savantism, which occurs far more often within autism than within any other condition, may be the result of this underlying weak central coherence. Through 40 years of elegant experimental testing, she puts together the evidence for this view. And on the penultimate page of the book, Hermelin writes that ‘It is this enjoyment of “doing it” that should motivate a new generation of experimental psychologists to attempt to prove me wrong in my conclusions about the nature of
autistic savant talent’ (p. 177). ‘Doing it’, in this case, refers to science itself. It is characteristic of her that she remains firmly committed to the search for truth, through the scientific method, despite being past the age of retirement. Her work does not cease, and she invites the debate.

Hermelin and O’Connor’s brilliant work, going back into the 1960s, had already determined in highly lawful ways that savants detect such lawful regularities, and took this as evidence that such talent was not ‘mere’ parroting or rote memory, but went beyond such superficial processing to reveal a real, if implicit, understanding of the lawful regularities underlying these domains. But whereas Hermelin, within this important gem of a book, successfully shows how her data can fit some of the predictions from central coherence theory, I think she has also provided strong data for the systemizing theory. This is, though, no criticism of Hermelin, as the systemizing theory is a very recent account. But as might be expected, her latest book stimulates new ideas and pushes forward the science of the mind into the new century.

SIMON BARON-COHEN (Autism Research Centre, University of Cambridge)
These early European descriptions of OCD, especially the French and German perspectives, paved the way for the psychological perspective that was to emerge from the beginning of the twentieth century. Until this time, OCD was considered a medical condition, which warranted treatment within a medical framework (Rachman & Hodgson, 1980). Health anxiety: classification and clinical features. In G. J. G. Asmundson, S. Taylor, & B. J. Cox, eds., Health Anxiety: Clinical and Research Perspectives on Hypochondriasis and Related Conditions. Chichester: Wiley. Aw, D. C., Thong, J. Y., & Chan, H. L. (2005). Health anxiety is an obsessive and irrational worry about having a serious medical condition. It’s also called illness anxiety, and was formerly called hypochondria. This condition is marked by a person’s imagination of physical symptoms of illness. Or in other cases, it’s a person’s misinterpretation of minor or normal body sensations as serious disease symptoms despite reassurance by medical professionals that they don’t have an illness. What’s the difference between concern for your health and health anxiety? If your body is sending you signs that you’re ill, it’s normal to be concerned. He...