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PSYCHIATRIC INTERVIEWING AND ASSESSMENT

Comentario: S.M. Martinho

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REVIEW

The incursion into the world of psychiatry does not always constitute a simple and immediate task. Newly arrived, the most natural and intuitive action for the young inexperienced doctor is to eagerly address the manuals of psychopathology, mental examination, and psychiatric interview. However, with the course of training, it will be noted that there is an evident disparity between the well-shaped concepts described in compendia and the angular nature of the patients presented in clinical practice. Only very rarely patients will come out of a book. In fact, many manuals struggle to meet the idea that patients are not their pathologies. In that sense, questions, attitudes, postures are often conveyed based on disease, forgetting to stress the fact that disease does not happen in a vacuum, but in a person. Generally, this is the fundamental benefit of Psychiatric Interviewing and Assessment, the open recognition that psychiatric interviewing goes far beyond psychopathology and mental examination, and that interactions are manifestly affected by, not only the person interviewing and the person interviewed, but also by the relationship established. Of course, patients won't come out of this book either, but they're more likely to come out of this one than others. There's no such thing as crystalline examination. Interviews are likely to be contaminated by inhibitions, uncertainties, dilemmas and conflicting agendas, particularities that will inevitably arise from the contact of two human beings. This aspect of psychiatric practice is regularly forgotten in manuals, and information about facing these peccadillos is often scarce. With this in mind and almost in a conversational like style, the authors go through several topics of everyday practice, with the focus resting on the steps necessary to create and preserve an efficacious therapeutic relationship, emphasizing possible obstacles to this purpose. All kinds of advice are provided. For example, positions surrounding gifts, humour, physical contact, abuses of power or self-disclosure are addressed with eyes on the construction of a professional character, who tries to be both technically competent and ethically upright. Surely, these are not the typical approached themes, because they are not certainly immediate from a theoretical standpoint, they seem to arise only through the course of practice. However, this book constitutes a helpful heads-up.

We would like to draw attention to Section 3, in which difficult interviews are dealt with. A nice portion of the section is dedicated to the challenges facing the psychiatrist when dealing with the ultimate ununderstandable, as Jaspers put it. It provides advice on how to conciliate a ruptured empathy, on how to negotiate with the patient with psychosis, but it also tries to give an account of the patient's inner experience and all the potential oppressive scenarios in which he might be implicated, such as compulsory treatment. The next part of the section contemplates the unpopular patients and regards individuals who, generally, induce a sense of helplessness and frustration in psychiatrists. Examples of these patients are embodied by the "somatisers", by the patients who do not acknowledge that they have recovered, by the patients who lie, the ones who persistently complain or the ones threaten the doctor.

The psychiatrist's mission regularly involves more than just the patient. This is to say that interactions with family members are a frequent event in psychiatry. Whether to gather better information about illness characteristics or to assess social support, family interviews are an integral part of the job, and not always a grateful one. In Chapter 13, the techniques explored are certainly helpful in controlling and directing family interviews, in order to obtain the best information and avoid possible confrontation.

Fluid and didactic, by the end, the book looks at a fundamental aspect of psychiatric practice: risk assessment. Suicide and violence are risks that the psychiatrist must evaluate and perceive. Always recalling the imponderability of the ultimate situations, the authors put risk assessment as a result of the patient's global scenario, drawing focus to certain factors that may elevate the probability of these outcomes and to which one must be alert.

We finalize by saying that we feel the book's mission is not to establish doctrines, but to provide practical and useful insights, stressing the dynamic and creative exercise of becoming a psychiatrist. We believe that this is a refreshing and inspiring position. Its best quality lies on the rare recognition that psychiatrist-patient relationship is, in fact, the relationship between a person who is a psychiatrist and a person who is a patient. A valuable acquisition for both residents and specialists.