Controversies and dilemmas in contemporary psychiatry

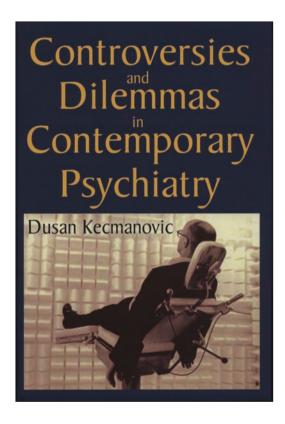
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Dusan Kecmanovic is one of the most prominent psychiatrists in the former Yugoslavia. Before leaving Sarajevo in 1993 he was Professor of Psychiatry and Political Psychology at Sarajevo University, and a member of the Academy of Sciences and Arts of Bosnia and Herzegovina. His publications – 24 books and more than 250 papers (as the primary author) published by reputed publishers and in respected journals – made

him an internationally acknowledged scholar. As Professor Kecmanovic authored or edited a great many widely read psychiatry textbooks he has contributed enormously to the education of medical students, psychiatric residents, psychiatrists, psychologists and psychiatric social workers in the former Yugoslavia in general and in the Republic of Bosnia-Herzegovina in particular.

Kecmanovic's latest book is entitled Controversies and Dilemmas in Contemporary Psychiatry. As the title suggests, it deals with those topics in psychiatry that are debatable in the first place. And there are many of them. As Kecmanovic put it, if we take all the dilemmas out of psychiatry there is not much psychiatry left. Kecmanovic does not take sides. He dissects arguments, casts light on the pros and cons. He explains how some dilemmas might be resolved, and why others are not likely to be resolved because the resolution of them is simply beyond the scope of psychiatry. Kecmanovic is focused on the most important and most intriguing questions that psychiatrists cannot help but confront - no matter whether they are more interested in conceptual issues or in day-to-day clinical practice. Indeed, most psychiatrists are not keen on discussing controversies and dilemmas in contemporary psychiatry because they believe that debating burning psychiatric questions unveils the weaknesses of psychiatry and thereby tarnishes the public image of psychiatry. In this book Kecmanovic forces psychiatrists to face up to the aspects of their job that are only apparently question-free. That is only one of the reasons why the book deserves their attention.

Kecmanovic has chosen to discuss those subject-matters that, in his opinion, contain the main controversies and dilemmas in contemporary psychiatry, such as the definition of mental disorder, mental health, similarities and dif-

ferences between physical diseases and mental disorders, and conceptual discord in psychiatry. When closely inspected, these topics reveal the following controversies and dilemmas: A mentally ill person lives in two worlds; Psychiatrists do not share the same view of the mind-body relationship; The proponents of each psychiatric model practice psychiatry as though only the model they advocate is legitimate; Psychiatrists are reluctant to acknowledge that they are, inter alia, the guardians of social peace and order; Psychiatrists diagnose mental disorders every day, although there is no generally agreement regarding the definition of mental disorder; Psychiatrists reduce mental health to the absence of mental disorder; Although the official classifications of mental disorders state that there is no difference between somatic disease and mental disorders, the dissimilarities of these pathological phenomena largely outweigh their similarities. Attempts to increase the reliability of mental disorder diagnoses have been made at the cost of the desubjectification and decontectualization of mental disorders; The categorical and dimensional concepts of mental disorders are difficult to reconcile; The methods of causal explanation and meaningful understanding without which psychiatry cannot do, are two essentially different methods; Frequent changes in diagnostic classifications have not been accompanied by a change in the diagnostic work of a large number of psychiatrists throughout the word, and The mental healthcare market reduces the psychiatrist to a psycho-pharmacologist or pharmaco-psychiatrist.

Kecmanovic devotes due attention to each of these controversies and dilemmas, deliberates on them, and indicates how serious their fall-out is.

I especially enjoyed reading the first chapter entitled: "Towards a Definition of Mental Disorder". It is the most comprehensive and most emphatically analytical. Kecmanovic gives his own definition of mental disorder that reads as follows: A mentally ill person deviates from the prevailing behavior and belief standard in a given environment; one or more mental functions are impaired in such persons, and this is preceded or followed by psychological dysfunction; their deviation and the impairment of one or more mental functions happen against their will, and causes the

mental suffering of the respective person. The second chapter (From Normality to Mental Health) deals with mental health. According to the author, there are three key concepts of mental health: the clinical-pragmatical, the positive psychology view of mental health, and the humanistic-philosophical approach to mental health. Kecmanovic favors the humanistic-philosophical approach. He claims that only this approach is in tune with the very nature of human beings. Unlike some renowned scholars, he contends that physical diseases and mental disorders differ in many regards. His position on this topic is expounded in the third chapter (Physical Diseases and Mental Disorders: Should They Be Differentiated?). Kecmanovic has managed to trace a large number of features of physical diseases and mental disorders that do not allow us to put them on the same footing, not to mention to consider them as one and the same. In the last chapter the author analyses the origin and consequences of the legitimate existence of several general conceptions or models in psychiatry. Psychiatric models are incommensurable to the point of having nearly nothing in common, which virtually means that it is hard even to imagine a dialogue between them. Given the deleterious effects that conceptual discord has on psychiatric practice it is astonishing how little attention psychiatrists pay to it. Actually they take it for granted. One thing is for sure, psychiatrists are not competent to resolve the problem of conceptual discordance in psychiatry as its resolution depends on the answer to the mind-body puzzle. And this question is a pre-eminently philosophical question.

In conclusion, the book *Controversies and Dilemmas in Contemporary Psychiatry* is a must-read. It provides a balanced stance between psychiatry iconoclasts and psychiatry iconoclasters (or iconophiles), that is, between psychiatry critics and psychiatry defenders. There is no better way to describe Kecmanovic's general position, as far as psychiatric controversies are concerned, than to quote him. He writes: "To designate and analyze the quandaries in psychiatry does not mean to put psychiatry in question. It should rather be the mark of a reflective view of psychiatry".