

edited by Paola Artioli

Autopsy of a suicidal mind by Edwin S. Shneidman
Oxford University Press, New York, 2004, pp. XX + 177,
\$ 19,95.

Arthur's suicidal mind

Autopsy of a suicidal mind is the latest masterpiece by Edwin S. Shneidman. This is a book of rare quality for the understanding of suicide. The core of this volume is Shneidman's compassionate approach to suicide which emerges from the analysis of a gifted young man's self-inflicted death. No doubt the book offers a unique approach to anyone for making sense of suicidality. Shneidman's definition of suicide is also empowered in the pages of this book ("*Currently in the Western world, suicide is a conscious act of self-induced annihilation, best understood as a multidimensional malaise in a needful individual who defines an issue for which the suicide is perceived as the best solution*").

Nowadays, suicidal behavior is identified as a major public health problem and a considerable drain on resources in both primary and secondary health care settings in many countries worldwide. Publications on suicide abound in the international literature but very few of them can be considered enriching contributions for the understanding of a suicidal patient. During his long lasting career, Shneidman taught us a scientific and philosophical approach to suicide. He pioneered the development of a scientific discipline, suicidology, where all the learning on suicide is conveyed.

Back in 1949, Shneidman, during his duties, found himself surrounded by hundred of suicide notes. His scientific mind led him to consider a study between simulated and genuine suicide notes and for the first time a man was studying suicide through a scientific method. That particular day, he told me recently, his life was changed for ever and a suicidologist was born. After a lifetime dedicated to the study of suicide, Shneidman proposes himself once more as a researcher of this important and devastating phenomenon. In *Autopsy of a suicidal mind* he is a tactful and curious detective who has the goal to clarify the inner motivation behind the death of the young Arthur. For this purpose he recruited eight opinion leaders in the field of suicidology and asked them a consultation on this death. All of them are well acquainted with the author and some of them shared his first efforts in the development of the Los Angeles Suicide Prevention Center. People familiar with Shneidman's work will appreciate the opportunity given by this book to reunite the author with Norman Farberow and Robert Litman in a joint project as in the beginning and in the development of suicidology.

The main source of information is a long suicide note left by Arthur together with transcripts of interviews with the members of the family, with his best friend, and with two mental health professionals (a psychiatrist and a psychotherapist). The author states that "In a sense, this case resolves around the note. It is in the note that the key questions are

posed or implied". On the other end, from each interview particular aspects of Arthur's life emerge and the reader is taken through a fascinating exploration of the feelings of each survivor as well as what they believe it might have been done to save Arthur. Also, through this book we are offered a rare opportunity to learn more about the dynamics of each member of a family with the others and how such dynamics can influence suicide risk.

Shneidman is back to the task of a psychological autopsy which himself developed together with the people involved in the Los Angeles Suicide Prevention Center. According to Shneidman, there are at the least three questions to which the psychological autopsy can help find answers: 1) Why did the individual do it?; 2) How did the individual die?; and 3) What is the most probable mode of death? In the death of Arthur only the first question needs an answer. The Author proves once more that behind suicide there is always what he calls *psychache* meaning an ache in the psyche and suggested that the key questions to ask a suicidal person are "Where do you hurt?" and "How may I help you?". He suggested "that suicide is best understood not so much as a movement toward death as it is a movement away from something and that something is always the same: intolerable emotion, unendurable pain, or unacceptable anguish. Shneidman suggests that reducing the level of suffering the individual will choose to live". The suicide of Arthur described in the book was the result of profound mental pain. Shneidman also pointed out that the main sources of psychological pain, such as shame, guilt, rage, loneliness, hopelessness, and so forth, stem from frustrated or thwarted psychological needs. For the understanding of these needs in suicidal individual he refers to the list given by Murry in his book "Explorations in Personality, 1938". These psychological needs include the need for achievement, for affiliation, for autonomy, for counteraction, for exhibition, for nurturance, for order, for understanding.

Mental health professionals often encounter suicidal patients, sometimes with a suicide risk similar to Arthur's. No challenge is more stressful for those involved in mental health care than treating a suicidal patient. The suicidologists consulted by the author agree with most of the issues arising by this case. Each one of them, however, has that little or that much more optimism on the outcome of this case if they had treated Arthur. But the author concludes the book with the assumption that he could have saved Arthur. He describes the role of anodynic psychotherapy in the mollification of psychological pain and how he would have worked with him. The author suggests that he would have helped Arthur to reduce the pain arising by the frustration of Arthur's contradictory psychological needs for inviolancy, achievement, order and succorance.

After a lifetime dedicated to suicidology Edwin Shneidman remains eager to learn more on what lies behind human self-destruction. Suicide prevention is at the top of the agenda of many countries and more and more resources are

available to perform studies on suicide. Nevertheless, much less emphasis is placed upon what goes on in a suicidal mind. Clinicians need to put together information coming from the massive literature on suicide with the tactful understanding of frustrated psychological needs that lead to *psychache*. We desperately need mental health professionals that are able to talk of suicide empathically and that have the skill to accept patient's mental pain and handle it. A compassionate approach to suicidal patients is far from widespread and stigmatization remains a major issue even for survivors. Through the pages of this book we also learn of their grief and how a suicide of one person affects more people than we generally

think. Besides, the book itself is the answer to Arthur's mother need for more insight and solace for the death of her boy.

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Preventive Strategies for Schizophrenia Disorders - Basic Principles, Opportunities and Limits edited by Alessandro Grispi
Giovanni Fioriti Editore, Roma 2003, pp. X + 369, € 50,00

The book *Preventive Strategies for Schizophrenia Disorders - Basic Principles, Opportunities and Limits* edited by Alessandro Grispi represents the result of a remarkable effort to offer a variety of different perspectives on the status of schizophrenia prevention. Currently, schizophrenia can only be contained through treatment, but not cured. It still has a devastating impact on the life of millions of patients and families worldwide. Thus, for an illness that imposes such a heavy toll and whose burden can be only partially averted, prevention is an appealing approach. However, despite considerable progress in elucidating some of the neurobiological substrates of schizophrenia, prevention is still "hypothetical, though theoretically possible", as summarized by the editor of the book.

The book succeeds in giving the reader both a sense of the public health importance of the topic and an appreciation of the challenges that research in this area has to contend with. In retrospect, a more appropriate title would have been

"Towards Developing Prevention Strategies for Schizophrenia Disorders". Clearly, the reader looking for solutions ready to be implemented at the community level will be disappointed. But the book reflects indeed the state of the science of schizophrenia research. Chapters by experts in genetics, neurodevelopmental psychopathology, neurocognition, pharmacotherapy and psychotherapies are organized into a three main section addressing respectively basic science, strategies, and commentaries.

The book is overall informative, broad, and multidisciplinary, though not always interdisciplinary. The obvious limitation is that it comes across as rather heterogeneous and diverse, without an exhaustive and in-depth analysis of the problems. But this limitation is intrinsic in the intent to offer a variety of points of view in a volume that is still manageable and can be easily carried in your commuting bag. Junior researchers approaching the field of schizophrenia prevention would find it useful as introduction, and more senior investigators would find it thought-provoking and hypothesis-generating.

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