Remembering Trauma

McNally, Richard J. (2003). Cambridge, MA: The Belknap Press/ Harvard University Press. 420 pp. \$35.

This is an important book, both in its timeliness and its topic. The issue of memory in response to trauma has been a controversial clinical, research, forensic, and political issue for several decades. On one end are those who believe that trauma survivors may have repressed or dissociated memories that emerge only later, sometimes aided by psychotherapy. On the other end are those who believe that such cognitive phenomena do not occur. There is an intense emotional cost on both sides of the issue. Some "perpetrators" who were criminally convicted, as in several davcare cases in the 1980s, suffered serious harm based on flimsy evidence that is now known to have been poorly collected based on suggestive, leading questions in very young children. Some trauma victims and their advocates, however, have borne the cost of not being believed in response to very real severe sexual and physical abuse. The recent movie Capturing the Friedmans provides a compelling example of one such case and speaks to the continued controversy.

In Remembering Trauma, McNally, a professor of psychology at Harvard University, synthesizes a voluminous amount of laboratory and clinical studies on the topic of memory and trauma. It is an erudite, exceptionally well-researched book that offers probably the best and most comprehensive summary of the topic as yet available. It is an invaluable resource for anyone interested in the fine details of such studies, their methodology, a critical understanding of what conclusions can legitimately be drawn, and a historical survey of the field. It addresses a wide array of topics, including amnesia, definitions of trauma and posttraumatic stress disorder, biologically based studies of brain changes in response to trauma, courtroom debates over recovered memory, Freud's early struggles with the legitimacy of sexual abuse memories, psychotherapies (including hypnosis) to uncover trauma memories, and how memory is currently understood within a cognitive psychology framework. It is an ambitious academic book that likely will be widely read.

However, the book is also somewhat disappointing in landing too forcefully on one side of the debate. A sentence from the end of the book summarizes the basic thrust throughout: "The notion that the mind protects itself by repressing or dissociating memories of trauma, rendering them inaccessible to awareness, is a piece of psychiatric folklore devoid of convincing empirical support" (p. 275). This strong statement, while girded by a genuine attempt to review the academic literature, appears premature and ultimately perhaps a disservice to what appears to remain a less than black-andwhite issue.

Undoubtedly there have been excesses in both directions. Clinicians in the past few decades, especially early on, sometimes leaped too quickly into instilling or believing survivors' trauma memories without an understanding of possible fallacies of such memory. Researchers have at times given insufficient credence to clinical observations of recovered memory. What is likely indisputable, however, is that more research is needed. Some conclusions can be drawn at this point. It is now well known that questioning (particularly of children) needs to be styled in careful ways to avoid creating false memories. It is known that most trauma survivors remember all or at least part of what happened to them. It is recommended that hypnosis not be used to uncover trauma memories. Such conclusions were provided by the 1998 American Psychological Working Group on Investigation of Memories of Childhood Abuse and are discussed persuasively in this book. However, in addition to describing existing research (which is very helpful), at times McNally appears ready to draw strong conclusions when there appears to be much more to be learned (which is less helpful). As another example, he speculates that there would be clear evolutionary benefits for remembering trauma, but that he cannot imagine any reasons for processes of repressing or dissociating trauma memory. Yet it may well be the case that further research may help to untangle the basis for the persistent clinical observation that some people at some times appear to repress or dissociate trauma memories. Certainly it is understood at this point that, if such phenomena do exist, they affect only a small percentage of survivors. But at the very least, more needs to be learned to help mesh the research literature with clinical observation. This book is an important paving stone on the path toward such integration. It consolidates a massive intellectual inquiry into a focused book and sets the stage for the next steps in work. However, it is by no means an end to the debate.

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Treating Chronic Depression: Psychotherapy and Medication

Badal, Daniel W. (2003). Northvale, NJ: Jason Aronson. xxvii + 271 pp. \$60.

This book is by a seasoned psychiatrist who conveys the wisdom gained in 55 years of private practice, combining his training and experience as a psychoanalyst, a flexible eclecticism, and an immersion in the rapidly accumulating research on mood disorders. He terms his treatment approach "combined"—that is, the use of all forms of psychotherapy, where and when appropriate for the particular individual, plus medication. He illustrates his approach well with case examples.