Book Review


As our understanding of the complexities of the phenotype and clinical course of Tourette Syndrome (TS) has grown in parallel with the proliferation of neurobiological studies in the past decade, the capacity to develop new scientifically sound treatments based on a deeper understanding of the pathophysiology of the disorder has emerged. However, despite these advances, there is no cure for Tourette Syndrome and new and improved treatments are still needed. Further advances in management and treatment necessitate collaboration between basic and clinical scientists to develop comprehensive treatment models framed within our growing neurobiological understanding of the disorder.

In the introduction to their book Treating Tourette Syndrome and Tic Disorders: A Guide for Practitioners, editors Drs. Woods, Piacentini and Walkup highlight the explosion of interest in TS in recent years, and with it, the need to develop multidisciplinary care for patients with TS throughout the life cycle. As the authors state, based on the evolution of an integrated conceptual model of TS, the Tourette Syndrome Association (TSA), a national organization providing advocacy for families, medical advice for clinicians and research support for investigators, has been instrumental in supporting the development of comprehensive, integrated models of treatment through the formation of the TSA Behavioral Sciences Consortium in 2002, and more recently the Clinical Trials Consortium in 2007. The editors are founding members of the Behavioral Science Consortium, which serves as a conceptual foundation: hence the purpose of the book is to guide practitioners on the comprehensive treatment of patients with TS. Accordingly, we have reviewed the book with a focus on how closely it adheres to the overarching goal.

Textbooks on TS published in the past two decades include Shapiro and Shapiro’s (1988) and Leckman and Cohen’s (1999) comprehensive volumes, now both in their second editions, Kurlan’s Handbook (2005), and an Advances in Neurology series (2006). Given the time elapsed and research explosion since some of these texts were published, a new book for practitioners is timely in 2007. However, these prior volumes are a hard act to follow. Any new book will inevitably be compared to these formidable predecessors.

This book is divided into three parts: Part I “Understanding Tourette Syndrome,” Part II “Clinical Management of Symptoms and Associated Conditions,” and Part III “Clinical Management of Secondary Problems.” There are a total of 13 chapters covering diagnostic and therapeutic measures. The scope is comprehensive, ranging from phenomenology and pathophysiology to pharmacological and behavioral treatment.

Part I reviews characteristics and phenomenology of the disorder, with wise attention to the psychiatric comorbid disorders, such as attention-deficit/hyperactivity disorder (ADHD) and obsessive compulsive disorder (OCD), which are often the primary source of distress and impairment in clinically referred patients with TS. Chapters on genetics, neurobiology and neurocognitive factors review and weave in basic science relevant to comprehensive treatment.

Part II focuses on specific treatments, including pharmacological and psychosocial treatment of both tics and the primary psychiatric comorbid disorders. One major highlight is the detailed discussion of habit reversal therapy, which would be expected, given the editors’ expertise in this area. Part III addresses management of the patient within the family, and his/her educational/occupational environments, areas that are often neglected in most treatment literature.

A significant strength of the book is the scope of the chapters, which cover primary areas of concern to the practitioner, particularly the psychiatric comorbid disorders and their management. Some chapters are particularly well written and informative, such as the chapter on genetic and neurobiological bases for TS, which includes references up to 2006; the figures in this chapter are a specific highlight. Part III with the focus on family, school and social issues is a significant strength of the book, and would be of value to educators and school psychologists. The chapter on learning and school difficulties addresses areas of great importance to educators, including management of classroom behavior, education of peers and parent-school collaboration strategies. The chapter on social and occupational difficulties includes family and peer issues, self concept and even legal protections for persons with disabilities, a topic that is missing from many texts.

However, there are some areas that could be enhanced in a future edition. For example, only five of the thirteen chapters bear the name of at least one of the three editors. This is in contrast to the Cohen and Leckman text, in which 18 of 21 chapters have one or both of the editors as co-authors. We highlight this point only to provide a possible explanation for why the book is repetitive at times, with some of the same points emphasized by different authors in different chapters, while at the same time varying in its consistency (i.e. structure, detail) from chapter to chapter. Secondly, given the overarching purpose as a guide to comprehensive, integrated treatment, we would have liked to see some case examples woven in, or perhaps a summary chapter in which a complex case is described from initial evaluation to treatment response. Case examples would provide a colorful and lively dimension as an illustration of the principles the editors bring to the reader. In addition, there were very few tables and diagrams, the presence of which a busy practitioner might find particularly useful. Inclusion of an author index.
and one primary bibliography at the end of the book (with the addition of at least one missing reference) would enhance a future edition’s readability.

The chapter on medical management, which is well written and comprehensive, could be enhanced by the addition of a recommended algorithm and systematic approach to prioritization of target symptoms for treatment of the complex TS phenotypes with which the editors are very familiar: the triad of TS, ADHD and OCD. In addition, a second edition would be augmented by a discussion of the need for review of alternative treatments and supplements, given widespread use in the community. Finally, the next edition could be strengthened by the addition of a chapter on quality of life issues, and the importance of systematic assessment of patients’ strengths and resiliencies to facilitate treatment planning.

In summary, overall this is a good first edition book on TS for child and adolescent mental health, neurology, and pediatric clinicians and educational specialists. It provides an up to date and comprehensive starting point as a guide for practitioners on integrated treatment of TS, with significant strengths in the areas of management of the psychiatric comorbid disorders, psychosocial treatments, and strategies for management of the environments in which individuals with TS live, attend school and work. We see this book as an important guide for treatment of these very interesting but complex and challenging patients and we look forward to an enhanced next edition in several years, given the developing evidence base from large-scale clinical trials currently underway by the Behavioral Sciences Consortium and future Clinical Trials Consortium studies.

References
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