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The reviewers quoted on the back cover call the author of The Book of Woe several names such as Woody Allen, Kierkegaard, Columbo, and Dante, as the hilarious detailed politics of modern psychiatry's latest Diagnostic and Statistical Manuel (DSM-5) are provided to the medical profession. As a practicing psychiatrist for almost fifty years, I never knew how the DSMs were created over the decades. I just accepted all DSMs for what they seemed to be -- reasonable categorizations of the mentally ill signs and symptoms enabling the art and science of medicine, specifically "psychiatry," to formulate medical treatment. But after reading this book, I sort of join the cited reviewers saying the author is like Dean Martin roasting the texts of Don Rickles and other celebrities -- a good time can be had as good people criticize the exalted works of others.

The book details the history of the naming of diseases, leading to the debut in 1952 of the Diagnostic and Statistical Manual of Mental Disorders -- the DSM of the American Psychiatric Association. Greenberg calls it "the book of woe." Then the naming controversies of many, if not most psychiatric disorders are presented. The detailed debates and conflicts described are fascinating and totally new to me. The controversies as described are novelesque, humorous, personalized, and entertaining to read. Many disorders have come and gone, from homosexuality to Asperger's, and each has its fascinating intellectual and disordered story.
Shocked, disappointed, and briefly disturbed, upon thinking it through, I cannot deny the benefits of the DSMs, flawed as I now understand them, they enable coherent psychiatric practice and benefits to most patients and others with the extremely complicated mental suffering potentially in almost all human behavior. Perfection is hard to find, especially in a fluid inexact medical discipline--just pick up the newest textbook for any medical field.

Science itself prevents infallible dogmatic science in the Medical Profession. Ultra-complicated and fluid medical disciplines have little "real scientific data" justifying "certainty", because the world is filled with the super-nature of humanity's unique ability to go beyond what is found in nature. Nature itself has missteps leading to imperfection and instability: Major science changes every five years because someone/everyone will always come up with a better idea. Medical science changes every 2 years at least. The chemistries between humans differ and change as much as their faces. Patients change every week. Most humans change daily. Each human brain's trillion synapses connect more than three billion neurons; the brains' thousand, at least, neurochemical pathways will fluctuate with each other interrelating with every part of the body; the hundred known neurochemicals will interact with the other hundred or more unknowns; non-chemical ideas (spirit), from winning the Super Bowl to grace before meals, impact on psychophysiology; and cultures offer a million stimuli daily some of which will permanently inflame and deform brain areas, especially in the young. Thus, effective medical treatments are both delicate-immeasurable art and educated-guessing science--approaching at times schizophrenic levels.

And that is what Greenberg discovered and described--vividly, humorously, cogently, using ordure phraseology often--"The definition of mental disorder is bullshit" (p118)..."crap" (p 132). While Greenberg confined himself to psychiatry, all his criticisms can apply, at some level, to the entire practice of medicine. He, as is now common, imposes "infallible" science: For example, Greenberg writes, "the commonsense definition of disease--'a progressive physical disorder with known pathophysiology'" (page 114), demands a universal lucid biochemical physical basis not to be found in "Definition of a Mental Disorder" on page 20 of the DSM-5 nor is such present for most of the forty page list of mental disorders in DSM-5.

Greenberg's definition totally ignores the human predicament of complexity and spirit obvious in all nature. A less demanding more functional definition: "A disease or clinical disorder is the chronic abnormal/unnatural functioning of a body part causing suffering and/or entropy sometimes correctible by the art and science of medicine." Basically, as Hippocrates profunded, without need to state, that: Academic scientific analysis of psychiatry and all medicine will rarely provide: permanent science; simple legalisms; biblical commandments; unchangeable procedures; absolute record requirements; mandatory principles; rational government or third party control by laws; grand round presenters capable of accepting criticism; infallible salutary strategies guaranteeing outcome (or income); an impeccable taxonomy; functional Research Domain Criteria without spirit or art; or textbooks without treatment failures, adverse consequences, many unwanted side-effects, and control/placebo successes nearing forty percent (the latter actually documenting "the art of medicine" and its impact on all from natural to spiritual to pathophysiological). Hippocrates knew that his seven pointed Oath, which I took and said every Sunday for fifty some years, was all that was needed for the Art and Science of Medicine.
Hippocrates was heavy into art (Yes, a case can be made that was almost all he had.). But it worked for many and he knew it would always be a necessary if not the most important part of human healing.--"Analytical absolutes are unneeded, inappropriate, and transitory, so make that interaction count!" is a good technical summary [1] of the Hippocratic Oath (and all other laudatory human interaction including the Art and Science of Medicine, which can continue rationally to include the DSM-5 which uses "disorder" rather than "disease"--a nuance which may reduce criticism from those more "scientifically" demanding).
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