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Ten books

Chosen by Rebecca Lawrence

It is quite a tall order to select ten books that have had a significant influence on my professional life as a psychiatrist, so I decided not to do it. Instead I searched my house for those that were most worn and shabby, as well as the ones that lie next to my bed and never quite make it back to the shelves. It was there that I found both the books, and the stories, that have haunted my thoughts through the years, and have helped me try to make sense of life and work. There were more than ten, of course, and it is hard to choose. I feared my choice might not be sufficiently intellectual, that I might appear a little shallow, but there is no point in dissimulating. I have in the past read books that I hoped would show me the things that mattered. But they didn't – so why pretend they did? These are books that I have gathered over the years; I hope there will be more to come, but also that these ones will stay with me.

Like many others, I increasingly read a lot of eBooks, and I find them highly convenient, if a bit too simple to purchase! My Kindle bursts with books read and unread, and is never far from my side. I welcome them, and for someone as myopic as me, they can be easier to read. But I have been rereading my selected books in recent weeks, and most of them are old and made of paper; some of them are falling apart, with that ancient smell of libraries lost, awakening all sorts of senses and memories.

I work as an addiction psychiatrist, which has undoubtedly influenced some of my choices. However, I think the greatest impact of all comes from the voice of the person telling the story. Some of my choices are memoirs, some are more 'medical', but they are all a glimpse into someone else's life or mind, and that, to me, is psychiatry. We need to learn the science and biology underpinning illness, but we will never actually reach it without some understanding of the mind that experiences it, which may seem quite alien to us at times. I am a psychiatrist with lived experience of bipolar disorder, which of course informs my views. But I am just one person, with one experience, and reading stories about, and by, others will always tell me more, besides being fascinating, harrowing and often enjoyable.

Drinking: A Love Story[1] by Caroline Knapp

There are many memoirs written about addiction, and this is one about the agonies, as well as the pleasures, of excessive drinking. It describes the damage, the pain and the attempts to quit, but what I found unique was Knapp's telling of her love affair with alcohol. Even though she is writing from a subsequent position of sobriety, her descriptions of wine, and the rituals that surround its consumption, are filled with yearning, and it is this that captivates. Her prose is beautiful, both when she writes about 'passion, sensual pleasure', as well as the lies and losses that come with drinking. When I read it, I seem to understand why she drank for so long, despite knowing the physical and mental consequences. I almost regret when she stops drinking, which is a terrible admission, but perhaps conveys some of the grief when the love story ends. Knapp was the daughter of a renowned psychiatrist, and had a twin sister who did not drink; her family's relationships make fascinating reading, and invite the question as to why some people drink and some are never tempted. Most people would not choose such a destructive love, and Knapp shows the influence of both heredity and experience. This is a book to which I return when I feel my empathy or understanding starting to wane.

Mother's Ruin[2] by Nicola Barry

I hesitated only briefly before adding a second memoir about alcohol addiction. Nicola Barry's first sentence is 'I was born drunk', and her life with an alcoholic mother and a rather absent doctor father and older brothers makes grim reading. She grew up in a posh suburb of Edinburgh where no one really liked to acknowledge her mother's tragedy; she did have treatment at times, but nothing really worked.

In this book, the parts that sear are the descriptions of her mother, drunk, vomiting in the bath, calling to her daughter. Equally devastating is the young Nicola's love for her mother, especially in any brief moments of sobriety, and her anger and desolation when she inevitably returns to drinking. Most of my patients are drinkers; this story is about the child, and others, behind that person. This story took place in the 1950s and 1960s, but I suspect there are still many undiscovered drinkers behind closed doors. I feel appalled at what happened to this child, and also helpless at what happened to her mother. As a young adult, Nicola drinks for a while, but then stops – this is no love story.

The Woman Destroyed[3] by Simone de Beauvoir

This is something completely different, although it is well known that neither Beauvoir, nor her companion, Sartre, were strangers to the bottle. I have read most of her books, and admire her greatly, but this collection of stories is the one I think about most. I find the middle story, *The Monologue*, less compelling; the other two, the first about a woman growing older, and the second about being left by her partner, I have read many times. When I first read them as a young woman myself, I saw these as things that could never happen to me; I thought that those who experience them should be pitied. Beauvoir herself may have feared ageing, and the first story, *The Age of Discretion*, may be an attempt to circumnavigate this; certainly her protagonist remains bitter, despite seeming to accept that her literary work is over and that her son has 'betrayed' her for his wife.

However the final story, *The Woman Destroyed*, written in the form of a diary, is the one I find most disturbing. Monique, the Woman, tells of her husband's gradual betrayal, not simply with his lover, but through the rewriting of their life together. It is cleverly done and heartbreaking. When I read it, I think, I wouldn't make such mistakes, I would never do what Monique did. But would I? I remember, as a child, thinking, I would never have made the mistake that Anne Boleyn did, of having a daughter. I have three now, and no sons.

People do things for odd reasons, that they cannot do differently and they cannot change, looking back. Many of our patients have lived lives that we have not, and sometimes we have to accept their suffering, much as we would like to change it.

An Unquiet Mind[4] by Kay Redfield Jamison

As a psychiatrist, and a patient with bipolar disorder, this book helped me to realise that I could be both. Before I read it I was trying; afterwards I was able to hold my head a little higher, and think – it's not just me. Her writing captures the dulls of depression and elusive heights of mania, as well as the consequences for her life. She is highly intelligent, a clinical psychologist, researcher and writer, and her academic achievements are impressive. I found this slightly off-putting when I first read it, although this was probably down to my own personal lack of confidence or any real achievements in psychiatry at that time.

Jamison is seduced at times by her manias, or hypomanias, and it can be hard, reading the book, to separate her exuberant personality from the shadow of her illness. At the end, she acknowledges that she would still choose to have bipolar disorder, or manic–depressive

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illness as she prefers to call it, but only because lithium is a successful treatment for her. Personally, I think this is a difficult question, and depends so much on the individual, their background and support systems, as well as, possibly, their preferences.

Most importantly, this is a book that eloquently describes an individual's experience of severe mental illness while continuing to lead a full and wonderful life, even if difficult at times. That is worth a lot.

Katherine Mansfield: A Secret Life[5] by Claire Tomalin

My next choice may seem less obvious as an influence for a psychiatrist. However, it has affected me strongly as a doctor, and being a doctor is a vital part of being a psychiatrist. Mansfield wrote modernist short stories and is still admired for her unusual perception 100 years after her death. However, this biography tells of her struggles with gonorrhoea and tuberculosis, as well as a late miscarriage that may have left her infertile.

Reading this now reminds us just how much things have changed in such a short time, and how fragile human existence could still be. It is 'biological' as regards her medical story; yet this suffering affects her psychologically, and changes the way she treats others and is treated by them. There are pictures in this biography of a healthy, bright looking girl who becomes a worn, haggard woman, looking, without hope, at something beyond. There are still many conditions that have no easy cure, but it is hard to comprehend why we live in a time so different from Mansfield, when illness was, of necessity, viewed and managed so differently. Are we lucky? Or will others soon look back at us and wonder at our suffering?

The Chrysalids[6] by John Wyndham

This is a book that many read and wonder at in their teenage years. I was certainly one such teen; my copy is literally falling apart. But I think it will always remain relevant as long as we are human and see differences in others. The post-apocalyptic setting is uncomfortable, with its implication that the Old People destroyed the world with nuclear war, leaving a long residuum of 'deviation'. But it is the way the community responds to difference and abnormality that is particularly chilling, probably because it does not seem impossible. Instead, it reflects a long history of prejudice and fear, to all those who are different from ourselves. Even the ending, when the mind-sharing protagonists are rescued by a less 'primitive' woman from what is probably New Zealand, offers dubious hope. Despite her apparent kindness to them, she has no compunction in killing others, and sees her own kind as clearly superior.

In my view, it is important when reading this book to imagine oneself in the role of the ordinary people, with their fear and certainty that 'deviations' are less than them. Can any of us be sure that we would be different, and is this borne out in our real lives?

Prozac Nation[7] by Elizabeth Wurtzel

Prozac Nation is a memoir of depression, and made a massive impact in the 1990s. Elizabeth Wurtzel writes with enormous passion, self-indulgence and, at times, remarkable perspicacity about her experiences as a young adult and student. I read it some years into my psychiatric training, and it is very easy to simply dismiss her as someone with emotionally unstable or borderline personality disorder. She is very open about her drug use, and both sharply critical and funny when writing about herself.

But in between the dramas are little descriptions of a mood state that does sound like depression, and she pursues treatment – drugs and therapy – zealously. She has no doubt that the 'miasma of depression' lifts when she takes Prozac. She still asks the question as to why so many people take Prozac, and how useful it is; but ultimately she is glad to continue living and to tell her story.

I see her as an example of someone with personality traits that cause her problems, but who may also have depression. As an addiction psychiatrist, I also found her second memoir, *More, Now, Again*[8], an extraordinary read. I was sad to hear that she died recently, in her 50s, of metastatic breast cancer.

The Story of San Michele[9] by Axel Munthe

I read *The Story of San Michele* when I was still at school, and it influenced my decision to study medicine. Munthe graduated young, and was a high-flying doctor of his time, travelling and working in all manner of places. At that time I was fascinated by tales of dramatic physical illness, and was appalled, yet drawn, by his descriptions of cholera in Naples. The rapidity ofillness and death was unimaginable – it seemed like something in a different world, and almost impossible. I could not imagine being a doctor somewhere like that, and was hardly able to believe he had the courage, despite admitting his fear. I was similarly gripped by his stories of hydrophobia, or rabies; the terror of these illnesses was something that we cannot now contemplate.

But I was also interested in his descriptions of what might then have been considered hysterical illness, and how he managed this, for example by the frequent diagnosis of colitis amongst his better-off patients. He seems both comfortable and uncomfortable with this, and half acknowledges that his personality helped the cure, a view not always shared by his colleagues. Perhaps the contrast between horrible physical ailments and poorly understood psychological ones was a difficult one. He also learnt from Charcot, although their relationship later broke down.

Ultimately, Munthe is an elusive character, whose tales often seem to be embellished with odd fancies that may or may not be fact, and this is reflected in his style of writing – it is more a book to drop into than read from cover to cover.

Selected Poems[10] by Stevie Smith

I don't like much poetry, but what I do, I am passionate about. I believe that it is very personal, more so than most prose, and what I love, you may hate, and *vice versa*. I like a small number of poets, and it is often very hard to understand why. I like John Keats, Robert Burns, Norman MacCaig and a few more, but when I had to choose one, it was Stevie Smith. I am not even sure that I like her poems, but somehow they speak to me more than any others. They are quite depressive and odd, often responses to cruelty and loss, but there is something yearning in them, back to a childhood, perhaps by the sea, that was not altogether kind. Their simplicity can mask complex feelings that cannot be easily understood, but have a visceral effect on the reader. As a psychiatrist, and perhaps more as someone with a mood disorder, I find these poems help me to understand emotions that I find hard to recognise.

The Time Traveller's Guide to Medieval England: A Handbook for Visitors to the Fourteenth Century[11] by Ian Mortimer

For my final book, I chose one of Ian Mortimer's *Time Traveller's Guides*. They are all excellent, but I particularly enjoyed the medieval one. You might ask what its influence has been on a psychiatrist; I believe that trying to understand something of previous times strips away the superficial aspects of our own lives, and helps us to better recognise the human condition. These books are beautifully written, with their personal descriptions of life, clothing, work, food and drink, housing, travel and more, and give some insight into what it might have been like to live then. We see ourselves as very different, but of course we are not; we are simply born into what we probably consider an easier time. Had we emerged then, we would have learnt to respond to that world, which may tell us something about how we have adapted to this one.

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Sometimes I think there has been so much change, even within my lifetime, and considering history puts it more into perspective.

In summary, these are some of my favourite books; they are not textbooks of psychiatry or neuroscience, but they are highly personal to me, and have influenced my thinking and direction over the years. There are many changing ways of learning – students now use online resources and podcasts, as well as textbooks – but stories, allusions and words will always be with us in some form or other, and will enrich our lives, work and relationships.

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