Book Review

*Attention and Emotion: A Clinical Perspective*
Hove (UK): Lawrence Erlbaum. (402 pp.)

The title of this volume is somewhat misleading. It deals not only with attention, but also with other cognitive processes and products (e.g., memory, worry, suppression etc.). Additionally, the text concentrates on the role of these processes in pathological emotion, notably anxiety, depression and obsessive-compulsive disorder.

The book starts with a general, introductory chapter. This chapter summarizes important theories in the domain of cognitive theory (e.g., Beck's theory) and ends with a 'plan of the book'. The chapters that follow are organized around three parts. Part 1 ('Emotion, attention and information processing') discusses the main findings of cognitive experimental studies concerned with neurotic disorders. For example, a detailed description of the attentional bias phenomenon is presented. Of special interest is Wells and Matthews' evaluation of the influential model proposed by Williams and colleagues. According to Williams et al., the different neurotic disorders are accompanied by specific bias effects, with attentional bias characterizing anxiety and memory bias characterizing depression. In their thorough review, Wells and Matthews show that this model is difficult to reconcile with the empirical data at hand (e.g., depressive patients exhibit attentional bias effects). Part 2 ('Cognitive content and process in emotional disorder') is devoted to cognitive products (e.g. intrusions, worry) rather than cognitive processes (e.g. attention). Here, the authors present a tentative taxonomy and morphology of these products, as far as they are involved in clinical pictures.

Accordingly, most of the findings that are reviewed come from clinical and field studies. A separate chapter discusses the importance of self-awareness and self-consciousness. Wells and Matthews emphasize that these phenomena are not restricted to social phobia, but play a significant role in other disorders as well (e.g., panic, depression, simple phobia etc.). This idea is further elaborated in Part 3 ('New theoretical model and clinical implications'). In this part, the authors describe their Self-Regulatory Executive Function (SREF) model. Briefly, this model assumes that a cognitive-attentional syndrome underlies dysfunctions like depression, panic, obsessions and so on. Basically, the syndrome consists of a heightened self-focus. This self-focus consumes cognitive resources, amplifies intrusions, causes attentional bias effects and, eventually, leads to neurotic complaints. The obvious implication of this conceptualization is that existing treatment methods should encompass methods that teach clients to re-direct their attentional focus. Some preliminary attempts to develop such methods are reviewed.

While the book contains a rather detailed discussion of the cognitive processes involved in neurotic dysfunctions, it does not present a complete picture. For example, Williams' recent work on overgeneral memories in depression is not mentioned. This is remarkable, given the fact that overgeneral memories have been found to predict poor treatment outcome. Curiously enough, more speculative and less articulated ideas like those of Shapiro on eye movement desensitization are discussed at length in the book.

One might also challenge the statement that a cognitive-attentional syndrome consisting of increased self-focus underlies neurotic symptomatology. If this is the case, how could one account for the anxiety and depression symptoms that can be elicited in rats by applying simple conditioning rules? Are we supposed to believe that rats possess self-awareness? The authors fail to address this important issue.

All in all this book underlines the excellent tradition that UK psychologists have in applying cognitive principles and concepts to the clinical domain.

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