A Perspective on over 1000 Psychobooks for Psychiatry and Psychology Training

Uma Perspectiva sobre 1000 Psicolivros no Ensino de Psiquiatria e Psicologia

Keywords: Books; Psychiatry/education; Psychology. Clinical/education; Teaching

Palavras-chave: Ensino; Livros; Psicologia/educação; Psiquiatria/educação

To the Editor,

We want to introduce readers to the new (old) concept of Psychobooks. The existence of Psychobooks was first hypothesized at some meetings of our group as being any kind of book that could interest and be of professional use to any mental health technician (e.g. psychiatrist, psychologist). That interest could be conscientious and explicit or implicit. The professional use could be for clinical or academic purposes, namely psychopharmacological or psychotherapeutic training.

We did a search with various terms: ‘psychobooks’, ‘psycho books’ and ‘psycho-books’ on PubMed. We did a search with various terms: ‘psychobooks’, ‘psycho books’ and ‘psycho-books’ on PubMed. We were obscure, they also deserved inclusion in the list.

But how many types of psychobooks exist? We believe we can divide the list of psychobooks in different categories, depending on some of their characteristics:

• Books written, with a technical purpose, for teaching / training psychiatrists / psychologists.
• Books written, for the general public, by psychiatrists / psychologists.
• Books written, for the general public, by authors with a diagnosis of a psychiatric disorder.
• Books written, for the general public, where the protagonist(s) present(s) a psychiatric disorder.

What use can be found for psychobooks? We believe psychobooks can be important in terms of teaching, learning and knowledge development for mental health professionals, either in a technical field (e.g. psychopathology, psychopharmacology) or in a clinical setting (e.g. therapeutic alliance, psychotherapy). This educational use of arts for psychiatrists / psychologists is quite disseminated already for cinema and movies but should also be studied and developed for books. On the other hand, psychobooks may also be valuable in the fight against stigma in mental health, particularly among the general public but also in medical students or even senior physicians in other medical specialties.

We implemented a voting system for all of our group collaborators. From February 1st 2013 to July 10th 2018 we invited all psychiatrists and psychologists, visiting our department at Psiquiatria Geral e Transcultural (PGT) or joining our meetings at Clube Regional de Folias (CRF), to participate in our unstructured survey. All we requested from participants was to name the psychobooks he/she ever read and to vote on each one, in a 40 point scale, from “−20 = terrible psychobook” to “+20 = excellent psychobook”. After reaching one hundred voters we stopped data collection and made a basic statistical analysis.

During the five year timespan, we had a total of 250 meetings at the PGT department and CRF. During this five year period, we collected data from 100 participants, most of them psychiatrists and psychologists. All participants voted for their favorite psychobooks, so we ended up with a final list of 1149 titles. In Table 1, we present the top 10 list of our Psychobooks.

This is, to our knowledge, the first study regarding psychobooks. We feel that all of our 250 meetings not only contributed to the training of younger psychiatrist / psychologists but also enhanced the ever-evolving process of sharing knowledge and wisdom among senior professionals.

We have listed an impressive list of Portuguese and non-Portuguese psychobooks with a huge potential for teaching and sharing knowledge in psychiatry and psychology. Moreover, we believe that every participant in our ballot found at least one more interesting psychobook that sooner or later will become useful in his/her clinical practice and/or academic research.

Some of the biggest limitations of our work were: the convenience sample as all participants were invited; the absence of criteria for inclusion of the book in our list as any new book was accepted and could be included; and, finally, the asymmetry regarding the voting process, where two thirds of our psychobooks got only a single vote, some of them being quite obscure (even for us as authors).

Psychobooks exist: we asked about this concept to 100 psychiatrists / psychologists and we found more than 1000. We’re almost in the turn of the first quarter of the twenty first century but books are still among the most used sources of knowledge, especially for studying and training in psychiatry. Therefore, even though new ways of learning and training are emerging, we can’t underestimate the educational potential of this quite old and traditional learning tool. Book sharing is an important way to share knowledge in the medical field. Last but not the least, we believe there is huge potential regarding the adaptation of this method to many medical specialties (e.g. Neurobooks for Neurology).
<table>
<thead>
<tr>
<th>Rank</th>
<th>Title</th>
<th>Author</th>
<th>Votes (0 - 100)</th>
<th>Rate (-20; +20)</th>
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<tbody>
<tr>
<td>1</td>
<td>The idiot</td>
<td>Fyodor Dostoevsky</td>
<td>22</td>
<td>+18</td>
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<tr>
<td>2</td>
<td>The trial</td>
<td>Franz Kafka</td>
<td>15</td>
<td>+18</td>
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<td>3</td>
<td>Pym</td>
<td>Edward Lear</td>
<td>18</td>
<td>+18</td>
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<tr>
<td>4</td>
<td>The metamorphosis</td>
<td>Franz Kafka</td>
<td>15</td>
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<td>5</td>
<td>Meille</td>
<td>Antoine Chavassere</td>
<td>17</td>
<td>+17</td>
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<td>6</td>
<td>Werther</td>
<td>Goethe</td>
<td>16</td>
<td>+16</td>
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<td>7</td>
<td>The philosophy</td>
<td>Edward Lear</td>
<td>13</td>
<td>+16</td>
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<tr>
<td>8</td>
<td>One hundred years of solitude</td>
<td>Gabriel García Márquez</td>
<td>12</td>
<td>+15</td>
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<tr>
<td>9</td>
<td>On becoming a person</td>
<td>Carl Rogers</td>
<td>11</td>
<td>+15</td>
</tr>
<tr>
<td>10</td>
<td>A small treatise on the Great Virtue and the Good Life</td>
<td>André Comte-Sponville</td>
<td>10</td>
<td>+15</td>
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**Note:** Votes and Rates are based on reader opinions.
CONFLICTS OF INTEREST
On behalf of all authors, the corresponding author states that there is no conflict of interest.

REFERENCES

Risko Cardiometabolico na Infancia: Pode a Bilirrubina Atuar como Mediador Associado ao Relógio Circadiano Via Disfunção Autonómica?

Keywords: Autonomic Nervous System; Bilirubin; Child; Circadian Rhythm; Hypertension
Palavras-chave: Bilirrubina; Criança; Hipertensão; Ritmo Circadiano; Sistema Nervoso Autónomo

The interesting paper from Yu and colleagues on the association of neonatal serum bilirubin and childhood hypertension recently published in PLoS One, flagged up a plausible role of bilirubin as a mediator of hypertension in later life. This is a highly important topic since hypertension, a main cause of cardiometabolic associated morbidity and mortality, may affect 2% to 4% of children. Bilirubin is a toxic end-product of heme catabolism in the body, commonly seen in newborns and causing jaundice. It is detoxified mainly in the liver by means of several steps involving circadian regulated enzymatic processes. A balanced autonomic output to the liver is crucial for maintenance of the circadian rhythmity that ensures the normal function of liver metabolic enzymes and glucose level. Bilirubin production is known to oscillate in a circadian fashion. Several studies showed that free bilirubin is negatively associated with hypertension and other cardiometabolic risk factors, although with controversial issues remaining to be clarified. A non-dipping hypertensive profile was also linked with nocturnal lower bilirubin levels compared to those having a dipper hypertensive profile, consolidating the circadian signature on hyperbilirubinemia associated hypertension. Furthermore, bilirubin seems to increase after light therapy not only as a result of activation of photoreceptors but also impacted by circadian clock regulatory mechanisms. Nonetheless, in their retrospective study, the authors of the aforementioned paper found that neonatal serum bilirubin levels were positively associated with childhood blood pressure/hypertension in preterm infants. This suggests that neurotoxicity of bilirubin and its plausible impact on autonomic pathways via sympathetic nerve fibers may be involved in the neonatal pathophysiological mechanisms leading to hypertension. Interestingly, in a prospective study in full-term newborn infants it was found that severe unconjugated hyperbilirubinemia may cause cardiac autonomic dysfunction, with parasympathetic predominance. These findings can also raise the important question of whether newborn babies with kernicterus are predisposed to developing hypertension or cardiovascular morbidity. Despite the contradictory observations, the relationship of hyperbilirubinemia and autonomic function and their circadian variations is particularly important in preterm babies due to the immature nature of the brain-blood barrier and consequent higher risk of toxicity and encephalopathy leading to autonomic related cardiovascular and metabolic signs.

REFERENCES
2. Chen HL, Wu SH, Hsu SH, Liou BY, Chen HL, Chang MH. Jaundice...