Reading about

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Old age psychiatry

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It was a pleasure to be asked to write about current reading in old age psychiatry. As a discipline, old age psychiatry is gaining strength in terms of the number of young psychiatrists interested in the field and of the many new treatments for the dementias in general and Alzheimer’s disease in particular. There has been an explosion in reading in old age psychiatry. The fascination of our subject is that it covers a range of approaches from psychosocial to basic neuroscience.

It is a truism that job references tell you more about the person writing them than the person about whom they are written. Similarly, anecdotal contributions such as this will say more about my own gaps in knowledge. Redress is available by writing outraged letters to the correspondence section of the Journal.

General textbooks

For anyone interested in old age psychiatry, there are three textbooks of interest and relevance. Psychiatry in the Elderly (Jacoby & Oppenheimer, 1997) has the advantage of tight editorial control and presents an excellent summary of the whole field of old age psychiatry, incorporating issues not easily found elsewhere (in digestible chunks), such as ethics and the law. It has a multidisciplinary approach and is particularly relevant to the UK. This contrasts with an international tome Principles and Practice of Geriatric Psychiatry (Copeland et al, 1994), which has a heterogeneous style very different to the prose of Psychiatry in the Elderly. Make sure you buy the latest edition – new ones of each are in the pipeline. A second edition of a third textbook has been published – Textbook of Geriatric Neuropsychiatry (Coffey & Cummins, 2000). This deals with the intriguing interface between old age psychiatry, neurology and neuropsychiatry, and presents a summary of different fields. These are the books on which to concentrate: chapters on old age psychiatry in general textbooks tend to be patchy, but do have the advantage of giving a complete overview within the life of short-term memory. Specific details on disorders such as dementia and depression are available in textbooks of geriatric medicine, for example Brocklehurst’s Textbook of Geriatric Medicine and Gerontology (Tallis et al, 1998), and these tend to be directed at the non-psychiatric specialist.

Specialist textbooks

Dementia has been the subject of a large number of specialist texts. One with which I am involved is the innovatively entitled Dementia (Burns & Levy, 1994), originally conceived by Raymond Levy and myself and now published in its second edition under the collective stewardship of John O’Brien and David Ames (O’Brien et al, 2000). In a field as fast-moving as dementia, textbooks inevitably lag behind the most recent advances, although some manage to give a timeless overview. One of these is Dementia: A Clinical Approach (Cummings & Benson, 1992). It is predominately biological but gives an unrivalled summary of brain and behaviour in an understandable and readable form. Books on dementia directed at primary care abound. Alzheimer’s Disease: A Medical Companion (Burns et al, 1995) was one of the first non-specialist textbooks, but is now out of print and no further editions are planned (at least, no one has asked me). Successors and successes include those by Serge Gauthier (Gauthier, 1996) and Henry Brodaty (Brodaty, 1998), which give an excellent overview of the field. A general practitioner interested in dementia would do well to read both of these. Aimed at a slightly different and more specialist audience are books such as: Blue Books of Practical Neurology of the Dementias (Growden & Rossor, 1998), which is a scholarly neurological overview; Diagnosis and Management of Dementia (Wilcock et al, 1999), which gives a refreshing community care overview; and the enjoyable Dementia Handbook (Harvey et al, 1999). A very useful summary of the cognitive examination is found in Hodges (1994).

More and more specialist books are appearing, such as those dealing with neuroimaging (Ames & Chiu, 1997), cerebrovascular disease (Chiu et al, 2000), Lewy body dementia (Perry et al, 1997), outcome measures (McKeith, 1999) and drug treatments (Jones, 2000). Modesty (almost) forbids me from mentioning a book that summarises all the relevant scales in old age psychiatry (Burns et al, 1999). Each of these is something to dip into.

Specialist textbooks concentrating on functional psychiatric disorders are also available. Corneliu Katona’s book on depression (Katona, 1994) is unrivalled and gives an excellent, readable summary of the field, but probably now needs updating. A shorter practical guide is provided by Simon Lovestone and Rob Howard (1996) and is directed at the non-specialist. Ed Chiu and David Ames have produced a multi-author book (Chiu & Ames, 1994) that deals with all functional disorders and serves primarily as a reference book. An excellent summary of late-onset schizophrenia is available (Howard et al, 1999). These texts are all very different and I would recommend Lovestone & Howard as a brief introduction to depression for the non-specialist, with Katona and Chiu & Ames for more detail.

Carers

Books written by and for carers could be read with benefit by all clinicians. The 36 Hour Day is the original (Mace & Rabins, 1991) and is probably the best, with a predominantly American perspective. A UK guide, Alzheimer’s Disease at Your Fingertips (Cayton et al, 1997), represents an updated version, providing a British perspective. I Love You Too (Wirsig, 1990) and the moving story of Iris Murdoch
(Bayley, 1999) are written by carers. They give a unique insight into the experience of the disease but, more interestingly, give a hint of how patients and their relatives view professionals.

Journals
Articles of interest can be found in the British Medical Journal, Lancet, Journal of the American Medical Association and New England Journal of Medicine, but at best the articles are usually on tangential subjects. However, we ignore developments in general medicine at our peril. There are often articles of relevance to our field in general psychiatry journals such as the British Journal of Psychiatry, American Journal of Psychiatry and, to a lesser extent, Archives of General Psychiatry, Archives of Neurology and Neurology usually carry something of interest about dementia. Geriatric journals include the Journal of the American Geriatrics Society, which is very good value and there is usually more there of interest than in its British counterpart, Age and Ageing. The Journal of Gerontology presents a broad field, particularly on aspects of psychology and social gerontology. The specialist journal Alzheimer’s Disease and Associated Disorders usually contains something of interest.

There are four specialist journals in old age psychiatry. The American Journal of Geriatric Psychiatry is a good read and usually has review articles and editorials of interest. Ageing and Mental Health is a relative newcomer to the field and merits attention, and there is often much of interest in International Psychogeriatrics, the official journal of the International Psychogeriatric Association. Surpassing all this is the monthly International Journal of Geriatric Psychiatry, which, because of its roots, is often seen as a UK- and Europe-based journal but, in fact, has an authorship and readership that is truly international.

Training manuals
These have often been produced by pharmaceutical companies and are worth a look if you can get a copy. They often provide information in a pleasing and readily accessible format, and can be a very good guide if you are planning a talk or presentation. One readily available example is A Guide to the Diagnosis and Management of Alzheimer’s Disease (International Psychogeriatric Association, 1997).

Web pages
These are an increasing source of material and information, even for Luddites like me. An Alzheimer site worth viewing on a regular basis is http://www.alzforum.org. Searching the web is informative — a search under dementia reveals a USA-based rock band! The Department of Health website is useful on issues of policy (http://www.doh.gov.uk) and, at the price of entering your General Medical Council details, doctors.net is a good source of information (http://www.doctors.net.uk) and access to databases. The website of the International Psychogeriatric Association provides a wealth of information (http://www.ipa-online.org).

If I had to choose just one textbook that would tell me everything I wanted to know about old age psychiatry, I think it would be Psychiatry in the Elderly (Jacoby & Oppenheimer, 1997). I would be hard-pressed to choose among all the others and any of the texts mentioned would be helpful and informative. This reflects the growing influence, stature and complex nature of old age psychiatry.

REFERENCES


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