

relative merits of academic evidence and professional judgement in the clinical setting.

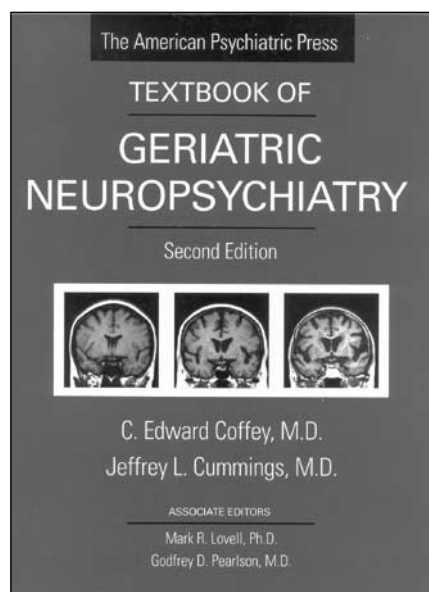
Since it is no longer possible to bury one's head in the sand at the mention of evidence-based medicine this book might be a sensible acquisition for those involved with psychological therapies who are trying to make sense of this part of 'the new NHS' for the first time.

Department of Health (1999) *The National Service Framework for Mental Health Standards and Models*. London: Department of Health.

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Textbook of Geriatric Neuropsychiatry (2nd edn)

Edited by C. Edward Coffey & Jeffrey L. Cummings. Washington, DC: American Psychiatric Press. 2000. 1000 pp. £138.00 (hb) ISBN 0 88048 841 7



This is a new edition of an important and influential US-based textbook, dealing with biological aspects of geriatric psychiatry. This second edition has appeared 6 years after the first and the text is almost a third longer, with nine new chapters. It is divided into five easily digestible sections, each with its own editor: introduction to geriatric neuropsychiatry; neuropsychiatric assessment of the elderly; neuropsychiatric aspects of psychiatric disorder in the elderly;

neuropsychiatric aspects of neurological disease in the elderly and principles of neuropsychiatric treatment in the elderly. Every aspect of psychiatric disorders in older people is dealt with in a logical and authoritative manner.

The book attempts to establish a link between the neurobiology of psychiatric illness and that of neurological disorders which can cause disturbed behaviour and psychiatric symptoms. The emerging speciality of clinical geriatric neuropsychiatry is outlined by the editors. It has implications for where old age psychiatry finds itself in the UK, with an understandable desire to make innovative links with primary care and social work and to avoid the mistake perceived by many to have been made by geriatric medicine. The authors summarise the situation in the USA as follows.

Geriatric neuropsychiatry is an integrated speciality that draws concepts from a number of different fields and is subsumed under the general term 'neuropsychiatry'. Both geriatric psychiatry (old age psychiatry) and geriatric neuropsychiatry are concerned with care, education and research related to behavioural changes in older people. Geriatric neuropsychiatry emphasises links with basic science and the application of pharmacological treatments to disease and the assessment and management of psychiatric aspects of neurological disease. The interfaces between behavioural neurology, geriatric psychology, neuroimaging and gerontology are complex. The conclusion is that geriatric neuropsychiatry is a discipline in its own right, separate and distinct from the normal practice of geriatric psychiatry, in which a psychosocial and psychotherapeutic attitude takes the lead.

Is there an analogous situation in the UK? Psychiatry here is probably less polarised than in the USA, and many general psychiatrists would use a combination of drugs and a psychological or psychotherapeutic approach. The practising old age psychiatrist in the UK probably combines the skills of geriatric neuropsychiatry and geriatric psychiatry in one discipline, although as the field grows and specialisation increases, this may change. To have old age psychiatrists practising only old age psychiatry is a relatively new phenomenon, and it may be in the future that some professionals would choose to deal only with dementia. General psychiatry colleagues are seeing the advantages of referring people with chronic mental illness to our services when they reach a certain age.

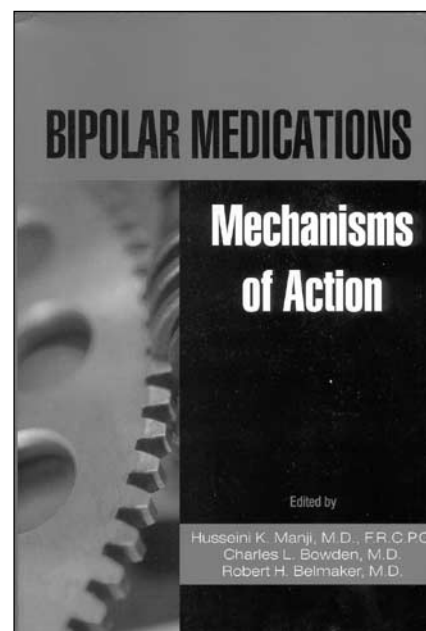
The approach taken in the book is refreshing and novel and certainly gets to the root very quickly of what many old age psychiatrists would regard as core business, that is the treatment of psychiatric manifestations of any disorder affecting older people, whether it be a neurological condition, a reaction to physical illness or a direct result of a psychiatrically defined disorder.

Whether or not one embraces the concept of geriatric neuropsychiatry in total the book is a masterpiece of the current state of the field (purists will ask, "Which field?") written by a senior and authoritative group of researchers and clinicians. As a textbook in this area, it is unrivalled.

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Bipolar Medications: Mechanisms of Action

Edited by Husseini K. Manji, Charles L. Bowden & Robert H. Belmaker. Washington, DC: American Psychiatric Press. 2000. 440 pp. £46.95 (hb). ISBN 0 88048 927 8



To both clinicians and researchers bipolar affective disorder is a fascinating topic for study. Bipolar disorder interfaces with every area of psychiatry, childhood and elderly forms are well recognised, there is a clear