

However, bipolar disorder units may actually provide better continuity of care if the same patient is seen by the same team regardless of the setting, and they may also carry advantages in terms of education and research.<sup>5–7</sup> Hence, the European Union seventh framework programme has sponsored a network of expert centres called ENBREC (European Network of Bipolar Research Expert Centres), aimed at developing common tools for the assessment and management of bipolar disorder across Europe. Obviously, specialised centres may well be better suited for research and training on the specific condition of their expertise compared with community centres. Moreover, sophisticated interventions that have been designed by experts from referral centres, such as group psychoeducation or functional remediation, may be cost-effective and may be implemented in all sorts of settings if therapists are adequately trained.<sup>8–9</sup> Hence, the key to getting the best from both specialised and community care may be to enable their rational integration into existing psychiatric services,<sup>10</sup> and choosing the right setting for the right patient at the right moment – perhaps not easy, but feasible and highly desirable.

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## Bereavement

Colin Murray Parkes

Love and loss are two sides of the same coin. Patterns of attachment to parents in childhood predict how adults will respond to losses in adult life. Avoidant attachments predict avoidance of closeness, delayed grief and self-reproaches, anxious attachments predict severe and protracted grief, and disorganised attachments predict helplessness and depression. All of these increase vulnerability following unexpected or otherwise traumatic losses. There is no single counselling or therapy that provides a catch-all solution. In the UK, Cruse Bereavement Care provides a flexible response to most problems, but cognitive-behavioural therapy tailored to specific problems may be needed too.

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