

Book review

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Guide to the Psychiatry of Old Age. By D. Ames, E. Chiu, J. Lindesay, K. I. Shulman. (Pp. 158; £29.99; ISBN 9780521681919 pb.) Cambridge University Press: Cambridge. 2010.

I am not quite sure why I was so excited to get a copy of this book to review, but it certainly brightened my day. Maybe it was because of its brevity, only 136 pages, or perhaps its delightful cover with a fantastic selection of photographs. Or maybe it was because I knew the authors, all distinguished international experts and excellent communicators, would produce a wonderfully clear and readable text, which they have certainly done. Either way it was indeed a pleasure to read this concise guide which manages to accomplish a challenging task, that of summarizing old age psychiatry succinctly in a small volume accessible for trainees, non-medics and medical students alike. Anyone reading this text will, within a few hours, have gained an extremely good grasp of the different disorders which are within the scope of old age psychiatry, have acquired knowledge of their aetiology and management, be able to know the essentials of how to assess and examine the older patient, and know something about how services are organized and future directions. This is indeed an impressive achievement and the fact that all is done in an extremely clear and digestible form is a real tribute to both the authors and the publishers.

The book is divided into 12 chapters, ranging from the initial 'What is the psychiatry of old age and why do we need it?' to the final chapter 'The future of the psychiatry of old age'. Everything in between is

covered, including assessment, differential diagnosis, key disorders such as dementia, delirium, mood disorders, schizophrenia, neurotic disorders, substance abuse and personality disorders and indeed services in old age psychiatry. There are some really nice touches; I particularly enjoyed the 'clinical pearls' contained in chapter 2, although I do wonder how useful the 'white roots sign' really is and encourage everyone to read the book simply to enjoy and take a view on this particular pearl (page 10). The book also contains very helpful references for those who want to take things further and need more detail. Any review should mention limitations, although there are certainly no significant issues to mention. Maybe a future edition, which I'm sure will be demanded, could contain a little more on management than there is in the current volume, and perhaps possible future advances in treatment and diagnosis. Some more figures, illustrations and tables to break up the text would be helpful, especially for readers who are new to much of the information. However, these are minor details and I am very confident that this first edition will be extremely popular indeed. This text would lend itself well to a web-based or E version and I suspect there would be high demand if this were the case. This book should certainly be at the top of the recommended reading list for early-years trainees who are new to old age psychiatry, medical students who want to 'dig a bit deeper' than the basics and GPs and others who simply want to know a little bit more about the background and practice in old age psychiatry. Even experienced old hands will learn something new, for me this was the 'white roots sign'. I can strongly recommend buying a copy, this really is a book everyone should have on their shelf.

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