

CONSULTATIONS IN GERIATRIC PSYCHIATRY

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I find this book excellent in most respects. Many of the authors have been working either in the area of geriatric psychiatry or consultation-liaison psychiatry for many years. The book sets out to comprehensively examine the areas of mental disorders in old age. The topic is of great current interest to the field of psychiatry as the demographic profile of Singapore population changes. It covers the field quite fully, including a chapter on “substance use disorders”. This is a significant chapter as most doctors overlook the elderly as possible candidates of substance abuse.

The book is clear and logical. It offers practical tips on how to care for the elderly suffering from the specific mental conditions. The style of the book is that of a brief synopsis of the topic followed by relevant case discussion. Local statistics are quoted throughout the book. Sections on the pharmacological properties of medications commonly used in the elderly are included (page 73: “anti-depressant”; page 84: “anti-anxiety medications”; page 98: “anti-psychotic medications” and page 118: “anti-dementia medications”). The tutorial approach of the book will draw many interested readers, especially general practitioners, medical students and trainees in psychiatry.

It would have been good to include some of the common rating scales/assessment tools mentioned in each chapter at the end of the chapter. Otherwise there can be an Appendix of the rating scales/assessment instruments. I am certain that a general practitioner reading this book would like to be able to administer the Mini-Mental State Examination (MMSE) or the CAGE questionnaire. I have noticed that the authors have chosen to list all the references together. Personally, I would have preferred the references to be listed at the end of each chapter. In fact, I have noticed that a number of quoted sources were not reflected in the References. These included Jeste & Finkel (2000) mentioned on page 90 and Zayas & Grossberg (2002) on page 98.

Some of my patients who have been seeing me for a long time would jokingly make this comment, “Doctor Lee, as you are getting more senior (in position), I am getting more chronic/senile (in term of illness progression)”. Certainly it is good to address mental health issues that arise when one gets old. However, a large number of elderly would have already been afflicted with psychiatric conditions for the most part of their adulthood. Their psychological needs may differ as there may be changes in their physical health and support systems.

Once again, I congratulate the team at Changi General Hospital for their effort in writing this easy-to-read and practical book.

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