

Book Review

Dunn, L. B., & Cassidy-Eagle, E. L. (2020). *Practical strategies in geriatric mental health: Cases and approaches*. Washington, DC: American Psychiatric Association. 512 pp. \$75 (hbk), \$60 (e-book) ISBN: 13 9781615372577.

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“In geriatric mental health, then, we are detectives trying to gather as many clues as possible to help us crack these complex cases.” The world population continues to age and with this demographic shift comes an accompanying growth in the number of older adults with mental health needs. This quote from the authors, Laura Dunn, MD, and Erin Cassidy-Eagle, PhD, reveals that meeting the mental health needs of older adults is anything but simple and requires specialized skills and tools to assess and treat this population. The goal of this book is to disseminate practical tools, resources, and information to work with older adults in a way that is accessible to a broader audience of care and service providers, distinguishing it from other volumes with a more technical focus and narrowed to physician and mental health practitioners.

The book walks through chapters with a very defined structure of presenting a clinical case at the beginning without providing all the clues or outcomes, requiring the reader to assume the role of “detective” as the case unfolds. The clinical presentation starts with a chief complaint, followed by a case vignette and then the main relevant information around the topic of that particular chapter. Then, the case presented initially is later reintroduced with a new perspective based on all the information learned through the chapter. Finally, the reader is given key points about the most relevant aspects of the chapter, as well as resources that can be found both in the community and online to seek assistance for the conditions discussed. Topics covered in this book include, for example, depression, anxiety, pain, sleep disorders, bipolar disorder, post-traumatic stress disorder, neurocognitive issues (e.g., dementia), grief, and special populations (e.g., LGBT) of older adults. In this review, I will focus on several chapters that are representative of the overall book rather than walk through each chapter. I conclude with recommendations for readership and use in academic settings.

Chapter 4 covers the topic of anxiety disorders in later life. As with other chapters, the authors present an intriguing case study. This example is followed by a discussion of treatment using a unique commentary section which provides the perspective of the treatment team. This structure allows the

reader to take part and gain insight into the actual discussions held within the patient’s treatment team and significantly increases the reader’s engagement and involvement. After a first part focused on symptoms and diagnostic criteria, the chapter enters into pharmacological and psychoeducational treatments in a very detailed way and provides a comprehensive introduction to the structure of a treatment agreement between the clinician and the patient. The authors provide specific templates on how to develop this type of agreement and pay special attention to the ways that the clinician may communicate with the patient with anxiety in a way that is unusual to find in clinical literature. In other words, while you can normally read a lot about “what” to do, this chapter focuses on “how” to do it.

Chapter 6, another representative chapter, focuses on pain and the underlying psychological factors that affect the expression of pain in older adults. There is an extensive section on differential diagnosis of chronic pain from other conditions and the authors encourage readers to consider additional factors that may affect the expression of pain. While the authors appropriately discuss pharmacological treatment for pain, they also encourage readers to escape from the trap of a pure biomedical model when dealing with older adults with pain symptoms. As the authors state, “Patients receive suboptimal care and have suboptimal pain treatment outcomes when psychological factors are not addressed.” The remainder of the chapter offers detailed clinical guidance and tips on how to treat pain better, assessment and referral tips for older adults with pain (i.e., which conditions should be screened when an older adult refers to pain), and suggestions on how to enhance patients’ receptivity for psychological treatment of pain. The chapter ends with a brief mention of evidence-based treatments and references and links for reader follow-up.

Chapters 16 and 17 depart from the earlier structure of the book and focus on inpatient settings, such as intensive care units. After a precise account of the steps to follow for an appropriate evaluation and differential diagnosis in inpatient settings, there is a detailed description of contributing factors

to behavioral change and specific guidelines on how to manage acute agitation with both non-pharmacological and pharmacological means. Subsequently, there is a special emphasis on post-intensive care syndrome by means of precise step-by-step guidance on how to develop and collect the clinical history for this particular condition. This section of the book culminates with a detailed description of potential cognitive and physical sequelae and some tips for intervening with mental health issues and caregivers' stress.

Chapter 19 to 24 do not seem to have a guiding line, but still cover interesting topics that complement the set of strategies required for geriatric mental health. Chapter 19 focuses on the role of the social worker in geriatric outpatient care and details how psychosocial assessment and social interventions are developed by these professionals. Chapter 20 jumps to the management of frontotemporal dementia, discussing the complexities of the differential diagnosis and subtypes, treatment (non-pharmacological and pharmacological) and providing necessary guidelines for caregivers. Chapter 21 focuses on legal issues related to cognitive disorders, with a special focus on legal concepts related to decision-making, competency, capacity, and consent. It continues with legal instruments to allocate or defer decision-making, such as advance directives, proxy directives, decision directives, and supported decision-making, among others. It concludes with potential problems and disagreements that may emerge in these scenarios, such as abuse or neglect toward the older person, family disagreements, or how to proceed in case of divorce and new marriage. Chapter 22 focuses specifically on driving issues and implication of aging on driving abilities, with guidelines on when to refer for testing of driving abilities and further ethical and legal considerations. Chapter 23 focuses on LGBT issues in older populations, providing a historical context and detailing the implications of aging while being LGBT, and issues related to assessment and diagnosis of gender dysphoria, medical and surgical transition, sexual orientation and gender identity, as well as

guidelines on how to create a safe environment for these groups of patients. Finally, Chapter 24 focuses on grief and provides a concise and detailed description on how to better understand acute and integrated grief as opposed to complicated grief, with detailed daily life guidelines on what to say and do and, more importantly, what not to say or do in these circumstances. The chapter sums up brilliantly by considering the grief of the health care professional and concludes with a sentence that summarizes perfectly the greatest message that guides the reading through this chapter and through the whole book "When you do not know what to do or say in regard to a patient's grief, just be human."

This book is ideally situated for individuals who are looking to gain a broad understanding of scenarios and cases that may be found in geriatric mental health (e.g., for those studying to have a career in gerontology health and social care fields who will be working with older adults), but also for all those professionals who are looking for more practical advice on how to develop certain treatment and patient approaching strategies, from nurses to social workers, from occupational therapists to psychologists and physicians or mental health practitioners. Moreover, the level of immersion provided to readers, who may feel that they are learning about the selected clinical case at the same pace as the authors, strengthens the connection between the reader and the book in a very engaging way. The authors explicitly state that their motivation for compiling this book was to try to disseminate practical information and tools for working with older adults, and to collect in one volume as many clinical pearls as possible, to make it accessible to a broader audience of care and service providers for older adults. The engaging structure with clinical vignettes, theoretical presentation, practical guidelines, case resolution, and resource provision at the end of each chapter is one of its main strengths and makes this book a must for those who want to get immersed in geriatric care in a fast but also professional and practical way.