It has been eight years since the second edition of *Principles and Practice of Geriatric Psychiatry* was published. During this time there has been substantial progress in the science and practice of geriatric psychiatry. This third edition attempts to capture these advances and provide an up-to-date summary for trainees and practitioners.

Two of the Editors of the previous editions, John R M Copeland and Dan G Blazer, decided to withdraw and two new Editors (one from the UK and one from the US) have been recruited. We wish first of all to express our grateful thanks to John and Dan for their remarkable stewardship over the production of the two previous editions. We would also like to acknowledge the invaluable contribution of the six Associate Editors in bringing this third edition to completion.

The previous edition received good reviews as well as some helpful criticisms. We therefore decided to maintain the textbook’s overall scope, structure, headings, list of contents and international authorship. The majority of the textbook’s chapters have been updated by the original authors. We have, however, recruited several new authors who are internationally recognized experts in their fields and commissioned substantial completely new material.

We believe that the value and the strengths of this textbook rest in its comprehensive coverage of the basic and clinical sciences of normal and abnormal ageing, of the full range of psychiatric disorders in the elderly, and of the organization of psychogeriatric services in the UK and the US as well as chapters on prevention, training and education.

We hope that this third edition is well received by its readers and that it proves to be a useful and readable way for them to update their knowledge of the science and practice of geriatric psychiatry.

*Mohammed T Abou-Saleh*
*Cornelius L E Katona*
*Anand Kumar*
Preface to Second Edition

The editors were very gratified that the first edition of this textbook was generally well received and that a second edition has been called for. It is now seven years since the original book appeared, and there have been many more advances in the subject. In spite of new sections and some wholesale rewriting, it has been possible once again, to contain the information in one volume. Very sadly some of our original contributors have died. New authors have replaced them while others have been added in an endeavour to keep the text authoritative and up-to-date. The helpful criticisms of the first edition have been carefully considered in the preparation of this one. Having so many distinguished authors with such a breadth of interest, while greatly enhancing the book, has led to a long gestation period, but we believe that it has been worthwhile. Much of the original format has been retained in order to continue to stimulate lively debate and exchange of views. If the book contributes to the growing strength of Geriatric Psychiatry internationally, it will have done its work.

John R. M. Copeland
Mohammed T. Abou-Saleh
Dan G. Blazer
Preface to First Edition

The discipline of the psychiatry of old age has moved rapidly in recent years and the number of practitioners has expanded worldwide. An authoritative text is required which draws on the knowledge of these experts and which reflects both new scientific advances and innovations in service development.

In a comparatively new subject many of the issues are still contentious and on some of these we have tried to provide the opportunity for the expression of different points of view. Readers are asked to judge the issues for themselves from the evidence set out.

Here and there short, special articles have been commissioned which present research findings in more detail and describe new aspects of care.

They are intended to enliven the text and their choice has been dependent on timing and opportunity.

We have also tried to give a “feel” for what is happening in developing countries and the scope of the problems experienced by local practitioners.

Even a book of this size can never be complete and no doubt gaps in the coverage of subjects will be identified. We would be glad to have them pointed out. The more comprehensive a book aims to be the longer it takes to come to publication and in a fast-moving area of knowledge this can be a problem. Many of our authors have been kind enough to update their contributions at a late stage, which we hope has overcome this difficulty to some extent.

In the early stages of the development of a subject there is insufficient corpus of knowledge to assemble in book form. This situation has changed dramatically for geriatric psychiatry in recent years. We hope that the knowledge gathered here from our distinguished international panel of authors bears this out.

John R. M. Copeland
Mohammed T. Abou-Saleh
Dan G. Blazer