Understanding and Treating Tardive Dyskinesia - Dilip V. Jeste 1982

Drug Induced Movement Disorders - Stewart Factor 2008-04-15 The second revised edition of this text will update and present current state of the art clinical approaches to this subject. This book will continue to be the source text of information on drug-induced movement disorders authored and edited by the pioneers in the field. It will be an invaluable addition to the library of any neurologist.

Tardive Dyskinesia - Chanoch Miodownik 2018-09-09 Abnormal involuntary dyskinetic movements in schizophrenia patients have been documented for more than 140 years. However, after introducing into clinical practice antipsychotic medications, movement disturbances became a relatively frequent phenomenon. Medication-induced movement disorders are divided into two groups: a) acute, which appears during several hours or days after beginning treatment with psychotropic medications, and b) delayed or tardive motor disturbances that occur after months or years of taking psychotropic drugs. In the terms present meaning, the latter are iatrogenic, neurological, hyperkinetic movement disturbances characterized by repetitive, involuntary, purposeless movements in the oral/lingual/buccal area, body or chorea/thetoid movements of the extremities. Tardive movement disorder (TMD) is a serious, disabling and potentially permanent pathology. The pathogenesis of TMD remains unclear, and the pathophysiology is complex, multifactorial, and still not fully understood. Moreover, there is solid evidence of a genetic predisposition to these disturbances. Abnormal movements should appear during exposure, or within four weeks of withdrawal from oral psychotropic medications or eight weeks from depot formulations. The minimal exposure to these drugs should be three months, except for patients older than 60, who can develop TMD after its use for one month. Finally, the movements should be present for at least one month to fulfill the criteria for TMD. Several distinct forms of TMD exist, specifically tardive akathisia, tardive blepharospasm, tardive dystonia, tardive gait, tardive myoclonus, tardive tremor, and tardive tics, and they have different pathophysiologies and treatment. The advent and widespread use of a new generation of antipsychotics in clinical practice had been expected to dramatically reduce the incidence and prevalence of TMD, however the reduction, if any, was modest. A number of drugs were tried for the management of this motor disturbance, yet until now no effective and standard treatment has been found. Therefore, the management of this motor disturbance remains an actual topic as well as a challenge for clinicians. Although much has been written about TMD, this is obviously not a new clinical issue. Awareness of these motor disturbances as a result of medication treatment is a vital step toward intervention in the pathological process. Furthermore, it will be helpful for the protection and prevention of serious complications, while also allowing for greater access to clinicians in overall areas of medicine. The authors believe that a better understanding of TMD will strengthen the efforts and success of effective diagnosing, prevention and treatment of this condition.

Tardive dyskinesia - 1988 Offers the full text of a fact sheet entitled “Tardive Dyskinesia,” provided by the National Institute of Neurological Disorders and Stroke (NINDS) of the National Institutes of Health in Bethesda, Maryland. Notes that tardive dyskinesia is a neurological syndrome caused by the long-term use of neuroleptic drugs. Discusses the treatment, prognosis, and research.


Management of Tardive Dyskinesia - American Psychiatric Association 1969-05-01 The book is a compendium of articles from Hospital and Community Psychiatry on tardive dyskinesia.

Tardive Dyskinesia - American Psychiatric Association. Task Force on Tardive Dyskinesia 1992 Since the APA’s last report on tardive dyskinesia in 1979, considerable research has been conducted on the prevalence, incidence, and risk factors associated with the development of late-occurring neuroleptic side effects. This book summarizes the progress made over the last decade in understanding the differential diagnosis and epidemiology of tardive dyskinesia, as well as risk factors, course, and treatment. The reader will benefit from the book’s coverage of * indications for neuroleptic use* alternative maintenance strategies* factors to consider in making a differential diagnosis* frequently encountered problems in dealing with special populations such as children and mentally retarded people* clinical-legal issues related to tardive dyskinesia * clearly specified recommendations for prevention and management

Dystonia - Tamer Rizk 2018-11-07 The book contains four chapters discussing dystonia from a new perspective. Dystonia may result from either diffuse or localized pathology of the cerebral cortex, brain stem, or spinal cord. Management of dystonia is challenging, and specific goals should be identified. Dystonia is considered one of the most disabling conditions in the pediatric age group, which may remain until adulthood; treatment is usually unsatisfactory. Meige’s syndrome, or “ornomandibular dystonia,” may be misdiagnosed as temporomandibular joint or psychogenic disorder, which will alter management and delay proper treatment. Dystonia with non-motor disorders includes sleep, cognitive, pain, sensory, and psychiatric disorders, and their pathophysiological and biochemical mechanisms and specific treatment are discussed. This book will be of interest to GPs, neurologists, family physicians, and internal medicine specialists.

What is Drug induced Tardive Dyskinesia? An Updated Overview - Dr. Hakim Saboowala 2020-07-08 What is Drug induced Tardive Dyskinesia? An Updated Overview. Tardive dyskinesia (TD) is a movement disorder that causes involuntary, repetitive body movements and is commonly seen in patients who are on long-term treatment with antipsychotic medications. However, several other classes of medications with different mechanisms are also associated with TD. The reported incidence of TD seems to be reduced with the use of atypical antipsychotic drugs, yet the risk of developing TD remains with these medications. Furthermore, several other medication classes have a high prevalence of TD and yet are not commonly considered to be TD-inducing. Hence it is worth attempting to highlight the need for a prevention-based focus of TD treatment that starts with a clinical consideration of pharmacological advances, and successful community programs for discharged patients suffering from this debilitating disorder. Understanding and Treating Schizophrenia: Contemporary Research, Theory, and Practice presents a comprehensive review of evidence concerning the epidemiology and course and outcome of schizophrenia.

Understanding and Treating Schizophrenia - Terry S Trepper 2013-12-19 Get a fair and balanced perspective on schizophrenia! Understanding and Treating Schizophrenia: Contemporary Research, Theory, and Practice is a comprehensive overview of schizophrenia and its treatment from a variety of approaches. The book presents a balanced look at the most influential theoretical perspectives based on empirical research, clinical descriptions, and narrative histories. Dr. Glenn Shean, author of Schizophrenia: An Introduction to Research and Theory, examines neurocognitive and neurodevelopmental models of brain dysfunction, psychodynamic and family factors, up-to-date pharmacological advances, and successful community programs for discharged patients suffering from this debilitating disorder. Understanding and Treating Schizophrenia: Contemporary Research, Theory, and Practice presents a comprehensive review of evidence concerning the epidemiology and course and outcome of schizophrenia.
Parkinson's Disease and Movement Disorders - Charles H. Adler

Managing the Side Effects of Psychotropic Medications, Second Edition - Joseph F. Goldberg, M.D., M.S.

The Maudsley Prescribing Guidelines in Psychiatry - David M. Taylor

Tardive Dyskinesia - Chanoch Miodownik

Hyperkinetic Movement Disorders - Alberto Albanese

Neuroleptic-induced Movement Disorders - Ramzy Yassa

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exist, specifically tardive akathisia, tardive blepharospasm, tardive dystonia, tardive gait, tardive myoclonus, tardive tremor, and tardive tics, and they have different pathophysiological and treatment implications. The widespread use of a new generation of antipsychotics in clinical practice had been expected to dramatically reduce the incidence and prevalence of TMD, however the reduction, if any, was modest. A number of drugs were tried for the management of this motor disturbance, yet until now no effective and standard treatment has been found. Therefore, the management of this motor disturbance remains an actual topic as well as a challenge for clinicians. Although much has been written about TMD, this is obviously not a new clinical issue. Awareness of these motor disturbances as a result of medication treatment is a vital step toward intervention in the pathological process. Furthermore, it will be helpful for the protection and prevention of serious complications and also allowing for greater access to treatments in overall areas of medicine. The authors believe that a better understanding of TMD will strengthen the efforts and success of effective diagnosis, prevention and treatment of this condition.


Principles and Practice of Movement Disorders E-Book—Stanley Fahn 2011-08-09 Principles and Practice of Movement Disorders provides the complete, expert guidance you need to diagnose and manage these challenging conditions. Drs. Stanley Fahn, Joseph Jankovic and Mark Hallett explore all facets of these disorders, including the latest rating scales for clinical research, neurochemistry, clinical pharmacology, genetics, clinical trials, and experimental therapeutics. This edition features many new full-color images, all new graphic of pediatric disorders, updated Parkinson information, and many other valuable updates. An accompanying Expert Consult website makes the content fully searchable and contains several hundred video clips that illustrate the manifestations of all the movement disorders in the book along with their differential diagnoses. Get just the information you need on a clinical approach to diagnosis and management, with minimal emphasis on basic science. Find the answers you need quickly and easily thanks to a reader-friendly full-color format, with plentiful diagrams, photographs, and tables. Apply the latest advances to diagnosis and treatment of pediatric movement disorders, Parkinson disease, and much more. View the characteristic presentation of each disorder with a complete collection of professional-quality, narrated videos online. Better visualize every concept with new full-color illustrations throughout. Search the complete text online, follow links to PubMed abstracts, and download all of the illustrations, at www.expertconsult.com.

The American Psychiatric Association Practice Guideline on the Use of Antipsychotics to Treat Agitation or Psychosis in Patients With Dementia—American Psychiatric Association 2016 Dementia is associated with a sizeable public health burden that is growing rapidly as the population ages. In addition to cognitive impairments, individuals with dementia often come to clinical attention because of symptoms of a behavioral disturbance (e.g., agitation, aggression) or psychosis. The burden on caregivers is substantial and is increased when dementia is associated with behavioral and psychological symptoms, and particularly with agitation or aggression. Treatment of psychotic symptoms and agitation in individuals with dementia has often involved use of antipsychotic medications. In recent years, the risks associated with use of these agents in the older adult population have become apparent. There has been a growing need to develop guidelines for appropriate use of antipsychotic medications in dementia. The American Psychiatric Association Practice Guideline on the Use of Antipsychotics to Treat Agitation or Psychosis in Patients With Dementia seeks to fulfill this need to improve the care of patients with dementia who are exhibiting agitation or psychosis. The guideline focuses on the judicious use of antipsychotic medications when agitation or psychosis occurs in association with dementia. It is intended to apply to individuals with dementia in all settings of care as well as to care delivered by generalist and specialist clinicians. The guideline offers clear, concise, and actionable recommendation statements to help clinicians incorporate Supplemental Security Income (SSI) benefits due to mental disorders has been observed through several decades of the program beginning in 1965 and continuing through 2016. Nevertheless, less than 5% of children in the United States are recipients of SSI disability benefits for a mental disorder. At the request of the Social Security Administration, Mental Disorders and Disability Among Low-Income Children compares national trends in the number of children with mental disorders with the trends in the number of children receiving benefits from the SSI program, and describes the possible factors that may contribute to any differences between the two groups. This report provides an overview of the current status of the diagnosis and treatment of mental disorders, and the levels of impairment in the U.S. population under age 18. The report focuses on 6 mental disorders, chosen due to their prevalence and the severity of disability attributed to those disorders within the SSI disability program: attention-deficit/hyperactivity disorder, oppositional defiant disorder/conduct disorder, autism spectrum disorder, intellectual disability, learning disabilities, and mood disorders. While this report is not a comprehensive discussion of these disorders, Mental Disorders and Disability Among Low-Income Children provides the best currently available information regarding demographics, diagnosis, treatment, and expectations for the disorder time course - both the natural course and under treatment.

Committed—Dinanah Miller 2016-11 “Every mass shooting in America raises the question of whether there would be fewer such shootings if people who have mental illness were locked away. Of course, some perpetrators were already being treated when they acted, and some never gave any sign that they might be dangerous before they acted. Nevertheless, the question of involuntary commitment comes up over and over again when a mass shooting occurs. In Committed, psychiatrists Dinah Miller and Anne Hanson offer a comprehensive account of the controversy surrounding involuntary
psychiatric care in the United States. Through interviews and cases they explore the clinicians, consumers, advocates, institutions, and laws involved. They talk with people who have been involuntarily commited—both those who have been helped by this treatment and those who have been traumatized by it—and with doctors who believe that more people with mental illness should be treated, even against their will. They talk with families, police, ED staff, judges, someone from the Church of Scientology, representatives from NAMI and APA, and medical administrators of inpatient facilities. They explore practices such as seclusion and restraint, involuntary medications, and involuntary electroconvulsive therapy—all within the context of civil rights. Miller and Hanson explain why some people push for increased involuntary treatment while others view psychiatrists as money-hungry power mongers and their medications as the cause, not the cure, of symptoms. The authors take a middle view, advocating for the limited but judicious use of involuntary and humane psychiatric care as a last resort when someone poses a danger to themselves or others.--

Tardive Dyskinesia—William E. Fann 1990

Spasmodic Torticollis Handbook—Karen Frei, MD 2003-07-01 Spasmodic torticollis, also known as cervical dystonia, affects about three people in 10,000, or an estimated 85,000 individuals in the United States alone. Despite this, there has been until now a lack of information outside of the professional medical literature for use by individuals with this disorder and their families. This book provides comprehensive information on the disorder for people with spasmodic torticollis and those close to them. Medical terms and concepts are introduced sequentially and then used as building blocks for the later discussion. Beginning with a clear definition of the disorder, the book categorizes the various types of torticollis into the broader category of movement disorders, and differentiates it from other conditions with which it is often confused. The authors then present a stepwise introduction to the relevant anatomy and physiology of the nervous system and neck. They draw on the experiences of their patients to build up a picture of what they think the experiences of an individual might have been or she goes through the initial onset of symptoms, progression of the disorder, surgical options, treatments, depression, dementia, the role of dopamine receptors in these disorders. The book is divided into sections on Parkinson’s disease, Huntington’s disease, dystonia, tremor, paroxysmal movement disorders, ataxia, myoclonus, restless legs syndrome, drug-induced movement disorders, multiple system atrophy, progressive supranuclear palsy/oculocerebrocortical dystrophy. Chief among the symptoms of spasmodic torticollis is a unique feature of the book is the accompanying video content, comprising common cases in each category of movement disorders. The video clips come from Dr. Tarsy’s personal video collection at Beth Israel Deaconess Medical Center and Dr. Bhidayasiri’s personal collection at Chulalongkorn University and UCLA. The videos can be found at www.springerimages.com/Tarsy. Each case includes expert narration from Dr. Tarsy. Rather than focusing on rare cases, the authors explore typical cases, with good history and physical signs. Unsettling, easy to read, with highly instructive supporting video content, Movement Disorders: A Video Atlas is an indispensable reference for all clinicians interested in the fascinating field of movement disorders.

Therapy of Movement Disorders—Stephen G. Reich 2019-06-63 This case-based text provides treatment approaches to common and uncommon movement disorders. The first two parts of the book are devoted to the wide spectrum of motor and non-motor problems encountered in caring for people with Parkinson’s disease, as well as Parkinsonian syndromes. Next are chapters with chapters addressing essential and other tremor disorders followed by management of the various dystonic syndromes and other hyperkinetic disorders including chorea, tics, and myoclonus. Other disorders covered are drug-induced movement disorders, psychogenic movement disorders, Wilson’s disease, hemifacial spasm and more. Authored by experts globally, this practical guide will help physicians, other healthcare professionals and trainees care for patients with a wide spectrum of movement disorder related problems.

Movement Disorders—Mark S. LeBox 2014-10-24 The use of animal models is a key aspect of scientific research in numerous fields of medicine. Movement Disorders, Second Edition vigorously examines the important contributions and application of animal models to the understanding of human movement disorders, and serves as an essential resource for basic neuroscientists engaged in movement disorders research. Academic clinicians, translational researchers and basic scientists are brought together to connect experimental findings made in different animal models to the clinical features, pathophysiology and treatment of human movement disorders. The book is divided into sections on Parkinson’s disease, Huntington’s disease, dystonia, tremor, paroxysmal movement disorders, ataxia, myoclonus, restless legs syndrome, drug-induced movement disorders, multiple system atrophy, progressive supranuclear palsy/corticobasal degeneration. This book serves as an essential resource for both clinicians interested in the science being generated with animal models and basic scientists studying the pathogenesis of particular movement disorders. Introduces the scientific foundations for modern movement disorders research Contributing authors are internationally known experts Completely rewritten and updated Each chapter is a comprehensive review of genetic findings for each type of movement disorder covers Parkinson’s disease, Huntington’s disease, dystonia, tremors, and tics

Antipsychotic Drugs and Their Side-Effects—Thomas R.E. Barnes 2013-10-22 In line with other volumes in the Neuroscience Perspectives Series, this volume covers the background, pharmacology, molecular biology, and biochemistry of antipsychotic drugs, together with an overview of the therapeutic considerations. Over the past 40 years, the effectiveness of conventional neuroleptic agents for psychotic illness has been offset by a wide array of adverse side-effects including motor side-effects like parkinsonism. Studies show that lowering doses may still produce the antipsychotic effect while lessening the risk of side-effects. As all available antipsychotic drugs are able to block dopamine, specifically D2 receptors, doses below the threshold level for producing acute motor disorder can still be therapeutically effective. With the identification and characterization of multiple dopamine receptor subtypes the possibility of more selective drugs with better side-effect potential has arisen. Other novel antipsychotic agents include D1 receptor blockers, partial dopamine agonists and non-dopamine drugs such as 5-HT receptor blockers, sigma receptor antagonists and NMDA receptor agonists. This volume reviews both the basic science of the conventional and atypical neuroleptics and their potential and potential therapeutic uses.

Movement Disorders: A Video Atlas—Roongroj Bhidayasiri 2012-07-04 Movement Disorders: A Video Atlas is a practical and concise title offering an introduction to the field of movement disorders, which is expanding rapidly with the involvement of various disciplines and specialties. The unique feature of the book is the accompanying video content, comprising common cases in each category of movement disorders. The video clips come from Dr. Tarsy’s personal video collection at Beth Israel Deaconess Medical Center and Dr. Bhidayasiri’s personal collection at Chulalongkorn University and UCLA. The videos can be found at www.springerimages.com/Tarsy. Each case includes expert narration from Dr. Tarsy. Rather than focusing on rare cases, the authors explore typical cases, with good history and physical signs. Unsettling, easy to read, with highly instructive supporting video content, Movement Disorders: A Video Atlas is an indispensable reference for all clinicians interested in the fascinating field of movement disorders.

Movement Disorders—C. David Marsden 2013-10-22 Neurology, Volume 2: Movement Disorders is a part of an international series of critical reviews of topics in neurology. This volume focuses on Parkinsonism and dystonia, a condition characterized by abnormal involuntary movements. Organized into 18 chapters, this book first elucidates the problems, causes, pathology, brain neurotransmitter changes and receptors, depression, dementia, fluctuations of disability, and treatment of Parkinson’s disease. Subsequent chapters then explore the problems, controversies, and surgical approaches involved in certain dystesias. The role of dopamine receptors in movement disorders is also explored. This book will be valuable to neurologists-in-training, as well as to those in research field or in practice in this field of interest. The book’s clinical content will help in the management of patients with movement disorders.

Biofeedback as an Alternative Form of Treatment for Tardive Dyskinesia—Beth Abrams 1986

Biography

Dr. Tarsy received his doctorate in neurology from the University of California at Los Angeles, where he is a Clinical Professor of Neurology. He is an international authority in the field of movement disorders, and has extensively written and lectured on this subject. While he is an active researcher, his main career interest is in clinical practice, and he has participated in more than 1600 patient evaluations for movement disorders. His patients have included famous athletes, actors, and musicians. Dr. Tarsy has appeared on national television shows, including CNN Live, CBS, and NBC. The author of Movement Disorders: A Video Atlas, he is one of the pioneers in the use of botulinum toxin to manage this condition, and has pioneered the use of biofeedback as an alternative form of treatment for tardive dyskinesia—William E. Fann 1990

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Movement Disorders—C. David Marsden 2013-10-22 Neurology, Volume 2: Movement Disorders is a part of an international series of critical reviews of topics in neurology. This volume focuses on Parkinsonism and dystonia, a condition characterized by abnormal involuntary movements. Organized into 18 chapters, this book first elucidates the problems, causes, pathology, brain neurotransmitter changes and receptors, depression, dementia, fluctuations of disability, and treatment of Parkinson’s disease. Subsequent chapters then explore the problems, controversies, and surgical approaches involved in certain dystesias. The role of dopamine receptors in movement disorders is also explored. This book will be valuable to neurologists-in-training, as well as to those in research field or in practice in this field of interest. The book’s clinical content will help in the management of patients with movement disorders.
Psychiatric Disorders - Paul C. McCabe 2010-02-23 Written for school psychologists, counselors, administrators, and teachers, this concise, well-researched volume provides a balanced perspective on the most important psychiatric issues for educators today.

The Great Pretender - Susannah Cahalan 2019-11-05 "One of America's most courageous young journalists" and the author of the #1 New York Times bestselling memoir Brain on Fire investigates the shocking mystery behind the dramatic experiment that revolutionized modern medicine (NPR). Doctors have struggled for centuries to define insanity—how do you diagnose it, how do you treat it, how do you even know what it is? In search of an answer, in the 1970s a Stanford psychologist named David Rosenhan and seven other people—sane, healthy, well-adjusted members of society—went undercover into asylums around America to test the legitimacy of psychiatry's labels. Forced to remain inside until they'd "proven" themselves sane, all eight emerged with alarming diagnoses and even more troubling stories of their treatment. Rosenhan's watershed study broke open the field of psychiatry, closing down institutions and changing mental health diagnosis forever. But, as Cahalan's explosive new research shows in this real-life detective story, very little in this saga is exactly as it seems. What really happened behind those closed asylum doors?

Neurostimulation and Neuromodulation in Contemporary Therapeutic Practice - Denis Larrivee 2020-09-30 Clinical applications of neurostimulation or neuromodulation are experiencing rapid growth, driven by an evolution in neurotechnologies, the limitations of pharmacotherapy, and an improving understanding of brain physiology. New methods are promising for intractable or marginally tractable cognitive diseases and for adjunct therapies, as they offer greatly improved spatial and temporal resolution, thereby promising greater specificity and quicker recovery from disease. This book includes up-to-date and in-depth studies of many of these therapies, with chapters addressing their use in epilepsy, spasticity, pain, neurodegeneration, and spinal cord dysfunctions, among others, illustrating their versatility and therapeutic promise for cognitive dysfunction.

Encyclopedia of Movement Disorders - 2010-02-26 The Encyclopedia of Movement Disorders is a comprehensive reference work on movement disorders, encompassing a wide variety of topics in neurology, neurosurgery, psychiatry and pharmacology. This compilation will feature more than 300 focused entries, including sections on different disease states, pathophysiology, epidemiology, genetics, clinical presentation, diagnostic tools, as well as discussions on relevant basic science topics. This Encyclopedia is an essential addition to any collection, written to be accessible for both the clinical and non-clinical reader. Academic clinicians, translational researchers and basic scientists are brought together to connect experimental findings made in the laboratory to the clinical features, pathophysiology and treatment of movement disorders. The Encyclopedia targets a broad readership, ranging from students to general physicians, basic scientists and Movement Disorder specialists. Published both in print and via Elsevier's online platform of Science Direct, this Encyclopedia will have the enhanced option of integrating traditional print with online multimedia. Connects experimental findings made in the laboratory to the clinical features, pathophysiology, and treatment of movement disorders Encompasses a wide variety of topics in neurology neurosurgery, psychiatry, and pharmacology Written for a broad readership ranging from students to general physicians, basic scientists, and movement disorder specialists

Tardive Dyskinesia and Related Involuntary Movement Disorders - Joseph DeVeau-Geiss 1982

Psychiatry of Parkinson's Disease - K.P. Ebmeier 2012-01-09 Psychiatric symptoms are common in the neurological and geriatric care of patients with Parkinson's disease. This book assembles short reviews from experts in the field to chart the various psychiatric syndromes known in Parkinson's disease, their presentation, etiology and management. Presented are special topics on epidemiology of psychiatric symptoms, affective disorders and apathy, early cognitive impairment through to dementia, visuoperceptual dysfunction, psychotic disorders, sleep disturbances, impulse disorders and sexual problems. Further, rarely discussed issues, such as the relationship between somatoform disorders and parkinsonism are reviewed. This publication is essential reading for old age psychiatrists, gerontologists and neurologists who work with patients suffering from Parkinson's disease. In addition, health practitioners who deal with senior patients, as well as scientists who need a quick update on the progress in this important clinical field will find this volume a helpful reference.

Schizophrenia - Michelle Harris 2018-12-15 Schizophrenia affects a person's ability to think clearly and distinguish between reality and imagination. Historically, those suffering with the condition were treated poorly. However, scientific discoveries regarding the chemistry and structure of the brain, as well as recent advancements in medication and therapeutic treatments for the disease, have allowed many who suffer from schizophrenia to lead rewarding and meaningful lives. The informative text, augmented by in-depth sidebars, quotes from medical experts, detailed graphs, and full-color photographs, offers readers a clearer understanding of this often misunderstood condition and provides helpful resources to aid people with schizophrenia and their loved ones.

Pathophysiology, Pharmacology and Biochemistry of Dyskinesia - 2011-09-07 Published since 1959, International Review of Neurobiology is a well-known series appealing to neuroscientists, clinicians, psychologists, physiologists, and pharmacologists. Led by an internationally renowned editorial board, this important serial publishes both eclectic volumes made up of timely reviews and thematic volumes that focus on recent progress in a specific area of neurobiology research. This volume reviews existing theories and current research surrounding the movement disorder Dyskinesia. Leading authors review state-of-the-art in their field of investigation and provide their views and perspectives for future research. Chapters are extensively referenced to provide readers with a comprehensive list of resources on the topics covered. All chapters include comprehensive background information and are written in a clear form that is also accessible to the non-specialist.