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**Bipolar Disorder in Later Life**

edited by Martha Sajatovic, MD, and Frederic C. Blow, PhD. The Johns Hopkins University Press, Baltimore, MD, 2007, 280 pages, \$50.00.

As the United States' population continues to age, we face a growing challenge to provide health care to an increasingly elderly population. Included in these older folks will be patients with recurrent and chronic mental illness. In particular, mental health providers will be increasingly managing older bipolar patients. Consequently, the book *Bipolar Disorder in Later Life*, edited by Drs Martha Sajatovic and Frederic C. Blow, is timely, both for the information that it provides as well as highlighting the information that we lack.

Hampering any text on managing late-life bipolar disorder is the general lack of attention that these patients have received in clinical research. The authors of this text struggle with this limitation in each chapter, so they often rely on reasonable extrapolation from information about bipolar disorder in younger adults. Although we could be critical of this approach, in fact, it is currently the best that we can do, and, in this regard, this textbook becomes a valuable addition to the library of both busy clinicians and psychiatric researchers.

*Bipolar Disorder in Later Life* is divided into 4 major sections. The first section provides an overview of the epidemiology of late-life bipolar disorder. Although well-written and thoughtful, the general lack of knowledge in this area is most problematic here, limiting what the authors can really say. Chapter 3 (Hirdes et al) is a bright spot that presents an interesting review of the interRAI (resident assessment instrument) and how it has been applied in nursing home settings in Canada. Although there are limited data for bipolar disorder specifically, the chapter presents a challenge for us to think about how we manage elderly bipolar patients in the United States.

The second section of the book provides an overview of treatment approaches to late-life bipolar disorder. Again, faced with minimal data, the authors extrapolate from care of younger adults and, in doing so, provide practical information. Chapter 5 (Dolder et al) provides a comprehensive review of pharmacologic and medical management of bipolar disorder that will be useful for clinicians. Chapter 6 (McBride and Bauer) presents an interesting discussion of the Life Goals Program developed by the authors and how it might be applied to older bipolar patients. Case vignettes are particularly poignant in this discussion.

The third section reviews medical, psychiatric, and substance abuse comorbidity in bipolar disorder. Chapter 8 (Chermack et al) is a timely review of substance use disorder complications in bipolar disorder and identifies important areas of research that are needed in older patients. It reminds us that substance abuse is not just a problem of youth. Chapter 9 (Kales) is a practical, thoroughly-referenced guide for thinking about medical comorbidity. The final chapter in this section (Loue) addresses the potential effects of culture, ethnicity, and race in bipolar disorder. The lack of information available in this population limits what can be present, and this limitation is reflected in this chapter.

The final section of the book discusses health care delivery and research. Chapter 11 (Kilbourne and Pincus) thoroughly presents approaches to health care delivery in general, with reference to older bipolar patients. The models discussed will be of interest to private clinicians, although perhaps more valuable to clinical administrators designing or modernizing health delivery systems. Chapter 12 (Bartels and van Citters) is a cogently argued discussion of evidence-based medicine and its application in psychiatry. *Bipolar Disorder in Later Life* ends with a chapter on research that is primarily concerned with issues surrounding capacity to

provide informed consent. Based largely on work from the 1990s, this chapter was less rewarding than the rest of the section, as it felt somewhat dated and underdeveloped.

In general, however, the editors have compiled a solid collection of reviews that have worked from minimal data to create cogent and well-developed extrapolations into late-life bipolar patients that clinicians, health care administrators, and students will find interesting. Overall, this text is a useful addition to any mental health practitioner's library.

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