
Note: The authors have worked to ensure that all information in this book concerning drug dosages, schedules, and routes of administration is accurate as of the time of publication and consistent with standards set by the U.S. Food and Drug Administration and the general medical community. As medical research and practice advance, however, therapeutic standards may change. For this reason and because human and mechanical errors sometimes occur, we recommend that readers follow the advice of a physician who is directly involved in their care or the care of a member of their family.

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This text reviews the use of pharmacologic agents, not all of which are cleared for marketing by the FDA for the psychiatric disorders discussed in this publication.

In keeping with good clinical practice, before prescribing any medication, review the complete prescribing information, including indications, contraindications, warnings, precautions, and adverse effects.

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Preface

Mental health is an important public health issue, as evidenced by the prevalence of psychiatric problems that are associated with tremendous disability, immense personal suffering, and a heavy economic burden.^{1,2} National survey data indicate that 48% of a representative US adult sample population have reported a psychiatric disorder at one time or another and that about 30% have reported a disorder during the past 12 months. Less than half of those with a lifetime history of a psychiatric disorder ever received treatment. Interestingly, 14% of the sample reported a lifetime history of three or more comorbid psychiatric disorders.³ These findings speak directly to the importance of screening, identifying, and treating patients with mental illness.

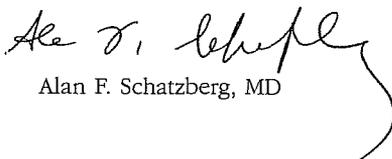
The primary care setting has been called a *de facto mental healthcare system* in the US⁴ and the *hidden mental health network*.⁵ About 60% of patients with a psychiatric disorder are identified and receive treatment in a primary care setting.⁴ With the changing healthcare environment in the US, more and more patients are entering the primary care network, creating ever larger, busier, and more closely regulated practices. Thus, primary care physicians are being forced to develop or refine strategies for screening and identifying patients with psychiatric disorders.

This handbook, *Recognition and Treatment of Psychiatric Disorders: A Psychopharmacology Handbook for Primary Care*, was developed to address these issues and meet some of these needs. Another factor that led to the development of this handbook is the continually growing number of new drugs being introduced for the treatment of mental disorders and of currently available drugs being used for new psychiatric indications. Although many psychiatric disorders are suitable for treatment in the primary care setting, issues for referral to psychiatric colleagues are germane to contemporary practice and are discussed in this text. We recognize that primary care physicians have little extra time to read the voluminous psychiatric literature and distill it down to practical yet timely and accurate treatment strategies, and we hope this handbook will aid in that endeavor.

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Charles B. Nemeroff, MD, PhD



Alan F. Schatzberg, MD