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## From the Editor's Desk

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In many clinical presentations our treatment of choice is guided as much by our clinical instinct as our knowledge of scientific literature and guidelines. This issue of *Irish Journal of Psychological Medicine* primarily deals with common clinical situations, ranging from cognitive impairment to suicidality, many of which are not currently managed using clear treatment algorithms.

Clinicians will be very familiar with the issues highlighted in the review of treatments for moderate depression (pp. 195–202), a common and specific category of illness which is evidently poorly served by existing research. For clinicians managing presentations involving suicidality, the tension between positive risktaking and a risk-averse medical environment can be demanding. The Collaborative Assessment and Management of Suicide editorial (pp. 151–154) provides a relatively novel perspective, which the authors propose should be used nationally. Readers may find sharp contrast between such intervention and the analysis of suicide in 19th-century Ireland (pp. 175–180).

Historians cannot only enjoy the exploration of 19th-century Ireland but also read about the dynamic psychiatrist Mary Barkas' remarkable career, from New Zealand to England (pp. 203–206). The challenges faced by Dr Barkas as a member of a minority community of female psychiatrists at the time provides for fascinating reading. Prof. Brendan Kelly's exploration of the history of Irish psychiatry's attitude to homosexuality (pp. 207–213) details a history of oppression and discrimination towards an already marginalised group, and highlights further lessons to be gleaned from our past.

A pilot study of cognitive stimulation training (CST) for mild–moderate dementia adds to the increasing number of positive evaluations for this intervention (pp. 167–174). The authors advocate for routine use of CST for those diagnosed with mild–moderate dementia, another presentation where there is a relative paucity of alternative treatment options. Students of psychiatry and psychology as well as medical educators will find much of interest in the discussion of visuospatial testing and the pilot study of a novel alternative to the traditional, problematic, tests of clockdrawing and intersecting pentagons (pp. 167–174).

Trainee professionals in mental health disciplines may also be interested in the opinions of their peers as presented in the review of health student regard for substance-using patients (pp. 181–194). The danger of future marginalisation of this group of patients highlighted by the authors is all the more compelling when read alongside the historical reviews in this issue.

Finally, the obituary section highlights the fine career of one of Ireland's most prominent psychiatrists over the last century, Dr Dermot Walsh (pp. 215–218). Dr Walsh's achievements cannot be overemphasised, and his dedication to improving conditions for mental health patients in Ireland was exceptional and unparalleled. His passion for reform of the Irish Mental Health services will leave a legacy lasting long into the future.