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Nota di contenuto	Cover; Contents; Contributors; Introduction; Acknowledgments; 1 Psychobehavioral Disinhibition; Dopamine Excess in Parkinson's Disease; Mania Associated With Brain Injury; Neuropsychiatric Manifestations of a Paraneoplastic Syndrome; Aggression and Brain Injury; Disinhibition Mistaken for Mania; 2 Apathy; Apathy in Frontal Lobe Injury; 3 Depression; Major Depression and Panic Disorder Following Epilepsy Surgery; Poststroke Depression; Psychiatric Aspects of Multiple Sclerosis; 4 Anxiety; Temporal Lobe Epilepsy Presenting as Panic Attacks Secondary Obsessive-Compulsive Disorder Associated With Pallidal Lesions5 Psychosis; Dementia With Lewy Bodies; Temporal Lobe Epilepsy Psychosis and Depression; Frontal Lobe Epilepsy and Its Neuropsychiatric Manifestations; Atypical Psychosis in Mitochondrial Disease; 6 Hyperkinetic States; Tourette's Disorder in Adults; Psychosis Associated With Huntington's Disease; Tardive Dyskinesia; 7 Somatoform and Somatoform-Like Disorders; Multiple Physical Symptoms That Remain Undiagnosed; Complex Illness After a Fall; Lyme Disease; Epilepsia Partialis Continua and Pseudoseizures; Cogniform Disorder 8 Alterations in ConsciousnessHashimoto's Encephalopathy; Dissociative Disorders; Anti-NMDA Receptor Encephalitis; Neuroleptic Malignant Syndrome; Neuropsychiatric Systemic Lupus Erythematosus;

9 Memory Failure; Amnesia Associated With Epilepsy; Memory Loss Associated With Herpes Simplex Encephalitis; 10 Intellectual Failure; Frontotemporal Dementia; Dementia Syndrome of Depression; Psychosis and Cognitive Impairment in an Adolescent; Cognitive-Intellectual Dysfunction in Multiple Sclerosis; Postconcussive Syndrome and Depression After Mild Traumatic Brain Injury
Tuberous Sclerosis Mistaken for Attention-Deficit/Hyperactivity Disorder
11 Focal Neurobehavioral Syndromes; Balint Syndrome; Left Hemispatial Neglect; Index; A; B; C; D; E; F; G; H; I; J; L; M; N; O; P; Q; R; S; T; V; W; Y; Z

Sommario/riassunto

<P>Casebook of Neuropsychiatry is comprised of 38 clinical cases based on real patient interactions that straddle the domains of neurology and psychiatry. The book is designed to supplement comprehensive texts by providing real-world accounts of patient presentations that clinicians are likely to encounter. </P>
