Mental Health Print Journal Bulletin
January 2017

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Alcohol and Substance Abuse
Bereavement
Child and Adolescent Issues
Dementia and Alzheimer’s Disease
Depression Disorders
Drugs and Prescribing
Learning Disabilities
LGBTQ+
Miscellaneous
Professional
Schizophrenia
Self-harm and Suicide
Therapies

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CAMHS
Personality Disorders
Dementia
Forensic Mental Health
Eating Disorders

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### Alcohol and Substance Abuse

**Are there gender differences in locus of control specific to alcohol dependence?**

Locus of control helps to explain behaviour in terms of internal (the individual is responsible) or external (outside forces, such as significant other people or chance, are responsible) elements. Past research on gender differences in locus of control in relation to alcohol dependence has shown mixed results. There is a need then to examine gender and locus of control in relation to alcohol dependence to ascertain the veracity of any locus of control differences as a function of gender.

McPherson, A and Martin, CR  
Journal of Clinical Nursing 26 (1&2) 258-265

### Examining an alcohol health worker service’s patient coverage

Alcohol health workers (AHWs) have been found to be effective at reducing alcohol-related hospital admissions, but there is still a paucity of evidence in keys areas. This was the first study to investigate what percentage of patients referred to an AHW service by alcohol screening tools are actually seen by the AHWs. The study—based in a large teaching hospital in the north of England—also investigated the impact of social deprivation on service usage. Research data came from a patient database and semi-structured interviews with AHWs. Further research is required to better understand the ‘harm paradox’ of patients’ differential susceptibility to alcohol-related harm and how this might impact AHW service patient flow.

Papworth, A et al  
British Journal of Nursing 26 (1) 18-23

### Bereavement

**Supporting children and young people with Autism Spectrum Disorder through bereavement**

Children with Autism Spectrum Disorder (ASD) may react to a bereavement in different ways to neurotypical children. This article explores some of the underlying perceptual and processing difficulties observed in children with ASD that may affect their understanding of death and their reaction to a bereavement. But children with ASD, like any others, need their grief both recognised and understood, and will need opportunities to express how they feel. The article gives some suggestions which may help children with ASD, and includes a list of helpful resources.

Koehler, K  
Bereavement Care  35 (3) 94-101

**Drug and alcohol-related bereavement and the role of peer support**

Many people experience acute isolation, lack of support and social stigma following a drug or alcohol related bereavement. This article highlights trends within drug and alcohol-related bereavement and the common themes which surface when someone dies in this context.
way. It goes on to explore the work of the BEAD – bereaved through drugs and alcohol project between Cruse Bereavement Care and Adfam in supporting this overlooked and under-supported group of bereaved people. It gives a particular emphasis on how BEAD’s team of dedicated, trained, peer support volunteers – all themselves bereaved through alcohol and drugs – are playing a significant role.

Turnbull, F and Standing, O
Bereavement Care 35 (3) 102-108

<table>
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<tr>
<th>Priorities for the development and evaluation of support after suicide bereavement in the UK: results of a discussion group</th>
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<td>We present the results of a group discussion conducted to identify research priorities among people bereaved by suicide regarding support needs. For this study, ten UK-based adults bereaved by the suicide of a partner or family member were invited to join a group discussion to identify and prioritise an intervention to evaluate. These priorities were discussed in the context of unmet needs for support, identifying a need to develop and evaluate: immediate outreach after suicide; diversification and development of peer support services; and individual psychological support for those who feel suicidal. The group also suggested five key outcome measures: isolation; stigma; psychological health; day-to-day social functioning; and functioning in a work or caregiver role. The views presented in this discussion are a valuable contribution to the design of research that will inform national public health policy and the suicide prevention strategy for England.</td>
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<tr>
<td>Pitman, A et al</td>
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<td>Bereavement Care 35 (3) 109-116</td>
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<th>Grief is not a disease but bereavement merits medical awareness</th>
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<td>Our 2007 review in The Lancet showed ways in which bereavement is a topic of medical importance, despite the fact that grief, in line with George Engel's famous but often misinterpreted words, cannot be called a disease. Since then, developments in scientific knowledge make it pertinent to ask afresh: what do health-care professionals in general and medical practitioners in particular need to know about bereavement?</td>
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<tr>
<td>Stroebe, M et al</td>
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<td>Lancet 389 (10067) 347-349</td>
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<th>Child and Adolescent Issues</th>
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<td>A critical analysis of child and adolescent mental health services policy in England</td>
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<td>Policy on Child and Adolescent Mental Health Services (CAMHS) in England has undergone radical changes in the last 15 years, with far reaching implications for funding models, access to services and service delivery. We consider the implications of CAMHS policies for the relationship between children, families, mental health services and the state. The article concludes by exploring how concepts of ‘parity of esteem’ and ‘stigma reduction’ may inadvertently exacerbate the individualisation of children's mental health.</td>
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<td>Callaghan, J et al</td>
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<td>Clinical Child Psychology and Psychiatry 22 (1) 109-127</td>
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Forensic mental health services for children and adolescents
This article outlines the rationale for dedicated specialist services for high-risk young people about whom there may be family or professional concerns in relation to mental disorder.
Hindley N, Lengua C, White O
BJPsych Advances 23 (1) 36-43

Adolescent anxiety and social media
The NSPCC hypothesises that young people are struggling with the ‘demands of the modern world’ and attributes some of this to social media.
Stadler, C
BMJ 356 (8089) 120

Dementia and Alzheimer's Disease

Digital technology and dementia: changing lives
Learning how to use digital technology can help people with dementia live more positive lives with memory loss. Tom French discusses key findings from a study showing how new “tech” can maintain mental activity and communication with family and friends.
French, Tom
Journal of Dementia Care 25 (1) 29-32

Dementia: there are so many apps for that...
Digital technology is changing the world, but is it doing the same for people with dementia? Phil Joddrell and Arlene Astell argue that it can, so long as tablet computer “apps” are adapted so that everyone can enjoy using them.
Jodrell, P and Astell, A
Journal of Dementia Care 25 (1) 32-34

Back to BACE: one approach to fighting Alzheimer's
This article looks at the use of beta-site amyloid precursor problem cleaving enzyme 1 in fighting Alzheimer's disease.
Bradley, P
British Journal of Healthcare Assistants 11 (1) 10-11

Dementia and palliative care: a challenge for all
Nyatanga, B
British Journal of Community Nursing 22 (1) 48

Healthcare decision making: past present and future, in light of a diagnosis of dementia
Advance care planning in dementia is less well developed than in some other disease
groups. A person with dementia may lose the capacity to make decisions associated with advance care planning early in the disease. This study explores the 'lived' context to health care decision-making of dyads (the person with dementia and their carer) in respect of past, present and future healthcare decision-making.

Harrison Dening K, et al
International Journal of Palliative Nursing 23 (1) 4-11

**Promoting fluid intake for patients with dementia or visual impairment**

Results of a trial of using coloured drinking glasses by older patients in an acute setting had positive effects on hydration.

Kingston, T
British Journal of Nursing 26 (2) 98-99

**Depression**

The best drug treatment for psychotic depression: antidepressants, antipsychotics or both?

Smith Katharine
BJPsych Advances 23 (1) 3-8

**Disorders**

None this month

**Drugs and Prescribing**

Benzodiazepine use increases risk of hip fracture in people with Alzheimer’s disease

Nursing Standard 31 (16-18) 19

**Learning Disabilities**

None this month

**LGBTQ+**

None this month

**Miscellaneous**

Older people and their care partners’ experiences of living with mental health needs: a focus on collaboration and cooperation

To explore how older people living at home with mental health needs and their care
partners experienced the practices of collaboration within and between services.

This study reports on the first stage of a three-year action research project that focused on improving mental health services for older people and their care partners living at home. Data were collected through individual interviews. Twenty people were interviewed. Data were analysed continuously and in parallel with data collection for the identification of themes.

McCormack, B et al
Journal of Clinical Nursing 26 (1&2) 103-114

Malingering mental disorders: clinical assessment

Malingering is the dishonest and intentional production of symptoms. It can cause considerable difficulty as assessment runs counter to normal practice and it may expose clinicians to testing medicolegal situations. This is the first part of a two-article review.

Tracy D, Rix K
BJPsych Advances 23 (1) 27-35

Diagnosis and treatment: are psychiatrists choosing wisely?

This article is about overuse in healthcare (ie overdiagnosis and overtreatment) and the launch of the Royal College of Psychiatrists Choosing Wisely campaign. It provides a critical reviee of why this might occur and whether Choosing Wisely is likely to be successful.

Maughan D, James A
BJPsych Advances 23 (1) 9-15

Enabling patients to manage altered body image

The author presented a model in the 1990s to explain altered body image, which has been used to characterise the difficulties encountered by patients who experience body change as a result of illness, injury or disability. However, it remains a challenge for nurses to establish care plans that can assist patients to manage the psychological adjustments associated with disfigurement. This article presents some simple questions to help patients narrate their psychological experiences and needs, and proposes a model of psychological change, based on the work of Kübler-Ross, to enable nurses to anticipate patient requirements that might arise at different stages of the individual’s recovery and rehabilitation. Body-image rehabilitation may be protracted. Therefore, it is essential for nurses to understand what the patient is thinking and feeling throughout the rehabilitation process and which stage of psychological change the patient is working through.

Price, B
Nursing Standard 31 (16-18) 60-71

Professional

None this month
**Schizophrenia**

**Psychological treatments for schizophrenia spectrum disorder: what is around the corner?**

*This article outlines the most promising of these new interventions and attempts to answer the crucial question as to their differential effects on different psychotic presentations.*

Turkington D, Lebert Latoyah
BJPscyh Advances 23 (1) 16-23

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