

A refreshing counterpoise to technical hyper-specialisation

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This new issue again illustrates the multidisciplinary content and the rich variety of perspectives on neurology and psychiatry offered by the SANP. Such diversity fits well with both the nature of clinical practice and the breadth of neuroscience research. It also provides a refreshing counterpoise to the common hyper-specialisation of many aspects of modern medicine, and underscores the notion that health (and disease) must be considered in relation to physical, mental and social dimensions. These various facets are neatly covered in the current issue of SANP.

In parallel to the many changes in our daily life since the emergence of COVID 19, psychiatry and neurology have encountered new challenges in the past months as a consequence of the pandemic, which are now reflected in new topics increasingly addressed in recent articles in this journal and others. Here, Maccaferri and colleagues describe their first attempt to design a new tool to provide support and resources to healthcare professionals confronted with COVID patients. As the pandemic produced sudden changes in tasks and priorities, higher workload, profound uncertainties and direct but intangible risks of contagion, levels of stress and energy demands have clearly increased for clinical staff across disciplines. To guarantee adequate and efficient care, it is important that professionals can monitor their own state of distress and find resources to react to it. Based on the observation that caregivers generally reported positive benefits from information material distributed to them, but had difficulties in organising this information, Maccaferri and colleagues propose new ways to improve the impact of such an intervention. Interestingly, the authors also show that healthcare professionals felt uncomfortable dealing with psychopathological terms applied to themselves. This indirectly underscores difficulties in insight as well as acceptance of symptoms of mental illness, which exist not only in the general population, but extend to medical professionals as well. Self-experiential aspects of psychopathological illness are also powerfully illustrated by first person accounts of their symptoms, as exemplified in the text of Arvova published in this issue.

Another paper in this issue by Moggetti and colleagues provides useful guidelines for promoting multidisciplinary management of a common psychiatric disease, namely, borderline personality disorder (BPD). The authors argue that there are important benefits of an integrative approach

engaging multiple competences organised in a network of professionals and centred on patient and individual needs in everyday life. As they illustrate, this requires major efforts of coordination and communication among caregivers and institutions, but clearly improves the quality of life and independence of patients. Moreover, such a “good enough” care system as developed for BPD might serve as a model for other diseases involving various handicaps in daily functioning. Further original considerations on health promotion and policy making are offered by Calzada and colleagues. They report that football players often seen with cigarettes on the Internet may actually run as fast and play longer than those who are not seen smoking, and conclude that caution is warranted when choosing groups of famous people as role models in smoking prevention or other health promotion strategies.

First person accounts of one's own symptoms of psychosis, as showcased by Arvova in this issue, also unveil the relentless efforts of patients in fighting against distortions in their perceptions, thoughts and feelings, and hence making sense of their illness. Such efforts to put together pieces of their mind may occasionally take impressive graphic artistic forms, such as those produced by Fernando Nannetti, whose history is summarised by Peiry in this issue. These efforts echo those of psychiatrists and scientists in their quest to assemble a vast amount of data about the molecular and neural underpinnings of mental disorders in order to better understand, treat and/or prevent them. Current knowledge on genetic risk factors and implications for redefining the traditional boundaries of psychiatric diseases are core themes of the interview of Prof. Cichon by Karl Studer.

First person accounts in neurological diseases are unfortunately less common than in psychiatry and it would be valuable to report them more systematically. Self-descriptions of symptoms such as neglect, agnosia, motor tics or proprioceptive deficits may provide not only striking perspectives on the miraculous functioning of our mind but also trigger valuable scientific insights in neuroscience, as brilliantly achieved in the books of Oliver Sacks. In the future, the SANP will welcome further systematic reports and analyses of self accounts in neurological and neuropsychological disorders.