

GUEST EDITORIAL

International Psychogeriatrics paper of the year 2016

Since 2014, the year in which *International Psychogeriatrics* celebrated 25 years of existence, *International Psychogeriatrics* has featured a “paper of the month” (POM) category. Chosen by the editorial team which ranks available new *International Psychogeriatrics* manuscripts from the categories “original research articles” and “reviews,” a POM is identified representing high scientific quality and clinical relevance. Each POM is accompanied by a short commentary highlighting its findings and relevance. For the year 2016 this resulted in twelve papers of the month of which nine were original research articles and three were systematic reviews or meta-analyses.

In 2016, as in the two previous years, a variety of important psychogeriatric topics were covered in these twelve POMs: the January 2016 paper highlighted the mental health implications after natural disasters (Parker *et al.*, 2016); the February 2016 paper reported on successful aging at age 100 (Araújo *et al.*, 2016); the March 2016 paper investigated healthcare resource utilization and cost for dementia in Germany (Michalowsky *et al.*, 2016); the April 2016 paper found a greater extent of subcortical atrophy on MRI in patients with dementia with Lewy Bodies compared to those with Alzheimer’s Disease (AD) (Watson *et al.*, 2016); the May 2016 paper presented the results of a trial of a cognitive rehabilitation program for people with AD (Amieva *et al.*, 2016); the June 2016 paper asked the question whether a psychological intervention for dementia family carers could also reduce elder abuse (the answer was no) (Cooper *et al.*, 2016); the July 2016 paper investigated risk factors for receiving a dementia diagnosis in German primary-care practices (Booker *et al.*, 2016); the August 2016 paper reported on the moderating effect of social engagement on driving cessation in older women (Pachana *et al.*, 2016); the September 2016 paper presented associations between depression, sleep disturbance, and [the] apolipoprotein E in the development of AD (Burke *et al.*, 2016); in the October 2016 paper the authors reported that only 10% of psychotropic drug use for neuropsychiatric symptoms in dementia was appropriate (van der Spek *et al.*, 2016); the November 2016 paper gave an overview on the relationship between behavioral and psychological

symptoms of dementia (BPSD) and well-being in carers (Feast *et al.*, 2016); and finally the December 2016 paper explored whether interventions with staff in long-term residential facilities can improve quality of care or quality of life for people with dementia (Bird *et al.*, 2016).

As in the two previous years, three independent judges helped *International Psychogeriatrics* to select the 2016 “paper of the year” from those twelve papers of the month. In 2016 these three judges were Dr Andrew Ford from Australia, Dr Janine Diehl-Schmid from Germany, and Dr Jan Mohlman from the USA; and the *International Psychogeriatrics* editorial team is very grateful for their assistance in ranking each POM independently from one another. Following this ranking process the May 2016 paper “Group and individual cognitive therapies in AD: the ETNA3 randomized trial” by Amieva *et al.* (2016) won the paper of the year 2016 title. The commentary (Huntley and Howard, 2016) summarizes in an excellent way the importance of the Amieva *et al.* paper and the *International Psychogeriatrics* team congratulates the winners, but also all other POM authors. *International Psychogeriatrics* is honored to be able to publish such excellent manuscripts.

At the end of this brief editorial, I would like to take the opportunity to thank the International Psychogeriatric Association (IPA) for having given me the opportunity to serve as Editor-in-Chief of *International Psychogeriatrics* for almost seven years. I enjoyed my tenure as editor (January 2011–September 2017) tremendously and am grateful for this privilege. On the 1st October 2017 Dr Dilip Jeste will take over as the new Editor-in-Chief and I congratulate him on this well-deserved appointment. I am sure *International Psychogeriatrics* will be in good hands under his leadership.

Looking after a scientific journal such as *International Psychogeriatrics* is a team effort and I have to thank many people: first of all Dr David Ames, the immediate past editor and book review editor. Without David’s significant experience, support and unwavering commitment to *International Psychogeriatrics*, I could not have performed my tasks as editor as effectively. I am

also very grateful to the Deputy Editors who served under my tenure: Dr John O'Brien, Dr Christina Bryant, Dr Kostas Lyketsos, Dr Nancy Pachana, Dr Craig Ritchie, and Dr Guk-Hee Suh. They all gave their experience and time to create an international, successful, and well-balanced editorial team. David, the Deputy Editors and I could not have performed our tasks for *International Psychogeriatrics* without the excellent work and support of our editorial assistant, Ms Joan Mould. Finally, I also would like to thank the staff of our publisher, Cambridge University Press, our 40 associate editors, reviewers and statistical reviewers, authors, as well as all readers of *International Psychogeriatrics*. I am sure, we all will be able to enjoy the ongoing successful journey of *International Psychogeriatrics* under Dilip Jeste's experienced editorship.

Conflict of interest

Nicola T. Lautenschlager was at the time of submission of this editorial Editor-in-Chief of *International Psychogeriatrics*. Therefore, this editorial was reviewed by another member of the editorial team.

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References

- Amieva, H. et al.** (2016). Group and individual cognitive therapies in Alzheimer's disease: the ETNA3 randomized trial. *International Psychogeriatrics*, 28, 707–717. doi:[10.1017/S1041610215001830](https://doi.org/10.1017/S1041610215001830)
- Araújo, L. et al.** (2016). Successful aging at 100 years: the relevance of subjectivity and psychological resources. *International Psychogeriatrics*, 28, 179–188. doi:[10.1017/S1041610215001167](https://doi.org/10.1017/S1041610215001167)
- Bird, M. et al.** (2016). Do interventions with staff in long-term residential facilities improve quality of care or quality for life people with dementia? A systematic review of the evidence. *International Psychogeriatrics*, 28, 1937–1963. doi:[10.1017/S1041610216001083](https://doi.org/10.1017/S1041610216001083)
- Booker, A. et al.** (2016). Risk factors for dementia diagnosis in German primary care practices. *International Psychogeriatrics*, 28, 1059–1065. doi:[10.1017/S1041610215002082](https://doi.org/10.1017/S1041610215002082)
- Burke, S. et al.** (2016). Associations between depression, sleep disturbance, and apolipoprotein E in the development of Alzheimer's disease: dementia. *International Psychogeriatrics*, 28, 1409–1424. doi:[10.1017/S1041610216000405](https://doi.org/10.1017/S1041610216000405)
- Cooper, C. et al.** (2016). Effectiveness of START psychological intervention in reducing abuse by dementia family carers: randomized controlled trial. *International Psychogeriatrics*, 28, 881–887. doi:[10.1017/S1041610215002033](https://doi.org/10.1017/S1041610215002033)
- Feast, A. et al.** (2016). A systematic review of the relationship between behavioral and psychological symptoms (BPSD) and caregiver well-being. *International Psychogeriatrics*, 28, 1761–1774. doi:[10.1017/S1041610216000922](https://doi.org/10.1017/S1041610216000922)
- Huntley, J. and Howard, R.** (2016). The importance of high quality trials of cognitive interventions in Alzheimer's disease. *International Psychogeriatrics*, 28, 705–706. doi:[10.1017/S1041610216000090](https://doi.org/10.1017/S1041610216000090)
- Michalowsky, B. et al.** (2016). Healthcare resource utilization and cost in dementia: are there differences between patients screened positive for dementia with and those without a formal diagnosis of dementia in primary care in Germany?. *International Psychogeriatrics*, 28, 359–369. doi:[10.1017/S1041610215001453](https://doi.org/10.1017/S1041610215001453)
- Pachana, N. A. et al.** (2016). Moderating effects of social engagement on driving cessation in older women. *International Psychogeriatrics*, 28, 1237–1244. doi:[10.1017/S1041610216000211](https://doi.org/10.1017/S1041610216000211)
- Parker, G. et al.** (2016). Mental health implications for older adults after natural disasters – a systematic review and meta-analysis. *International Psychogeriatrics*, 28, 11–20. doi:[10.1017/S1041610215001210](https://doi.org/10.1017/S1041610215001210)
- Van der Spek, K. et al.** (2016). Only 10% of the psychotropic drug use for neuropsychiatric symptoms in patients with dementia is fully appropriate. The PROPER I-study. *International Psychogeriatrics*, 28, 1589–1595. doi:[10.1017/S104161021600082X](https://doi.org/10.1017/S104161021600082X)
- Watson, R. et al.** (2016). Subcortical volume changes in dementia with Lewy bodies and Alzheimer's disease. A comparison with healthy aging. *International Psychogeriatrics*, 28, 529–536. doi:[10.1017/S104161021500](https://doi.org/10.1017/S104161021500)