

# EARLY INTERVENTION IN PSYCHIATRY



**of nearly everything  
for better mental health**

EDITED BY  
**PETER BYRNE  
ALAN ROSEN**

**WILEY** Blackwell



# **Early Intervention in Psychiatry**

**EI of nearly everything for better  
mental health**

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## **Dedication**

*This book is dedicated to one of our Early Intervention of Nearly Everything book co-authors, Professor Helen Lester, who died on this journey at the height of her academic and practical achievements, many of them concerning early intervention in primary care settings. She left a young family behind her. We also pay tribute to all the contributing authors in this book, from whom we have learned so much of value relevant to early prevention and intervention in a wider world. We acknowledge too all the people with lived experience of mental illnesses and their families, and the many dedicated service providers and researchers from whom we have learned about the immense value of earlier intervention approaches to many mental health conditions. Finally, we sincerely thank our families for their unflinching support for this, at least initially, quixotic dash into uncharted territory, and forbearance in living with our cognitive absences from them at times, due to our intermittent preoccupation with this most absorbing project.*

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## Foreword

Prevention of mental illness can take many forms and should be at the heart of mental health services. Traditionally, prevention has been classified into primary, secondary and tertiary. Virtually all psychiatric clinical practice is about secondary and tertiary prevention by treating the symptoms when they have developed and require intervention. In many cases, the development of these symptoms and the accompanying distress will determine where help is sought from and who is approached for intervention. The recognition of early distress has to be achieved carefully, as there is a serious danger that normal responses to stress or distress themselves may be pathologised and medicalised.

Early intervention can be seen at multiple levels – as an intervention at an appropriate stage before symptoms become resistant to intervention or as early recognition of the need to intervene. There are clearly ethical dilemmas which need to be resolved. Primary prevention is not only about mental health promotion and reduction in precipitating factors, but also about improving resilience. Early intervention is about treating people who are at risk of developing disorders as well as intervening at an early stage to improve the possibility of recovery. Clinicians as well as stakeholders need to be aware of the possibilities that early intervention in many conditions may help. We know that children with conduct disorders are more likely to develop personality disorders when they grow up. This development if averted may contribute to huge savings in the long run. One of the major challenges is for health to work with education, the criminal justice system and other departments to achieve this reduction. Another major