

AD IS A PSYCHIATRIC NOT A NEUROLOGICAL DISORDER

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Historically, the classical features of Alzheimer Disease (AD) were described by a doctor working as a clinical psychiatrist and scientist in the laboratory of a psychiatric hospital. Additionally, AD patients usually exhibit typical psychiatric problems such as cognitive deficits and sometimes severe behavioural changes as well as disturbed executive function. Further, consensus-based international classification systems such as ICD and DSM subsume AD among psychiatric disorders.

In summary, there are historical, medical, consensual and scientific arguments supporting the notion that AD is a psychiatric and not a neurological disorder.

However, the dichotomy between psychiatry and neurology does not seem to be very helpful. AD patients exhibit psychiatric as well as neurological problems and would benefit best from a holistic approach.