

How were the British Association for Psychopharmacology Guidelines created?

Jonathan Rogers:

A few years ago, I was looking for the evidence based on catatonia, and it occurred to me, “Why don’t we have guidelines for treating catatonia in the UK?” We’ve got guidelines for so many other conditions. And so I got in touch with the British Association of Psychopharmacology and said, “Would you consider making a guideline on catatonia?” And they said, “Yeah, great idea. How do you feel about doing it?” So that’s what started a year or two process of assembling some of the world’s experts, and we’re really keen not just to have UK experts, but to draw on the range of expertise around the world. I think we had three or four continents represented. And looking both for catatonia specialists, but also we felt we didn’t want the guidelines just to be directed at specialist centers and people with all the resources that they’d want at hand. We involved general psychiatrists. We involved neurologists, we involved a perinatal psychiatrist to advise on the implications for women who are pregnant and breastfeeding. And we involved an expert on autism to really try to approach this problem from many different angles.