

### **From the Editors**

Dear Readers,

A year of the pandemic has passed. We go through a borderline experience that requires a reevaluation of our lives, maximum mobilization. The world will never be the same as before, we will not be the same. Psychiatrists have and will have their hands full. People who have done well so far, had no emotional problems, and now report anxiety symptoms, mood disorders, insomnia, and somatization symptoms, need our help [1]. There are people who have been overwhelmed by the surrounding reality dominated by omnipresent death, helplessness and terror. Older people present with a dramatic intensification of dementia [2]. There are convalescents who, contrary to the name, are far from being healthy because every third struggle with neuropsychiatric symptoms. The pandemic stopped plans and dreams, showed the fragility of existence, mocked our complacency and sense of omnipotence. In many places, we had to completely reorganize our work, becoming “COVID wards” [3].

We do not know what the “landscape after the battle” will be, but we have no doubts how much we are and will be needed by our patients. We can expect, among others, an epidemic of depressive symptoms. The current issue of *Psychiatria Polska* opens with the guidelines of the Polish Psychiatric Association and the National Consultant for Adult Psychiatry concerning pharmacological treatment of depression. We believe that this is the best time to present such recommendations and that the guidelines will be extremely helpful in everyday practice.

Another epidemic is and will be obesity [4]. It is one of the leading social problems, but it particularly affects patients treated with atypical antipsychotic drugs. This carries a serious risk of cardiovascular diseases [5]. It was pointed out by the experts of the Polish Psychiatric Association when preparing recommendations on how to reduce metabolic risk in patients with schizophrenia [6]. Apart from pharmacological strategies, it is important to pay attention to the quality of nutrition of patients [7, 8] and to implement psychoeducation, as discussed by Pudło et al.

Nutritional problems are “the bread and butter of psychiatry.” In the face of another epidemic – eating disorders – there are still too few specialized centers implementing therapeutic programs in Poland. Apart from anorexia and bulimia, we see new forms of eating disorders, such as orthorexia – described in previous issues of *Psychiatria Polska* [9, 10]. In the current issue, we return to a discussion that can be summed up by a rhetorical question: Can healthy eating be unhealthy?

Current knowledge on the etiopathogenesis of schizophrenia was presented by Professor Janusz Rybakowski. It is a continuation of his series of articles summarizing half a century of participant observation in psychiatry [11–13].

Other interesting papers published in the current issue of our journal concern the relationship between mental disorders and cardiovascular diseases, including arterial hypertension. The influence of mental state and personality traits on the risk of hypertensive complications has already been discussed several times in our journal [14–16]. In the issue of *Psychiatria Polska* which the Reader holds in his hands, a lot of space is devoted to interdisciplinary problems, which confirms the obvious thesis that modern psychiatry

cannot exist in isolation from somatic medicine. Presenting you this interesting issue of *Psychiatria Polska*, we wish you health and perseverance!

**Dominika Dudek – Editor-in-Chief,  
Jerzy A. Sobański,  
Katarzyna Klasa**

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