



BRAIN INJURY ASSOCIATION OF NEW JERSEY

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No Brain Injury is
Too Mild to Ignore,
or Too Severe to
Lose Hope

Frequently Asked Questions about Neuropsychiatrists

By Emmanuel Hriso, M.D.

What is a neuropsychiatrist / behavioral neurologist?

A neuropsychiatrist is a psychiatrist specializing in the diagnosis and treatment of disorders affecting the brain which cause behavioral, psychological and psychiatric symptoms. For example, a temporal lobe epileptic patient who present with psychosis, a patient with dementia who has agitation and paranoid thoughts, someone with Parkinson's disease who has depression, a TBI patient with irritability, poor concentration and impulsive behavior etc. A behavioral neurologist is a neurologist who also specializes in the same areas, but also tends to study the aphasia, or disorders of language, which can occur for instance after strokes. The neuropsychiatrist generally completes a 4 year residency in psychiatry and then a one year fellowship in neuropsychiatry. A behavioral neurologist completes a 3 year neurology residency and then a one year fellowship in behavioral neurology. Sometimes, there are combined residency programs which trains physicians to be both psychiatrists and neurologists, with knowledge in neuropsychiatry and behavioral neurology.

How is a neuropsychiatrist different from a psychiatrist?

Generally, a neuropsychiatrist is a psychiatrist who has training in neuropsychiatry.

What neuropsychiatric conditions can a person with brain injury have?

Patients with brain injuries can have numerous neuropsychiatric symptoms, such as mood problems (depression, irritability, sometimes manic, impulsive, disinhibited states), poor concentration and focus, impaired short term memory, impulsive behaviors, post traumatic symptoms with hypervigilance and hyperreactivity, nightmares, anxiety, insomnia, paranoia, abnormal behavior in social situations, and difficulties with interpersonal and professional relationships as a result.

How can a neuropsychiatrist help people with brain injury?

A neuropsychiatrist can offer medications to help with the symptoms described above, as well as individual and family counseling to help patients and their families cope with brain injury.

What should I know about psychopharmaceutical medications for persons with brain injury?

There are numerous medications which can be of benefit, depending on the symptoms. Antidepressant medications may relieve symptoms of depression and anxiety, psychostimulants and medications which work on the dopamine system may relieve apathy, lack of motivation and problems



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with concentration and focus, cholinergic medications can help with memory, mood stabilizers and antipsychotic agents can be beneficial in patients who have irritability, paranoia and mood swings. Other medication can help with sleep problems. Some medications can also aggravate the symptoms or cause side effects and drug to drug interactions.

What should I know about other therapies for persons with brain injury?

Other therapies include individual psychotherapy and counseling, family and marital therapies, group therapy, cognitive behavioral therapy, cognitive rehabilitation, and vocational rehabilitation.

Can a neuropsychiatrist provide referrals for outpatient or inpatient rehabilitation programs?

Yes, just like those programs could also refer to a neuropsychiatrist.

What kind of funding sources do neuropsychiatrists accept?

Depends on the individual. Some Doctors are on the panel or participate with numerous insurance companies, some do not.

Will I need a referral to see a neuropsychiatrist?

Generally not but some situations may require it.

How can I find a neuropsychiatrist?

There are many ways, through the American Psychiatric Association, through programs and centers which specialize in the diagnosis and treatment of brain injuries and other neurological disorders, through case managers, insurance companies, and also through word of mouth and preestablished reputation, interest and specialty in the field.

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