Neuropsychiatry is a field of medicine that deals with psychiatric illnesses caused by nervous system disorders. It predated the modern fields of psychiatry and neurology, which shared similar training. However, psychiatry and neurology have since separated and are usually practised separately. Despite this, neuropsychiatry is a rapidly developing subspecialty of psychiatry. Psychiatrists have asserts illnesses of the mind, while neurologists have concentrated critically on organic nervous system pathology, especially of the brain. Many of the variations between the two specialties have been defined by this antipodal distinction between brain and mind as two independent entities. It is also argued that a greater understanding of aetiology would lead to better remediation and recovery strategies by allowing us to interfere at various levels in the causal process.

Non-organic treatments, such as cognitive behavioural therapy (CBT), can be more effective alone or in combination with medications in mitigating disorders. In 1996, the International Neuropsychiatric Association was established. The International Neuropsychiatric Association or INA conducts biennial congresses in countries around the world and collaborates with regional neuropsychiatric associations to support regional neuropsychiatric conferences and encourage neuropsychiatry development in the countries/regions where they are held.

Cerebral disorders commonly cause psychiatric symptoms. These developments have the potential to help with diagnosis, treatment selection, and growth. Neuropsychiatry is the subspecialty of psychiatry that deals with disorders at the intersection of neurology and psychiatry. Neuropsychiatric disorders are complex and incompletely understood. Neuroscience research is beginning to elucidate the biological underpinnings of many of these disorders. These advances have the potential to improve diagnosis, inform treatment selection, and facilitate development of new and better interventions. Psychosis (delusions and hallucinations) as well as affective and behavioural changes such as depressed mood, anxiety, irritability/lability, apathy, euphoria, disinhibition, agitation/aggression, aberrant motor behaviours, sleep disruption, and eating disorders are all neuropsychiatric manifestations in Alzheimer’s disease.