

Valedictory

All that's bright must fade,
The brightest still the fleetest;
All that's sweet was made
But to be lost when sweetest.

Thomas Moore

I sometimes hold it half a sin
To put in words the grief I feel;
For words, like Nature, half reveal
And half conceal the Soul within.

*Alfred, Lord Tennyson,
In Memoriam*

Dear Readers,

I have sad news to share with you. This is the last issue of *CURRENT PSYCHIATRY*.

During my travels around the country over the past 2 decades, countless psychiatrists have told me that *CURRENT PSYCHIATRY* is their favorite journal and they greatly appreciate it due to the practical, useful, and pithy clinical updates it provides them as busy clinicians.

CURRENT PSYCHIATRY was born on January 1, 2002, and will be 21 years old at its premature demise on December 31, 2023 (This reminds me of the Billy Joel song "Only the Good Die Young"). The first Editor-in-Chief was Randolph Hillard, MD, who at the time was the psychiatry chair at the University of Cincinnati. I succeeded him as Editor-in-Chief in 2006 and will have served in that role for 17 years when *CURRENT PSYCHIATRY* is sunset. I have established 2 other research journals, *Schizophrenia Research* and *Biomarkers in Neuropsychiatry*, both of which are

thriving. However, editing *CURRENT PSYCHIATRY* has been one of the most gratifying roles I have had in my career because *CURRENT PSYCHIATRY* promotes sound, evidence-based clinical practice to its 45,000 psychiatric clinician readers, who provide care for millions of psychiatric patients of all ages and DSM-5-TR diagnostic categories every day.

As the saying goes: All good things eventually come to an end. I am so grateful to have had the opportunity to collaborate with a wonderful, highly competent editorial staff, as well as with outstanding colleagues who served on the editorial board all those years. A special shout-out to Jeff Bauer, the publishing staff editor, with whom I worked so closely. I very much appreciated all the authors and peer reviewers who contributed timely clinical articles month after month and made *CURRENT PSYCHIATRY* such a valuable, evidence-based educational medium.

This has been a unique journey for all of us who strived to transform *CURRENT PSYCHIATRY* into a prominent, must-read clinical journal. This valedictory is both a fond farewell and a warm appreciation to you, our loyal readers. I hope that in the future we will reconnect and interact again in another meaningful way, advocating for the health and welfare of our psychiatric patients.



Henry A. Nasrallah, MD, DLFAPA
Editor-in-Chief



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