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In this issue

This issue contains an editorial on genetic vulnerability to depression, a review on anxiety disorders in childhood, and an original report on gene × environment interaction in depression. Other sets of papers examine various aspects of psychosis, stalking and obsessive–compulsive disorder. Five final papers examine other topics.

Vulnerability to depression

In their editorial, El Hage *et al.* (pp. 1407–411) review evidence of associations between serotonergic, hypothalamic–pituitary–adrenal (HPA) and limbic systems in the pathogenesis of depression. From this, they propose a model in which these systems confer vulnerability which, in interaction with stressful life events, increases risk of depression.

Anxiety disorders in children

Murray *et al.* (pp. 1413–1423) present findings from an integrative review of anxiety in childhood, covering both genetic and environmental factors. The authors report that evidence from various studies indicates that risk of disorder is increased in children of adults with anxiety. In addition, a number of environmental exposures appear important, including life events and exposure to negative information or modelling. The authors further note that some parenting behaviours that are associated with child anxiety (such as over-protectiveness) may be elicited by child characteristics, indicating the impact of bidirectional processes.

Gene × environment and depression

Aguilera *et al.* (pp. 1425–1432) investigated interactions between the 5-HTT gene, the BDNF gene, and childhood adversity in the occurrence of depressive symptoms in adulthood in a sample of 534 healthy individuals. The authors found that various forms of childhood adversity, including sexual and emotional abuse, were associated with depressive symptoms. In addition, there was evidence that childhood sexual abuse (but not other forms of adversity) had a greater impact on later depressive symptoms in those with the Met allele of the BDNF gene (*v.* the Val/Val group) and in carriers of the short allele of the 5-HTT gene.

Psychosis

Three further papers examine aspects of psychosis. In the first, Parellada *et al.* (pp. 1433–1445) examined the correlates of insight in a sample of 110 adolescents with a first episode of psychosis, who were assessed at baseline, 6 months and 12 months. The authors found that: (1) insight improved over time as clinical state improved; (2) poor insight at baseline was associated with poor function at each follow-up; and (3) patients with schizophrenia had poorer insight at each follow-up, compared with those with bipolar disorder. The authors conclude that poor insight is associated with symptom severity and function in the early stages, and may have some trait value for schizophrenia.

White *et al.* (pp. 1447–1456) investigated the predictors of outcome of first-episode psychosis in a sample of 109 cases followed-up at 10 years post-first admission. The authors found that worse outcomes were associated with poor premorbid functioning, baseline negative symptoms and a longer duration of untreated psychosis. These variables, along with neurological soft signs, were particularly associated with poor outcomes in those with schizophrenia or schizoaffective disorder.

Zammit *et al.* (pp. 1457–1467) examined associations between psychosis-like experiences and adverse events during early development (e.g. maternal infection, maternal diabetes, 5-min Apgar score and gestational age) in a sample ($n = 6356$) of 12-year-olds drawn from a UK birth cohort. The authors found that the presence of definite psychotic symptoms was associated with maternal infection during pregnancy (OR 1.44), maternal diabetes (OR 3.43), and 5-min Apgar score (OR 1.30). No other markers were associated with psychosis-like experiences.

Stalking

Two further papers examine aspects of stalking. In the first, McEwan *et al.* (pp. 1469–1478) used a pseudo-prospective design to examine risk factors for violence in a sample of 211 stalkers referred to a community mental health team. The authors found that, among rejected ex-intimate stalkers, violence was associated with previous violence, making threats, and being employed. In stalkers with other motives, violence was associated with younger age, substance use and prior violence.

James *et al.* (pp. 1479–1490) investigated the role of motivation and mental illness in stalking and harassment of the UK royal family using data on 275 individuals, randomly selected from police files over a 15-year period, who made inappropriate attempts to communicate with the royal family. Over 80% of the sample were suffering from a serious mental illness. Motivations ranged from delusions of royal identity to 'intimacy seekers'. The authors conclude that the high prevalence of mental illness indicates the relevance of psychiatric intervention.

Obsessive–compulsive disorder

In the first of three papers on aspects of obsessive–compulsive disorder (OCD), Nestadt *et al.* (pp. 1491–1501) investigated the relationship between OCD and co-morbid conditions to identify subtypes in a sample of 706 individuals with OCD. Using multi-level latent class analysis, the authors identified three subtypes in which: (1) major depressive disorder was the most frequent co-morbid disorder; (2) tics were prominent and affective syndromes rare; and (3) panic disorder and affective symptoms were common. The authors conclude that these classes, if replicated, may have implications for research and clinical practice.

Remijnse *et al.* (pp. 1503–1518) note that, despite frequent co-morbidity and a common disturbance of reversal learning, neurobiological distinctions between OCD and major depressive disorder (MDD) are lacking. To investigate this, the authors conducted a fMRI study, with reversal learning task, in a sample of 20 subjects with OCD but not MDD, 20 with OCD and MDD and 27 controls. They found evidence of frontal-striatal and (para)limbic functional abnormalities in MDD. In addition, there was evidence of differences between OCD and MDD in neural patterns in frontal-striatal and paralimbic structures.

Nielen *et al.* (pp. 1519–1526) investigated impairments in associative learning based on external feedback in a sample of 29 OCD patients and 28 healthy volunteers. The authors found that, compared with controls, OCD patients were impaired during initial, external feedback-driven learning tasks, but not during later learning stages. The authors further found that the emotional salience of feedback (i.e. rewarding or punishing) modulated learning during initial stages in both patients and controls. In later stages, patient learning was near normal with rewarding feedback but remained impaired with punishing feedback. The authors conclude that OCD patients have a fundamental impairment in updating behaviour based on the external outcome of their actions.

Other topics

In the first of five final papers on other topics, O'Connor & Parslow (pp. 1527–1531) examined differences in response to simple (Kessler Psychological Distress Scale; K-10) and complex (Composite International Diagnostic Interview; CIDI) structured interviews in a sample of 10641 adults drawn from an Australian national mental health survey. The authors found that inconsistencies between the simple and complex interviews on questions about anxiety and depression rose with age. The authors suggest that this may reflect difficulties in older adults in attending to lengthy and complex questionnaires, the consequence being denial of symptoms enquired about in this way.

Myin-Germeys *et al.* (pp. 1533–1547) describe momentary assessment technologies that sample experiences of psychopathology and stress in the flow of everyday life, and provide a comprehensive review of research using these methods. The authors note that research findings to date illustrate the value of such methods in the study of phenomenology, aetiology (including psychological and biological mechanisms), treatment and gene–environment interactions. In addition, the evidence from such studies shows that psychopathology fluctuates rapidly over time in response to daily stressors.

Plener *et al.* (pp. 1549–1558) examined the prevalence of non-suicidal self-injury (NSSI) and suicide attempts in a sample of 665 adolescents recruited from schools in Germany. The use of standardized assessments of NSSI and suicide attempts further allowed the authors to compare this sample with an existing US sample. The authors found that, in the German adolescents, around 25% endorsed one act of NSSI, 10% reported four or more acts of self-harm, and 7% had a history of suicide attempts. There were no statistically significant differences between the German and US samples on any of the measures of self-injury or suicide attempts.

Mosconi *et al.* (pp. 1559–1566) investigated inhibitory control in a sample of 18 subjects with autism spectrum disorders (ASD) and 15 matched controls using an antisaccade task and a visually guided saccade control task. The authors found that subjects with ASD showed increased rates of prosaccade errors (failures to inhibit prepotent responses) on the antisaccade task. Prosaccade errors were associated with the level of higher-order, but not sensorimotor repetitive behaviours in ASD. The authors conclude that neurocognitive disturbances in voluntary behavioural control suggest that alterations in frontostriatal systems contribute to higher-order repetitive behaviours in ASD.

In the final paper, Dickson *et al.* (pp. 1567–1576) explored attentional difficulties in a sample of 24 women with anorexia nervosa (AN) (restricting subtype) and 24 healthy comparison women using subliminal and supraliminal exposure to visual stimuli (food, neutral, aversive) while performing working-memory tasks. The authors found that, compared with controls, subjects with AN made fewer errors in the subliminal and more errors in the supraliminal conditions, irrespective of stimuli. Number of errors was associated with duration of AN. The authors conclude that distractibility is a feature of AN that could be addressed by psychological interventions.

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