Psychological Medicine, 2006, **36**, 733–734. © 2006 Cambridge University Press
doi:10.1017/S0033291706007847 Printed in the United Kingdom

IN THIS ISSUE

This issue contains one review article on multi-symptom conditions in Gulf War veterans with sets of papers examining various aspects of psychosis, depression, pervasive developmental disorders, and four individual articles examining a variety of topics.

Multi-symptom conditions in Gulf War veterans

In this issue's review article, Thomas *et al*. (pp. 735–747) review the literature to identify and summarize findings from studies that have assessed multi-symptom conditions in Gulf War veterans and in unexposed comparison groups. They found that Gulf deployment was most strongly associated with chronic fatigue syndrome and this was found in large-sample studies of high methodologic quality. They conclude that Gulf deployment is associated with higher reporting of multi-symptom conditions.

Psychosis

This issue contains three articles on various aspects of psychosis. In the first article, Fowler *et al*. (pp. 749–759) analyzed the psychometric properties of their Brief Core Schema Scale (BCSS) designed to assess positive and negative evaluations of others. Their study examined clinical and non-clinical samples. They found that extreme negative evaluations of self and others are characteristic of people with chronic psychosis. They suggest that the BCSS may provide a more useful measure of schemata about self and others than traditional measures of self-esteem.

In the second article, Watson *et al*. (pp. 761–770) report on their study of 100 patients with a recent relapse of non-affective psychosis. They examined insight, self-reported illness perceptions, medication adherence, depression, self-esteem and anxiety. They found that negative illness perceptions in psychosis are related to depression, anxiety and self-esteem. Interventions that can foster appraisals of recovery may improve the level of well-being in psychotic individuals.

In the last article on this topic, Janssen *et al*. (pp. 771–778) investigated attribution style and psychosis. Specifically they examined: whether patients with a lifetime history of non-affective psychosis show an external-personal attribution bias for hypothetical negative events, if this style can be detected in their first-degree relatives and subjects with sub-clinical psychotic experiences, and finally if this style is related to the presence of positive psychotic symptoms. Their results show that patients with psychotic disorder have a tendency to attribute hypothetical negative events to an external agent. They found this is associated with the presence of positive psychotic symptoms, particularly delusions. No such trend was seen in their relatives, suggesting that deviant attribution style is not a marker of vulnerability to psychosis.

Depression

Five articles in this issue examine various aspects of depression. Leskelä *et al*. (pp. 779–788) examine the influence of adverse life events and social support on the outcome of major depressive disorder. They found that adverse life events and poor perceived social support influenced the outcome of depression, especially medium-term outcome, for all psychiatric patients with major depressive disorder. These factors had the strongest predictive value in patients who were in full remission.

Hettema and colleagues (pp. 789–795) report on the impact of generalized anxiety disorder and stressful life events on risk for major depressive episodes. They examined the joint effects of prior history of generalized anxiety disorder and recent stressful life events on risk for major depressive episodes in male and female twins. They found the effects of prior generalized anxiety disorder and stressful life events jointly increased the risk of depression in both sexes, but disproportionately so in males.

In the third paper, Elovainio *et al*. (pp. 797–805) report that depressive symptoms in a population-based sample of 1201 young healthy Finnish adults are associated with elevated levels of C-reactive protein. This association could at least partly be mediated by levels of obesity and triglycerides. They suggest that their study contributes to the growing body of evidence that depression may exert adverse effects on physical health.

Joyce *et al*. (pp. 807–813) examine the 9-repeat allele of dopamine transporter polymorphism as a risk factor for borderline personality disorder in depressed patients. They specifically examine the differences in

genetic and developmental risk factors between depressed patients with or without co-morbid borderline personality disorder. They replicated an association between this allele and borderline personality disorder in two independently recruited depressed out-patient samples.

In the last article related to depression, Chen *et al*. (pp. 815–825) report on their case-control psychological autopsy study on suicide in Hong Kong. They compared 150 suicide deceased with 150 living controls matched by age and gender. Semi-structured interviews were conducted with the next-of-kin of the subjects. They found that both psychosocial and clinical factors play an important role in suicides in Hong Kong. Specifically they found six factors that significantly and independently contributed to suicide: unemployment, indebtedness, being single, social support, psychiatric illness, and history of past attempts. They suggest that socio-economic adversities was a significant factor in the increasing suicide rate in Hong Kong.

Pervasive development disorders

In the first article in this grouping, Palmen *et al*. (pp. 827–834) explore the medial temporal lobe structures that may be preferentially involved in autism. They specifically investigate the amygdala and hippocampal volumes in 42 medication-naive subjects with high-functioning autism by obtaining whole-brain magnetic resonance imaging scans and comparing them with scans from 42 closely matched healthy controls. The amygdala did not differ significantly between patients and controls; however, they found that a significant increase in hippocampal volume was proportional to an increase in overall brain volume. They suggest that their results argue against preferential involvement of medial temporal lobe structure in autism.

In the second related article, Ashwin *et al*. (pp. 835–843) investigated the attention biases of 17 adults with and 17 adults without Asperger syndrome. This was explored using the emotion Stroop tasks to examine the color-naming latencies in these individuals by asking them to name colors of pictures containing angry facial expressions, neutral expressions or non-social objects. Their group with Asperger syndrome showed Stroop interference effects to all facial stimuli regardless of the facial expression or sex of the subject, suggesting that faces may cause a disproportionate interference in individuals with this syndrome.

Other topics

This issue concludes with four papers examining a variety of topics. Beblo *et al*. (pp. 845–856) report on their investigation of the neural correlates of the recall of unresolved life events in 20 patients with borderline personality disorder and 21 healthy controls using functional magnetic resonance imaging. They conclude that patients with borderline personality disorder activate both the amygdala and prefrontal areas in an effortful but ultimately unsuccessful attempt to control intensive emotions during the recall of unresolved life events.

The article by Huntjens *et al*. (pp. 857–863) explores the diagnostic status and scientific validity of dissociative identity disorder. They specifically aimed at the detection of simulation of inter-identity amnesia in a sample of 22 patients diagnosed with dissociative identity disorder together with a matched control sample. They conclude that dissociative identity disorder patients were not found to have an actual deficit in memory retrieval, in contrast to their subjective reports. Dissociative identity disorder may, they suggest, more accurately be considered a disorder with meta-memory problems, where individuals hold incorrect beliefs about their own memory functioning.

The third article by Goldstein *et al*. (pp. 865–875) reports their prospective study examining changes in and predictors of psychological distress in 50 spouse caregivers for people with amyotrophic lateral sclerosis (ALS). They found that over time, the carers' psychological distress increased significantly. Although the impact of their partners ALS and the degree to which they displayed emotional liability were important, they conclude that psychosocial factors appear to be of particular significance in determining short- and longer-term psychological well-being in caregivers of people with ALS. This may help clinicians to predict which carers are likely to experience psychological distress as part of their caring role.

The last article in this issue, by Rief *et al*. (pp. 877–885), reports on a German population-based survey of 2552 individuals on the prevalence rates and clinical features of body dysmorphic disorder. They found the prevalence of body dysmorphic disorder was 1·7% and that these individuals reported higher rates of suicidal ideation and suicide attempts than individuals who did not meet criteria for this diagnosis. They conclude that their study shows that self-reported body dysmorphic disorder is surprisingly common and associated with significant morbidity.