

Affective disorders: the role of the duration of untreated illness, suicidality and pharmacogenetics

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Dear colleagues,

This issue of the European Archives of Psychiatry and Clinical Neurosciences is mainly dealing with topics around affective disorders.

A large-scale 15 year-follow-up of 323 first hospitalized patients documents the substantial differences in outcome between schizophrenia and affective disorders [1]. This difference was most pronounced in the Strauss-Carpenter-Scale, male sex and several psychopathological syndromes. During a large-scale follow-up of 320 patients with bipolar disorder [2] duration of untreated illness (DUI) was correlated with worse outcome, mainly increased suicidality and suicide attempts. In this respect, another interesting paper [3] supports the association of seasonality of suicide attempts and gender. Interestingly female gender is associated with a reduction of suicide attempts in spring by 10%.

In a large-scale four-level community-based intervention program conducted in Nürnberg (Nürnberg alliance against depression (NAD)), it was shown that the number of suicide acts (main outcome completed and attempted suicide) dropped significantly (−21.7%) comparing the baseline year and the control region. Interestingly

sustainable effects on suicidality could be maintained one year after the main intervention [4].

One of the hot topics of treatment prediction is pharmacogenetics. In a review article on the pharmacogenetics of antidepressant treatment evaluating the current literature [5], it was found that there is currently a focus on new candidate single nucleotide polymorphisms—particularly in the 5HT2A-receptor gene and the gene coding for the cochaperone FKBP5. However, the article concluded that the “pharmacogenetics of therapeutic effects and off side effects of antidepressants are unable to guide decisions on the selection of the most beneficial drug for an individual patient”.

Finally two articles on interesting innovative neurobiological aspects of psychiatric disorders should be mentioned. The article by Koch et al. [6] found increased fractional anisotropy (FA) in cortico pontine-cerebellar circuits in schizophrenia compared to control subjects suggesting some neuroplastic changes in these networks. This finding is in contrast to a solid literature suggesting reduced fractional anisotropy in extended cortical and subcortical white matter fractions in schizophrenia. The second article points in a similar direction [7] combining ERP and fMRI in subjects with ADHD compared to controls using a go/no go-task. Reduced medial/lateral frontal activity was demonstrated supporting the involvement of this neural network in different psychiatric disorders including ADHD.

We hope you will enjoy reading the articles of the August issue during this hot summer.

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