

HOW TO CITE THIS ARTICLE: Mukhopadhyay P, Bhattacharya L, Roy PK, Saheli Misra (Chatterjee). Responses to the comments on “Development of a battery to assess perceptual-motor, cognition, language, and scholastic skills among Bengali children with neurodevelopmental disorders”. *Indian J Psychol Med.* 2020;42(5):483–485.



Copyright © 2020 Indian Psychiatric Society - South Zonal Branch

Creative Commons Non Commercial CC BY-NC: This article is distributed under the terms of the Creative Commons Attribution- NonCommercial 4.0 License (<http://www.creativecommons.org/licenses/by-nc/4.0/>) which permits non-Commercial use, reproduction and distribution of the work without further permission provided the original work is attributed as specified on the SAGE and Open Access pages (<https://us.sagepub.com/en-us/nam/open-access-at-sage>).

ACCESS THIS ARTICLE ONLINE

Website: journals.sagepub.com/home/szj

DOI: 10.1177/0253717620946456

Comments on “Serum Lipids among Drug Naïve or Drug-Free Patients with Obsessive Compulsive Disorder and Their Association with Impulsivity”

Vats et al.¹ presented a cross-sectional, comparative study on serum lipids and obsessive compulsive disorder (OCD)-related impulsivity. It is a good attempt to search for a biomarker of impulsivity. However, the study is methodologically flawed in different dimensions that should be discussed before taking any clinical conclusion from it.

Though the sample size was small ($N = 40$), it is acceptable in a case-control design. The sample was not explored for the metabolic profile, lifestyle factors, pregnancy, or post-pregnancy changes (which is relevant given the higher female to male ratio), neither did the study mention specifics on substance abuse. Does comorbid diagnosis according to *International Classification of Diseases, Tenth Revision* mean nicotine dependence too? That also should have been specifically mentioned, as having a metabolic syndrome and substance use can have a significant impact on the lipids fraction.² Moreover, persons with psychiatric illness have a higher prevalence of metabolic syndrome.³

Even though the study speaks about the OCD types, it did not mention OCD symptomatology. For example, a person with severe OCD-related slowness can have a significant sedentary lifestyle that results in dyslipidemia.⁴ Hypothetically,

an OCD patient can have binge-eating habits, leading to an increased level of lipids, especially triglycerides.⁵

The impulsivity construct was divided into high and low with an author-made analogy by using the median, although the scoring manual of the Barratt Impulsiveness Scale does not allow it. The authors could have checked the relationship with the use of Pearson or Mann-Whitney tests, without molding the nature of the scale.

The conclusion achieved was a negative correlation between high density cholesterol and impulsivity. There are a few studies that say low HDL can be present in the normal population as well.⁶ As the authors did not consider normal controls in correlating impulsivity, the HDL-related finding might be just a normal phenomenon.⁷ In the end, the authors did not explain any clinical significance of the study.

We feel that it is a welcome step, being the first study, but more studies with a stringent study design are needed in this area.

Declaration of Conflicting Interests

The authors declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

Soumitra Das¹, Barikar C Malathesh², Seshadri Sekhar Chatterjee³

¹North Western Mental Health, Melbourne, Victoria, Australia. ²Dept. of Psychiatry, NIMHANS, Bengaluru, Karnataka, India. ³Dept. of Psychiatry, Diamond Harbour Medical College and Hospital, West Bengal University of Health Sciences, Kolkata, West Bengal, India.

Address for correspondence:

Barikar C Malathesh, Dept. of Psychiatry, NIMHANS, Bengaluru, Karnataka, India.

E-mail: bc.malathesh@gmail.com

Submitted: 7 Jul. 2020

Accepted: 8 Jul. 2020

Published Online: 23 Aug. 2020

References

- Vats P, Das B, and Khanra S. Serum lipids among drug naïve or drug-free patients with obsessive compulsive disorder and their association with impulsivity: A comparative study. *Indian J Psychol Med* 2020; 42: 281–289.
- Attard R, Dingli P, Doggen CJ, et al. The impact of passive and active smoking on inflammation, lipid profile and the risk of myocardial infarction. *Open Heart* 2017 Aug 1; 4(2): e000620.
- Penninx BWJH and Lange SMM. Metabolic syndrome in psychiatric patients: Overview, mechanisms and implications. *Dialogues Clin Neurosci* 2018 Mar; 20(1): 63–73.
- Albert U, Aguglia A, Chiarle A, Bogetto F, and Maina G. Metabolic syndrome and obsessive-compulsive disorder: A naturalistic Italian study. *Gen Hosp Psychiatry* 2013 Mar 1; 35(2): 154–159.
- Rasmussen AS, Jørgensen CR, O'Connor M, et al. The structure of past and future events in borderline personality disorder, eating disorder, and obsessive-compulsive disorder. *Psychol Conscious: Theory Res Pract* 2017 Jun; 4(2): 190.
- Bartlett J, Predazzi IM, Williams SM, et al. Is isolated low high-density lipoprotein cholesterol a cardiovascular disease risk factor? New insights from the Framingham offspring study. *Circ Cardio Qual Outcomes* 2016 May; 9(3): 206–212.
- Tomson-Johanson K, Kaart T, Kiiwet RA, Veidebaum T, and Harro J. Low cholesterol levels in children predict impulsivity in young adulthood. *Acta Neuropsychiatrica* 2019 Dec 2; 32(4): 1–39.

HOW TO CITE THIS ARTICLE: Das S, Malathesh BC, Chatterjee SS. Comments on “Serum lipids among drug naïve or drug-free patients with obsessive compulsive disorder and their association with impulsivity”. *Indian J Psychol Med.* 2020;42(5):485–486.



Copyright © 2020 Indian Psychiatric Society - South Zonal Branch

Creative Commons Non Commercial CC BY-NC: This article is distributed under the terms of the Creative Commons Attribution- NonCommercial 4.0 License (<http://www.creativecommons.org/licenses/by-nc/4.0/>) which permits non-Commercial use, reproduction and distribution of the work without further permission provided the original work is attributed as specified on the SAGE and Open Access pages (<https://us.sagepub.com/en-us/nam/open-access-at-sage>).

ACCESS THIS ARTICLE ONLINE
Website: journals.sagepub.com/home/szj
DOI: 10.1177/0253717620945972

Responses to the Comments on “Serum Lipids Among Drug Naïve or Drug-Free Patients with Obsessive Compulsive Disorder and Their Association with Impulsivity: a Comparative Study”

We thank the authors of the comments¹ for the interest shown in our study and the remarks. As elaborated in the article,² our study had three specific aims, none of which was to “search for a biomarker of impulsivity” per se. Therefore, to consider that the study aimed to search for biomarkers of impulsivity would attract inappropriate and far-fetched attempts to extrapolate or generalize our findings, to find biomarkers of impulsivity. Neither did our article discuss about it anywhere in the manuscript. Had “searching for biomarkers” been an aim of our study, it would have been designed differently. Studying impulsivity among groups of patients with other psychiatric diagnoses including impulse control disorder, their first-degree relatives, and healthy controls (HC) would have been needed.

The authors rightly pointed out the absence of assessment of metabolic pro-

file in the study sample. We have mentioned this in the limitation of our study and recommended the same for improvement in future studies. We agree that incorporating other suggestions in future studies would enhance the generalizability of the findings.

Based on statistical analysis, our study found a negative correlation between serum HDL and all scores of impulsivity in the obsessive compulsive disorder group. Following the aims of the study, the HC group was assessed for serum lipids but was not assessed for impulsivity. Therefore, impulsivity and serum lipids were not correlated in the HC group. Examining the HC group both for serum lipid profile and impulsivity and correlating between them would have provided additional information related to biomarkers for impulsivity among patients with OCD.

We regret that the article missed mentioning the clinical significance of the findings. Our study adds to the existing literature on lipid abnormalities and their varying associations with impulsivity across psychiatric disorders. Regular assessment of deranged serum lipid profile among patients with OCD, both with and without impulsivity, is warranted, and management of the same would reduce the ill effects of dyslipidemia. Addressing limitations mentioned in our article² and incorporating comments from

the letter¹ in future studies would further enhance our collective understanding.

Declaration of Conflicting Interests

The authors declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

Purvi Vats¹, Basudeb Das¹, Sourav Khanra¹

¹Central Institute of Psychiatry, Ranchi, Jharkhand, India

Address for correspondence:

Sourav Khanra, Central Institute of Psychiatry, Ranchi, Jharkhand 834006, India. E-mail: psyksk.cip@gmail.com

Submitted: 25 Jun. 2020

Accepted: 5 Jul. 2020

Published Online: 31 Aug. 2020

References

1. Comments on “Serum lipids among drug naïve or drug-free patients with obsessive compulsive disorder and their association with impulsivity: A comparative study.” *Indian J Psychol Med* 2020; 42.
2. Vats P, Das B, and Khanra S. Serum lipids among drug naïve or drug-free patients with obsessive compulsive disorder and their association with impulsivity: A comparative study. *Indian J Psychol Med* 2020; 42.

HOW TO CITE THIS ARTICLE: Vats P, Das B, Khanra S. Responses to the comments on “Serum lipids among drug naïve or drug-free patients with obsessive compulsive disorder and their association with impulsivity: A comparative study”. *Indian J Psychol Med.* 2020;42(5):486.



Copyright © 2020 Indian Psychiatric Society - South Zonal Branch

Creative Commons Non Commercial CC BY-NC: This article is distributed under the terms of the Creative Commons Attribution- NonCommercial 4.0 License (<http://www.creativecommons.org/licenses/by-nc/4.0/>) which permits non-Commercial use, reproduction and distribution of the work without further permission provided the original work is attributed as specified on the SAGE and Open Access pages (<https://us.sagepub.com/en-us/nam/open-access-at-sage>).

ACCESS THIS ARTICLE ONLINE
Website: journals.sagepub.com/home/szj
DOI: 10.1177/0253717620944612