

18 May 2007 How Depression Begins: Look At Warning Signs

Giovanni Fava and Eliana Tossani of the University of Bologna review the literature on how depressive illness begins. Depression does not come out of the blue. There are clear warning signs that patients should know and allow an early intervention.

The aim of this review was to survey the available literature on prodromal symptoms of unipolar major depression. Both a computerized (Medline) and a manual search of the literature were performed. In a substantial proportion of patients with depression a prodromal phase can be identified. There is a relationship between residual and prodromal symptomatology (the rollback phenomenon). Appraisal of prodromal phase of major depression has important implications as to pathophysiological models of disease and relapse prevention. It may allow a staging system of depressive illness which may yield more enduring results in the therapeutic efforts.

Who Are The Patients Who Respond To Drug Treatment Of Panic Disorder?

Embargo Date: /

Posted: 18/5/2007, 17:33

Posted by: Department of Education, Leiden University

A group of Dutch investigators have published a study in the May issue of *Psychotherapy and Psychosomatics*, which unravels the characteristics of patients who are more likely to respond to drug treatment in panic disorder. The differential effectiveness of cognitive therapy and antidepressant treatment (paroxetine or clomipramine) was investigated in a sample of 129 panic disorder patients in a 12-week, pretest posttest placebo-controlled study. Moderately strong beliefs about self-control of panic disorder congruent with the cognitive intervention provided seem to moderate treatment effectiveness.

Health, Psychology

Based on a Finnish study, persistent smokers may have higher risk to become depressed in comparison to never smokers. Also those smokers who quit have an elevated risk of depressive symptoms in short run. However, in long run this risk declines to the level of never smokers. In other words, both completely smoke-free life style and successful smoking cessation in long run seem to protect from depressive symptoms.

It is known that depression is associated with cigarette smoking, but the nature of this association is discussed under various hypotheses. First, according to the so called self-medication hypothesis, those who suffer from depressive symptoms smoke cigarettes in order to alleviate their symptoms. According to the second assumption, chronic persistent smoking may have a role in the etiology of depression. The third hypothesis suggests that there is a reciprocal mechanism between smoking and depression. The fourth hypothesis says that there are shared underlying genetic factors explaining this co-morbidity.

This study conducted in the Department of Public Health at the University of Helsinki explored, which of those assumptions would be supported by the data, when smoking behavior and changes in it is considered as a predictor of depressive symptoms. The researchers had access to the data collected

within the Finnish Adult Twin Cohort Project. There were about four thousand male and five thousand female twins, whose health and health behavior were followed-up through 15 years.

Data on smoking behavior and changes in it between 1975 and 1981 were analyzed as a predictor of depressive symptoms measured in 1990. The analyses were adjusted for other factors known to predict depression. Because the data consisted of twins it was possible to test the causality between smoking and depression by using twin pairs discordant for depression, where the twin without depression served as a matched control for his/her co-twin with depression. Additionally, it was possible to explore potential shared genetic influences underlying the association.

The results suggest that first, persistent chronic cigarette smoking predicts depressive symptoms. However, when adjusted for other factors associated with depression, the elevated risk of persistent smoking remained significant among men only. "The result that chronic smoking may actually have a role in the etiology of depression, may be surprising, as nicotine as such – in short term – is assumed to have some positive effects on mood", says Dr. Tellervo Korhonen from the Department of Public Health at the University of Helsinki, and continues: "We should look for explanation to our result from long term effects of cigarette smoking, from addiction mechanisms and from other substances than nicotine within tobacco smoke."

Secondly, there was evidence suggesting that those smokers who had quit had elevated depression risk in relatively short term. The association of quitting smoking and depressive symptoms gives us indirect evidence on the self-medication hypothesis. Dr. Korhonen emphasizes, however, the further evidence within the same study showing that those smokers who had quit successfully and remained abstinent through the follow-up did not have elevated depression risk compared to the never smokers. This may reflect a relatively long recovery process from the adverse effects of cigarette smoking.

"The mechanisms underlying the association between smoking and depression are very complicated. Although nicotine as such may have short term positive effects on concentration and possibly on mood, long term exposure to tobacco smoke may be one risk factor in development of depression. However, this mechanism is still relatively unknown. Thus, there is need for further research and evidence in order to make an unambiguous statement that 'smoking cigarettes cause depression'. Examination of potential shared genetic vulnerability for both tobacco dependence and depression is among the further challenges", Dr. Korhonen is discussing the evidence so far. According to Korhonen, one can already say that – as in prevention of many other diseases – also in prevention of depression smoke-free life and successful smoking cessation seem to have a positive impact.

This report is based on a research article published in the *Psychological Medicine* –scientific journal. The authors include researchers from the University of Helsinki, the National Public Health Institute, the Finnish Institute of Occupational Health and the Harvard University, Boston, USA.

What Is Really Important When You Are Depressed?

What are the values and inconsistencies in patients who are depressed? A group of investigators of the University of Jena has attempted to identify these aspects in the May issue of *Psychotherapy and Psychosomatics*. In this study, the Authors used the Intrapersonal Conflict Test to assess cognitive inconsistencies in goals or values.

A total of 53 inpatients with unipolar depression and 24 nondepressed controls (inpatients of an internal

and a surgery ward) participated in the study. In addition to the Intrapersonal Conflict Test, patients completed the Beck Depression Inventory, the Dysfunctional Attitude Scale, the Inventory of Interpersonal Problems as well as the Problem Solving Inventory. Compared with controls, patients with depressive disorders showed significantly more inconsistencies within different goals/values, as well as between goals/values and their perceived realization. These internal conflicts appear to be correlated with interpersonal problems, and with a poor capacity of problem solving. These internal conflicts were partially mediated by interpersonal problems but not by depressive symptoms or cognitive vulnerability factors. The findings of this exploratory study do not allow for conclusions regarding the role of intrapersonal conflicts in the development and course of depression. Nevertheless, the high levels of intrapersonal conflicts observed in the study suggest that inconsistencies in goals or values should be considered in the psychological treatment of depression.

A study by Margarita Beresnevaite (Kaunas University, Lithuania) has shed some new light on the inability to express emotions (alexithymia) and coronary heart disease in the May issue of *Psychotherapy and Psychosomatics*.

Despite increasing emphasis on using multiple methods to assess personality constructs in psychosomatic research, previous investigations of relations between alexithymia and type A behavior (TAB) have been limited by the use of single methods of measurement and almost no attempt to assess subcomponents of TAB. The aims of this study were to (1) evaluate levels of agreement between structured interview assessments of alexithymia, TAB, hostility, and time urgency and well-established self-report measures of these constructs, and (2) explore relations between alexithymia and TAB and its subcomponents in patients with coronary heart disease (CHD). 62 CHD patients were investigated 6 weeks after coronary angioplasty. Alexithymia was assessed with the Diagnostic Criteria for Psychosomatic Research (DCPR) and the 20-item Toronto Alexithymia Scale (TAS-20). TAB was assessed with the DCPR and the Short Form of the Jenkins Activity Survey Type A scale (JAS-SF). Time urgency was assessed with the DCPR and the Speed/Impatience scale of the Jenkins Activity Survey (JAS-S), and hostility was assessed with the DCPR and the Hostility subscale of the Revised Symptom Checklist-90 (SCL-HOS). The DCPR classifications showed reasonably high levels of agreement with the TAS-20 and JAS-SF classifications of alexithymia and TAB, but lower levels of agreement in identifying patients with high hostility on the SCL-HOS and high time urgency on the JAS-S. Alexithymia measured by both the DCPR and the TAS-20 was unrelated to both self-report and structured interview measures of TAB, hostility, and time urgency. Conclusions: The DCPR is a suitable screening instrument for assessing alexithymia and TAB, although the two constructs are unrelated.

Hens solicit sex in the morning to avoid sexual harassment in male-dominated groups of chickens, shown in a new study by Hanne Løvlie of Stockholm University, Sweden, and Dr Tommaso Pizzari of the University of Oxford, UK.

In the animal kingdom, males more often than females can increase their reproductive success by being promiscuous. This in turn can result in males imposing high numbers of copulation attempts and sexual harassment on females.

In the promiscuous feral chicken, males initiate more than 90 per cents of all copulation attempts; most of them in the evening after hens have laid their eggs and are most fertile. In female-dominated groups hens are also interested in sex in evenings. However, as shown in a new study published in *American*

Naturalist, in male-dominated groups hens rather initiate sex in mornings.

‘Sexual harassment in evenings in male-dominated groups may just be too much for the hens’, says Hanne Løvlie from Stockholm University, one of the researchers of the study. ‘Hens were exposed to more intense sexual harassment in male-dominated group. By initiating sex in mornings when the cockerels are less amorous and the free-ranging chickens also are more spread out foraging, hens may avoid the intense sexual harassment in evenings.’

The study shows that changes in the intensity of sexual harassment trigger a plasticity in the hens’ sexual behaviour not before shown. A plasticity that in turn may enable hens to mate without suffering sexual harassment.

‘The sexes therefore not only fall out on how much sex they want, but also when at day to have it’, says Hanne Løvlie.

The UK Observatory for the Promotion of Non-Violence at the University of Surrey has launched, along with partners in Belgium, Bulgaria, Ireland, Norway and Spain, a new training resource entitled VISTA (www.vista-europe.org) that addresses the issue of school violence through a whole-school approach. The VISTA materials, which are available in English, Spanish, German and Bulgarian, are aimed at, and will have significant benefits and impact on students, educators, non-teaching staff, policy-makers and parents. (A full list of benefits and impacts is included below).

For centuries, violence has been a commonplace feature of school life with its causes embedded in the social, cultural, historical and economic contexts of its time. The victims of violence can be individuals, objects or schools themselves, and the nature of the damage can be psychological, physical or material. Since the middle of the 20th century, however, violence against children has increasingly been viewed as a violation of their fundamental human rights, in particular of their right to physical safety and psychological security and well-being. In addition, there has been recognition that either schools can help to prevent violence against children or that they create an environment that reinforces violent attitudes. More recently, there has been a growing concern to understand the roots of violence and the effects on all members of the school community (children and young people, teachers, families) and on the school culture and ethos itself, and to find constructive ways to reduce it when it occurs and, if possible, to prevent it.

The VISTA project adopts the Whole School Approach (WSA) to the promotion of non-violence and prevention of violence which can be applied in any educational setting. In taking up the

WSA, VISTA believes that the phenomenon of school violence is best addressed as a collective challenge, and not as a problem rooted in the individual. From this perspective, a WSA involves children and young people, teachers, school management, non-teaching staff members, parents, governors, the local community, external organisations and wider society as a whole.

A successful WSA approach to the promotion of non-violence not only addresses violent behaviour it also improves the climate and ethos of the school, improves relationships among staff, children and young people and parents, it also supports the emotional health and well-being and learning potential of children and young people, and all adult members of the school community.

The impact on children and young people will be to develop their capacity to: enhance their emotional health and well-being; participate in decisions that affect their school community; respect others' rights and integrity; value cultural diversity and develop solidarity among peers from different backgrounds; and work co-operatively and recognise responsibilities towards others and society as a whole.

The impact on educators will be to develop their capacity to: enhance the emotional well-being of pupils; identify psychological, social and environmental risk and protective factors in their own school context; carry out an appropriate needs analysis of violence in their own settings; identify and implement their own training needs; design and implement effective school policies; and become familiar with best practice Europe-wide to counteract violence in schools.

The impact on policy makers will be to develop their capacity to: develop appropriate links with relevant bodies in the community and nationally (e.g., in education, social services, police & justice, youth & social sectors, NGOs); facilitate action at the level of government based on the best available evidence collated from research and practice Europe-wide; contribute to legislation designed to protect children and young people from violence; create systems for monitoring the magnitude and patterns of violence amongst children and youth; and create systems for the continued documentation, co-ordination and dissemination of best practice on a national and European level.

A RESOURCE FOR PRACTITIONERS AND POLICY MAKERS AND ALL THOSE WORKING WITH CHILDREN AND YOUNG PEOPLE AFFECTED BY SCHOOL VIOLENCE

Welcome to VISTA, a training resource that addresses the issue of school violence through a whole-school approach. The VISTA materials are aimed at educators, non-teaching staff, policy-makers and parents.

For centuries, violence has been a commonplace feature of school life with its causes embedded in the social, cultural, historical and economic contexts of its time. The victims of violence can be individuals, objects or schools themselves, and the nature of the damage can be psychological, physical or material. Since the middle of the 20th century, however, violence against children has increasingly been viewed as a violation of their fundamental human rights, in particular of their right to physical safety and psychological security and well-being. In addition, there has been recognition that either schools can help to prevent violence against children or that they create an environment that reinforces violent attitudes. More recently, there has been a growing concern to understand the roots of violence and the effects on all members of the school community (children and young people, teachers, families) and on the school culture and ethos itself, and to find constructive ways to reduce it when it occurs and, if possible, to prevent it.

...violence against children has increasingly been viewed as a violation of their fundamental human rights, in particular of their right to physical safety and psychological security and well-being...

The VISTA project is a joint initiative arising from previous work on school violence (CONNECT, 2002). The training has been developed by a unique combination of experts in research, practice and training from the disciplines of sociology, psychology, education and criminology. The VISTA training

is designed to benefit and inform not only teachers and educators but also local education authorities (LEAs) and policy-makers Europe-wide and, of course, young people themselves.

The project was funded by a grant from the European Union Comenius 2 initiative grant number 112044-CP-1-UK-COMENIUS-C21