Excoriation (skin-picking) disorder is a disabling condition with no clearly effective treatment. Grant and colleagues carried out a 12-week, randomized, placebo-controlled, double-blind clinical trial of N-acetylcysteine (dose range, 1200-3000 mg/d) with 66 adults with the condition. Compared with the placebo, N-acetylcysteine was well tolerated and associated with significant improvements in a modified Yale-Brown Obsessive Compulsive Scale and in the Clinical Global Impression–Severity scale, suggesting that N-acetylcysteine may be beneficial in treating excoriation disorder.

Grant and colleagues tested whether injectable hydromorphone is noninferior to injectable diacetylmorphine for long-term opioid use disorder. In a 6-month randomized trial, noninferiority was demonstrated in the per-protocol analysis but not the intent-to-treat analysis. In an editorial, Schottenfeld and O’Malley discuss the importance of the study for the treatment of heroin addiction.

Deep brain stimulation targeting the ventral anterior limb of the internal capsule. While 40% of treatment-resistant depression patients responded to deep brain stimulation in the initial open-label study, patients experienced significantly more depressive symptoms during a subsequent double-blind, randomized crossover trial comparing sham with active stimulation. In an editorial, Mayberg and coauthors interpret the results of study in light of recent dialectical behavior therapy trials of treatment-resistant depression.