

Sheng et al (page 550) found a gene network involved in γ -aminobutyric acid dysfunction at a key hippocampal locus in patients with schizophrenia and patients with bipolar disorder. Duplications and deletions of specific DNA sequences correlate with gene expression at this locus and appear to be regulated through a circuitry-dependent mechanism.

Fusar-Poli et al (page 562) conducted a meta-analysis of transition outcomes in 27 studies with more than 2500 individuals at high clinical risk for psychosis. The transition risk to first-episode psychosis was 18% after 6 months' follow-up, 22% after 1 year, 29% after 2 years, and 36% after 3 years. Participant age, publication year, treatments received, and diagnostic criteria used significantly modulated the estimates.

Gibbons et al (page 572) reanalyzed complete longitudinal data from 41 published and unpublished placebo-controlled randomized clinical trials of fluoxetine and venlafaxine for the treatment of depression (9185 patients and 53 260 weekly measurements). Patients in all age and drug groups had significantly greater improvement than placebo controls. The mean differences translated into large response and remission rate differences for youth and adults but smaller differences for geriatric patients.

Gibbons et al (page 580) reanalyzed complete longitudinal data from 41 published and unpublished placebo-controlled randomized clinical trials of fluoxetine and venlafaxine for the treatment of depression (9185 patients and 53 260 weekly measurements). They found decreased suicidal thoughts and behavior in adults and geriatric patients and no effect of treatment on suicidal thoughts and behavior in children. Decreases in suicidal thoughts and behavior were mediated by decreases in depressive severity.

Watts et al (page 588) examined the effect of a checklist used to identify and mitigate environmental hazards for suicide on mental health units. All inpatient behavioral health units in the Veterans Health Administration participated. The use of the checklist to identify and mitigate suicide hazards was associated with a reduction in completed suicides in a national system of inpatient mental health units.

Gara et al (page 593) report on a multisite study of the influence of patients' race and ethnicity on clinical assessment. African American subjects exhibited significantly higher rates of clinical diagnoses of schizophrenia than non-Latino white subjects, even after controlling for the presence/absence of serious affective

disorder, as determined by blinded experts. African American subjects did not differ significantly from white subjects in overall severity of affective symptoms but did have more severe psychosis.

Yatham et al (page 601) examined changes in brain serotonin₂ receptors following tryptophan depletion in patients with recently remitted major depression using positron emission tomography. They found that those who did not show a relapse of depressive symptoms exhibited a significant reduction in brain serotonin₂ receptors. The decrease in serotonin₂ receptors might be a compensatory response to prevent depressive relapse; such a decrease was not observed in those who became depressed.

In a population-based cohort study, Nosarti et al (page 610) investigated the relationships between various perinatal events and psychiatric hospitalization in young adulthood. Results showed that the vulnerability for hospitalization with a range of psychiatric diagnoses increased with younger gestational age, while similar associations were not observed for nonoptimal fetal growth and low Apgar score.

Fagundes et al (page 618) addressed how parental emotional maltreatment and subsequent stressors impact the basal cell carcinoma tumor environment. Among patients with basal cell carcinoma who experienced a severe stressor in the past year, those who were emotionally maltreated by either parent as children were more likely to have poorer immune responses to the tumor.

Sabia et al (page 627) examined the association between smoking history and 10-year cognitive decline in the Whitehall II participants. In both sexes, cognitive decline in all tests except vocabulary was observed. No association between smoking and cognitive decline was found in women. In men, faster cognitive decline was seen among current smokers compared with never smokers. Recent but not long-term ex-smokers had greater decline in executive function.

Lighthart et al (page 636) explored the association of a history of cardiovascular disease and symptoms of apathy in 3534 community-dwelling individuals aged 70 to 78 years. In the absence of depressive symptoms and dementia, stroke and other cardiovascular disease were both independently associated with symptoms of apathy. Moreover, symptoms of apathy were associated with systolic blood pressure, body mass index, diabetes mellitus, and C-reactive protein in individuals without a history of cardiovascular disease.