Psychotherapy, a modified psychodynamic approach, delivered twice a week to patients with borderline personality disorder was superior to standard community psychotherapists using a mixture of approaches. Doering et al (pp. 389–395) reported lower drop-out rates and fewer suicide attempts during the year of the treatment. They highlight the range of psychotherapeutic approaches which have now been shown to be effective in the treatment of borderline personality disorder and suggest that there needs to be a synthesis of the evidence to guide the practitioner towards the optimal treatment for an individual patient. The individual placement and support (IPS) model has been effective in assisting patients with severe mental illness in gaining competitive employment. Howard and colleagues (pp. 404–411) found that the IPS showed no benefit, compared with standard treatment, in helping patients gain employment in the UK. The authors, and Latimer (pp. 341–342) writing in an accompanying editorial, suggest that the lack of faithful implementation of the model may be at fault and that this is not an indication to throw the baby out with the bathwater or to assume that the IPS model cannot deliver results in the UK.

Auditory hallucinations, antidepressant toxicity and smoking

Auditory hallucinations in schizophrenia have been associated with a range of abnormalities in the temporal cortex in magnetic resonance imaging studies. Nenadic et al (pp. 412–413) show that auditory hallucinations were correlated with changes in the bilateral superior temporal gyri, including primary and secondary auditory cortex, and inferior parietal cortex. They suggest that these regions show a dimensional relationship with hallucinatory activity rather than a categorical one. Self-poisoning is a common means of suicide and antidepressants account for a fifth of UK suicide attempts. Hawton and colleagues (pp. 354–358) assessed the relative toxicity of the commonly used antidepressants and report that, as anticipated, the tricyclic antidepressants have the highest toxicity, followed by venlafaxine and mirtazapine, with the selective serotonin reuptake inhibitors (SSRIs) having the lowest toxicity index. Interestingly, within the family of SSRIs, citalopram had a higher toxicity index than the other SSRIs. They suggest that these data could feed into clinical decisions during the risk assessment of patients being prescribed antidepressants. High rates of smoking are a major problem in patients with schizophrenia. A review and meta-analysis of bupropion reports that it may be a useful adjunct in increasing rates of smoking cessation in smokers with schizophrenia. Most importantly, Tsoi and colleagues (pp. 346–353) show that this can be achieved without any adverse effects on mental state.