Epilepsy in autism and eating disorders in childhood

Although autism and epilepsy are well known to be associated, the features and correlates of epilepsy in this group have not been established. Bolton et al (pp. 289–294) undertook a longitudinal study of 150 individuals diagnosed with autism in childhood and found that over a fifth had developed epilepsy when assessed at age 21 years or over. Epilepsy in this group, most often characterised by generalised tonic-clonic seizures, was more common among females, those with intellectual disability and those with poorer verbal abilities. Interestingly, familial liability to autism was also found to be associated with risk of epilepsy in the proband. On the basis that eating disorders may be increasing in younger age groups, Nicholls et al (pp. 295–301) undertook a national surveillance study over a 14-month period in both a paediatric and mental health setting. New cases of early-onset eating disorders (before age 13 years) were found to occur with an overall incidence of 3.01 per 100 000. For those with outcome data available, 73% were improved at 1 year, 6% worse and 10% unchanged, and most were still in treatment.

Emotion recognition in depression and social support among immigrants

Comparing a sample of individuals with current depression and remitted depression with controls, Anderson et al (pp. 302–308) found that the former performed poorly with regard to face emotion recognition while the latter correctly identified more emotions than controls. The authors conclude that reduced discrimination by those with depression may reflect withdrawal from the emotions of others, whereas enhanced discrimination by those with remitted depression may reflect vulnerability to relapse. Those taking antidepressants performed similarly to controls in this study. Drogendijk et al (pp. 317–322) followed up a sample of individuals resident in an area of The Netherlands that was exposed to a devastating explosion in a fireworks storage facility in May 2000. Four years after the disaster, affected immigrants were found to lack social support more than native Dutch victims but when affected immigrants were compared with a sample of unaffected immigrants resident in a similar but unaffected region, no difference in social support was found. The authors conclude that the differences in social support found post-disaster were likely to have been present before the disaster.

Genetics of the schizophrenia–bipolar disorder spectrum

Using a schizophrenia-derived polygenic score in a bipolar disorder sample, Hamshere et al (pp. 284–288) found that the score discriminated between those with schizoaffective bipolar disorder and the remaining individuals in the bipolar sample. The score did not, however, discriminate between those with and without psychosis. The authors conclude that their findings support a classificatory move away from the Kraepelinian dichotomy and towards approaches that recognise the common co-occurrence of domains of variation among those on the schizophrenia–bipolar disorder clinical spectrum.