Highlights of this issue

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INSTITUTIONAL PRIVATION: ONE-FIFTH NORMAL FUNCTIONING

Harrington (pp. 93-94) provides a useful overview of this month's issue, which is largely dedicated to developmental psychopathology and causal processes. Young children who have suffered profound institutional privation may subsequently experience considerable difficulties but research has shown outcome to be varied, with some children seeming to escape impairment. It is not known whether children who fare well on one type of outcome also fare well on others. By comparing 165 Romanian with 52 UK adoptees, Rutter et al (pp. 97-103) examine the extent to which impairments are pervasive across domains up to age 6. Rates of emotional difficulties, peer relationships and conduct problems did not differ between groups. Cluster analysis showed that patterns involving attachment/ inattention problems and autism/cognitive impairment were most characteristic of children experiencing institutional privation. One-fifth of children who spent longest in institutions showed normal functioning.

CAUSAL MECHANISMS AFFECTING RESPONSE TO EXPERIENCE

Despite the remarkable degree of individual variation in response to psychosocial experiences, little is known about the causal mechanisms underlying the variation. Silberg *et al* (pp. 116–121) in a study of 184 female-female twin pairs tested the hypothesis that genetic factors moderate susceptibility to the environmentally mediated risks associated with negative life events. They showed that genetic factors did play a role in individual reactions to environmental adversity and that the effects of independent life events on depression

depended to a large extent on the presence of parental emotional disorder.

FAMILY MATTERS

Membership of a single-parent family or stepfamily is a robust correlate of psychopathology in children. Studies to date have focused on outcomes according to family type membership. Using multilevel modelling, O'Connor et al (pp. 110-115) go further and assess the sources of betweenand within-family variation in child psychopathology across diverse family settings. Behavioural and emotional problems were elevated in children in stepmother /complex stepfamilies and single-parent families, but not in simple stepfather families, relative to 'biological families'. There was substantially more within-family variation in children's outcomes in stepfather families but not in stepmother/complex and singleparent families when compared with biological families. Individual child-level risks were more important in explaining variation in psychopathology, with family-level risks being especially important at high levels of family stress.

SSRIs REPORTED SAFE IN BREAST-FEEDING

Hendrick et al (pp. 163–166) examine serum concentrations of three antidepressants in 50 infants exposed to one of these drugs through breast-feeding. Serum concentrations of medication were undetectable in all infants exposed to paroxetine or fluvoxamine and in most exposed to sertraline while nursing. The presence of low detectable serum concentrations of medication was not associated with adverse events in the infants. The children of mothers with depression do, however, suffer various emotional and behavioural difficulties, but little is known about the influence of the timing of children's initial exposure to

maternal depression. Essex et al (pp. 151–156) examine this in a prospective community-based study, where 421 teachers rated children's symptoms at around age 6. Results highlight the need for effective prevention and intervention strategies addressed to the developmental issues of each period.

MOTHERS WITH EATING DISORDER AND CHILD DEVELOPMENT

Certain styles of parental controlling behaviour influence child development. Stein et al (pp. 157-162) compare the maternal controlling behaviours of mothers with eating disorders, postnatal depression and a healthy comparison group. Mothers with eating disorders used more verbal control and were less facilitating than both other groups. The authors suggest that mothers with eating disorders may need help to prevent the extension of the control they exert over themselves to their interactions with their infants. Hill et al (pp. 104-109) found that child sexual abuse (CSA) and poor parental care were independently associated with long-term patterns of poor adult love relationships, and that these were associated with major depression over the age period 21-30 years. Potentially informative differences between CSA and poor parental care in the way the quality of love relationships affected the risk for depression suggests that depression following each adversity may require different therapeutic options.

SLPAND MIGRANTS

Moving from one extreme of life to the other, with a higher incidence of schizophrenia among African-Caribbean migrants to the UK, Reeves et al (pp. 172-174) wished to test whether this increase extended to very-late-onset schizophrenialike psychoses (SLP) in those over 65 years of age. The authors studied all new referrals to an old age psychiatric service in south London over 5 years. The rate of SLP was significantly higher in Caribbean-born than in British-born elders: 12 times higher in females and 24 times higher in males. Further studies of incidence rates, co-existent risk factors and prognostic indicators for SLP to assist service provision among this vulnerable group are required.