Urbanicity and Psychosis in Low- and Middle-Income Countries

Urban residence is a well-established risk factor for psychosis, but most evidence comes from high-income countries. Using World Health Survey data from 215,682 adults residing in 42 low- and middle-income countries, DeVylder and colleagues found that urban residence was not significantly associated with psychotic experiences or psychotic disorder in either low- or middle-income countries. These results indicate that urbanicity may be a risk factor for psychosis in high-income countries only. In an Invited Commentary, Plana-Ripoll and colleagues discusses implications of these findings for our understanding of psychotic disorders.

Invited Commentary

Intellectual Activities and Dementia Risk in Older Adults

Participation in intellectual activities in late life is associated with decreased odds of developing dementia, but reverse causality or confounding factors have not been ruled out. In a longitudinal observational study of 15,582 community-living older Chinese individuals in Hong Kong, Lee and colleagues found a significantly lower risk of incident dementia during 5 years of median follow-up among individuals with intellectual activities at baseline. This suggests that active participation in daily intellectual activities in late life may help delay or prevent dementia. In an Invited Commentary, Blacker and Weuve discuss the implications.

Invited Commentary

Association of Low Heart Rate Variability With Depression

Depression has been associated with cardiovascular pathology including coronary heart disease and stroke. In this longitudinal twin difference study, Huang and colleagues found that a lower heart rate variability at baseline is independently associated with increasing depressive symptoms at follow-up. However, the relationship between depressive symptoms at baseline and lower heart rate variability at follow-up was mostly explained by antidepressant medication use. These findings suggest that autonomous nervous system dysregulation may be a risk factor for the development of depression.

Electroconvulsive Therapy Cost-effectiveness for Depression

Electroconvulsive therapy is highly effective for depression but is underused. Using input data from meta-analyses, randomized trials, and observational studies, Ross and colleagues developed a decision analytic model and found that electroconvulsive therapy offered for treatment-resistant depression after failure of 2 or more trials of pharmacotherapy/psychotherapy was cost-effective and was projected to reduce time with uncontrolled depression from 50% of life-years to 33% to 37% over a 4-year period. These analyses indicate that electroconvulsive therapy is an effective and cost-effective treatment option for treatment-resistant depression.

Author Audio Interview

Handgrip Strength and Cognitive Dysfunction in Depression

Mood disorders are among the most disabling conditions worldwide, yet there is no objective marker that can be used to quantify disease severity. In this cross-sectional analysis of a population-scale dataset of 110,067 individuals, Firth and colleagues show that handgrip strength is associated with visuospatial memory, reaction time, reasoning, prospective memory, and numeric memory in both individuals with major depression and healthy controls. Thus, handgrip strength may be a marker of cognitive and functional capacity dysfunction in mood disorders.

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