Nitroprusside Fails to Improve Symptoms in Schizophrenia

There is a great need for treatments that can improve symptoms of schizophrenia in the short term. Brown and colleagues conducted a randomized clinical trial to examine the efficacy of immediate administration of sodium nitroprusside to improve positive or negative symptoms in schizophrenia. They enrolled 52 participants into 1 of 3 treatment sequences and found no improvement in either positive or negative symptoms. In an Editorial, Kapur and Munafò, mentioning a previously positive clinical trial with nitroprusside, point out that trials of this nature need to be adequately powered for typically found effect sizes.

Cognitive Behavior Therapy Delivery Formats in Depression

Cognitive behavior therapy (CBT) is effective in the treatment of depression, but it is not clear which CBT delivery format is most effective. Cuijpers and colleagues conducted a network meta-analysis and concluded that the effectiveness of individual, group, telephone, and guided self-help CBT did not statistically significantly differ from each other but were all more effective than unguided self-help CBT. These results indicate that several treatment formats are acceptable alternatives to individual CBT. In an Editorial, Swartz and Fournier consider implications for research and clinical practice.

Body Mass Index and Internalizing Symptoms in Childhood

Obesity and internalizing mental illness begin in childhood and are leading causes of disease burden, but their temporal patterns are not well established. Patalay and Hardman used data from 17 215 individuals the UK Millennium Cohort Study to show that obesity and internalizing symptoms were not more likely to co-occur in early childhood but became more associated at age 11 to 14 years; some of their associations could be attributed to socioeconomic factors. These results suggest that prevention and early intervention efforts may benefit from targeting both health outcomes in childhood.

Brain Heterogeneity in Schizophrenia and Polygenic Risk

Group-level brain structure abnormalities in schizophrenia may mask substantial within-group heterogeneity. Alnæs and colleagues examined 2 separate large magnetic resonance imaging datasets and found that heterogeneity was greater in the schizophrenia group than the control group for many brain structural measures in 1 dataset, while higher polygenic risk score was associated with thinner cortex and smaller hippocampus but not with within-group dispersion in the other dataset. Thus, brain variability among people with schizophrenia is substantial but not associated with polygenic risk. In an Editorial, Kochunov et al compare these results with those from other large studies.