

A stylized profile of a human head in shades of pink and red. Inside the head, there are several interlocking gears in various colors: grey, yellow, light green, and light blue. A large, stylized eye is positioned on the right side of the head. The background is a mix of yellow and light blue.

FORENSIC MENTAL HEALTH BULLETIN

2019 Vol 6 No 5

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The aim of this current awareness bulletin is to highlight new articles in forensics, covering: diagnosis of mental disorders (using the ICD-10 categorisation); offences (including violent crime and aggression, homicide, and juvenile offenders); treatment and assessment (including offence-focused treatment, therapeutic modalities, and risk assessment); specific services (prisons, secure units, and women's services); health policy and management; and ethics and law.

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Mental Disorders – Diagnosis

Organic, including symptomatic, mental disorders

Mental behavioural disorders due to substance use

Schizophrenia, Schizotypal, and delusional disorders

Mood [affective] disorders

Neurotic, stress related and somatoform disorders

Behavioural syndromes associated with physiological disturbances and physical factors

Disorders of adult personality and behaviour

Intellectual disability

Disorders of psychological development

Behavioural and emotional disorders with onset usually occurring in childhood and adolescence

Unspecified mental disorder

Offences

Violent Crime and Aggression

Juvenile Offenders

Treatment (including assessment)

Physical Health

Risk management

Self harm and suicide

Therapeutic modalities (psychodynamic, cognitive behavioural etc.)

Services

Prisons

Secure Units

Women's Services

Health Policy / Management

Mental Health Practice

Recovery – Rehabilitation

Ethics and Law

Organic, including symptomatic, mental disorders

McGlinchey, E., et al.

Examining the effects of computerised cognitive training on levels of executive function in adults with Down syndrome

Journal of Intellectual Disability Research, 2019

Individuals with Down syndrome (DS) are at much greater risk of developing Alzheimer's disease, and one of the early clinical symptoms of Alzheimer's disease is executive dysfunction. In the general population, cognitive training has shown some promising results in relation to maintaining or improving cognitive processes. There is currently a gap in the literature in relation to cognitive training for adults with DS. This study showed that, while it has not been previously an area of focus, individuals with DS can complete a computerised cognitive training programme. Furthermore, the results were promising with significant improvements found in neuropsychological assessments of executive function.

Click here to view abstract: <http://dx.doi.org/10.1111/jir.12626>

Qin, Y., et al.

Risk classification for conversion from mild cognitive impairment to Alzheimer's disease in primary care

Psychiatry Research, 2019 278, pp. 19-26

There is a pressing need to identify individuals at high risk of conversion from mild cognitive impairment (MCI) to Alzheimer's disease (AD) based on available repeated cognitive measures in primary care. Accurate identification of conversion from MCI to AD contributes to earlier close monitoring, appropriate management, and targeted interventions. Thereby, it can reduce avoidable hospitalizations for the high-risk MCI population.

Click here to view abstract: <http://dx.doi.org/10.1016/j.psychres.2019.05.027>

Schaap, F. D., et al.

Effects of Dementia Care Mapping on job satisfaction and caring skills of staff caring for older people with intellectual disabilities: A quasi-experimental study

Journal of Applied Research in Intellectual Disabilities, 2019

The ageing of people with intellectual disabilities, involving consequences like dementia, creates a need for methods to support care staff. One promising method is Dementia Care Mapping (DCM). This study examined the effect of DCM on job satisfaction and care skills of ID-care staff. Dementia Care Mapping does not increase job satisfaction and care skills of staff caring for older people with intellectual disabilities. This result differs from previous findings and deserves further study.

Click here to view abstract: <http://dx.doi.org/10.1111/jar.12615>

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Mental behavioural disorders due to psychoactive substance use

Alisauskiene, R., et al.

The influence of substance use on the effectiveness of antipsychotic medication: a prospective, pragmatic study

Nordic Journal of Psychiatry, 2019 pp. 1-7

The aim of this study was to compare the effectiveness of second generation antipsychotics in patients with psychosis with and without substance use. Substance use alone did not influence antipsychotic effectiveness in this sample of patients with psychosis.

Click here to view abstract: <http://dx.doi.org/10.1080/08039488.2019.1622152>

Kendler, K. S., et al.

Prediction of onset of substance-induced psychotic disorder and its progression to schizophrenia in a Swedish national sample

The American Journal of Psychiatry, 2019

The objective of this study was to clarify the etiology of substance-induced psychotic disorder and its progression to schizophrenia in a Swedish national sample. Substance-induced psychotic disorder appears to result from substantial drug exposure in individuals at high familial risk for substance abuse and moderately elevated familial risk for psychosis. Familial risk for psychosis, but not substance abuse, predicts progression from substance-induced psychosis to schizophrenia. Schizophrenia following substance-induced psychosis is likely a drug-precipitated disorder in highly vulnerable individuals, not a syndrome predominantly caused by drug exposure.

Click here to view abstract: <http://dx.doi.org/10.1176/appi.ajp.2019.18101217>

Quinn, C., et al.

The use of restrictive practices on males released from prison and entering acute mental health services: A retrospective cross-sectional comparative study

Issues in Mental Health Nursing, 2019

This study aimed to determine restrictive practices use on males admitted involuntarily from prison compared to those admitted from the community. Those admitted from prison were no more likely to experience restrictive practices; but were more likely to have a co-existing diagnosis of alcohol/substance use or personality disorder, in addition to a primary diagnosis of psychotic illness. The proportionate use of restrictive practices despite such complex presentations is potentially indicative of the clinical use of effective alternative management strategies.

Click here to view abstract: <http://dx.doi.org/10.1080/01612840.2019.1572845>

Yonek, J. C., et al.

Factors associated with use of mental health and substance use treatment services by justice-involved youths

Psychiatric Services, 2019

Nonincarcerated (community-supervised) youths who are first-time offenders have high rates of mental and substance use disorders. However, little is known about their use of psychiatric services (mental health and substance use) or factors associated with service use. This study examined the prevalence, determinants, and barriers to service use among community-supervised youths. Results suggest a need for interventions to increase access to and engagement in psychiatric services for community-supervised youths and the importance of caregiver factors in designing such interventions.

Click here to view abstract: <http://dx.doi.org/10.1176/appi.ps.201800322>

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Schizophrenia, Schizotypal, and delusional disorders

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Click here to view abstract: <http://dx.doi.org/10.1080/08039488.2019.1622152>

Camacho-Gomez, M. and Castellvi, P.

Effectiveness of family intervention for preventing relapse in first-episode psychosis until 24 months of follow-up: A systematic review with meta-analysis of randomized controlled trials
Schizophrenia Bulletin, 2019

Relapse risk during the early years of first-episode psychosis (FEP) considerably increases the risk of chronicity. The effectiveness of family intervention for psychosis (FIP) for preventing relapse after FEP remains unknown. We assessed the effectiveness of FIP until 24 months of follow-up for preventing relapse and other relapse-related outcomes in patients following FEP. These findings suggest that FIP is effective for reducing relapse rates, duration of hospitalization, and psychotic symptoms, and for increasing functionality in FEP patients up to 24 months.

Click here to view abstract: <http://dx.doi.org/10.1093/schbul/sbz038>

Chang, W. C., et al.

Early-stage negative symptom trajectories and relationships with 13-year outcomes in first-episode nonaffective psychosis

Schizophrenia Bulletin, 2019 45, 3, pp. 610-619

This study examined patterns and baseline predictors of negative symptom trajectories over the first 3 years of treatment in 138 patients aged 18–55 years presenting with first-episode nonaffective psychosis, using latent class growth analysis based on symptom ratings measured at 4 different time points (baseline, 1, 2, and 3 years). Our findings thus affirm a heterogeneous course of negative symptoms in first-episode psychosis and indicate that early-stage negative symptom trajectories are critically associated with long-term outcomes.

Click here to view abstract: <https://dx.doi.org/10.1093/schbul/sby115>

Davies, B. E., et al.

‘monsters don’t bother me anymore’ forensic mental health service users’ experiences of acceptance and commitment therapy for psychosis

Journal of Forensic Psychiatry and Psychology, 2019

Acceptance and Commitment Therapy for psychosis (ACTp) is an approach that aims to change the relationship an individual with psychosis has with difficult thoughts, emotions and experiences. This service evaluation project explored service users’ experiences and meanings of ACTp within a medium secure mental health service. These findings suggest that ACTp is an approach that should be considered a therapeutic option within forensic mental health contexts.

Click here to view abstract: <http://dx.doi.org/10.1080/14789949.2019.1614650>

Gohar, S. M., et al.

Association between leptin levels and severity of suicidal behaviour in schizophrenia spectrum disorders

Acta Psychiatrica Scandinavica, 2019 139, 5, pp. 464-471

We examined the association between leptin and suicidal behaviour in schizophrenia, together with the influence of other clinical and biological indices. Lower leptin levels were associated with higher severity of suicidal behaviour in schizophrenia.

Click here to view abstract: <http://dx.doi.org/10.1111/acps.13019>

Grover, S., et al.

Relationship of metabolic syndrome and neurocognitive deficits in patients with schizophrenia

Psychiatry Research, 2019 278, pp. 56-64

This study aimed to evaluate the association of the metabolic syndrome (MS) and its components with neurocognition among patients with schizophrenia. To conclude, this two center study suggests that MS has a negative impact on neurocognition in patients with schizophrenia.

Click here to view abstract: <http://dx.doi.org/10.1016/j.psychres.2019.05.023>

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Click here to view abstract: <http://dx.doi.org/10.1176/appi.ajp.2019.18101217>

Krendl, A. C. and Freeman, J. B.

Are mental illnesses stigmatized for the same reasons? Identifying the stigma-related beliefs underlying common mental illnesses

Journal of Mental Health, 2019 28, 3, pp. 267-275

This study identified the stigma-related beliefs that were associated with several common mental illnesses (Study 1), and the extent to which those beliefs predicted stigmatization (Study 2). Our results suggest that stigmatization toward different mental illnesses stem from combinations of different stigmatized beliefs.

Click here to view abstract: <http://dx.doi.org/10.1080/09638237.2017.1385734>

Lee, E. E., et al.

Comparison of schizophrenia outpatients in residential care facilities with those living with someone: Study of mental and physical health, cognitive functioning, and biomarkers of aging

Psychiatry Research, 2019 275, pp. 162-168

This paper aims to compare mental and physical health, cognitive functioning, and selected biomarkers of aging reflecting metabolic pathology and inflammation, in outpatients with schizophrenia from two residential settings: residential care facilities (RCFs) and living with someone in a house/apartment. RCF residents had several indicators of worse prognosis (never being married, higher daily antipsychotic dosages, increased comorbidities and higher Framingham risk for coronary heart disease) than individuals living with someone. However, RCF residents had better mental well-being and lower BMI, as well as comparable biomarkers of aging as those living with someone.

Click here to view abstract: <http://dx.doi.org/10.1016/j.psychres.2019.02.067>

Moore, M. M., et al.

Affective forecasting and accuracy in social anhedonia: Predicted and experienced emotion for a social interaction

Journal of Clinical Psychology, 2019

Previous research suggests people with social anhedonia (SocAnh) exhibit deficits in anticipated pleasure for social stimuli relative to controls. However, previous research has relied on hypothetical social stimuli and has focused on anticipated pleasure without examining negative affect. This is the first study to show that SocAnh is associated with the heightened anticipation of negative affect and that experiencing heightened negative affect during social interactions could drive reduced motivation and desire to engage in future social interaction.

Click here to view abstract: <http://dx.doi.org/10.1002/jclp.22796>

Palomar-Ciria, N., et al.

Diagnostic stability of schizophrenia: A systematic review

Psychiatry Research, 2019

The objective is to systematically review previous literature on the diagnostic stability of schizophrenia, particularly to investigate prospective and retrospective consistency. Schizophrenia was found to have high diagnostic stability over time, although research on this topic is mainly focused in first psychotic episodes.

Click here to view abstract: <http://dx.doi.org/10.1016/j.psychres.2019.04.020>

Reilly, T. J., et al.

Exacerbation of psychosis during the perimenstrual phase of the menstrual cycle: Systematic review and meta-analysis

Schizophrenia Bulletin, 2019

Psychotic disorders can be exacerbated by the hormonal changes associated with childbirth, but the extent to which exacerbations occur with the menstrual cycle is unclear. Psychiatric admission rates are significantly higher than expected during the perimenstrual phase. There is some evidence that a worsening of psychotic symptoms also occurs during this phase, but further research with more precise measurement of the menstrual cycle and symptomatology is required.

Click here to view abstract: <http://dx.doi.org/10.1093/schbul/sbz030>

Robinson, D. G., et al.

Predictors of hospitalization of individuals with first-episode psychosis: Data from a 2-year follow-up of the RAISE-ETP

Psychiatric Services, 2019

Despite treatment advances in other domains, inpatient psychiatric hospitalization rates for individuals with first-episode psychosis remain high. Even with early intervention services, a third or more of individuals are hospitalized over the first 2 years of treatment. Reducing hospitalization is desirable from the individual's perspective and for public health reasons because hospitalization costs are a major component of treatment costs. These results indicate that hospital use may be decreased by reducing the duration of untreated psychosis and prior hospitalizations, minimizing residual symptoms, preventing substance misuse, and facilitating adherence to medication taking. Addressing these factors could enhance the impact of first-episode early intervention treatment models and also enhance outcomes of people with first-episode psychosis treated using other models.

Click here to view abstract: <http://dx.doi.org/10.1176/appi.ps.201800511>

Samara, M. T., et al.

How many patients with schizophrenia do not respond to antipsychotic drugs in the short term? An analysis based on individual patient data from randomized controlled trials

Schizophrenia Bulletin, 2019 45, 3, pp. 639-646

An important clinical question is how many patients with acute schizophrenia do not respond to antipsychotics despite being treated for adequate time and with an effective dose. However, up to date, the exact extent of the phenomenon remains unclear. Nonresponse and nonremission percentages were notably high. Nevertheless, the patients in our analysis could represent a negative selection since they came from short-term RCTs and could have been treated before study inclusion; thus, further response may not have been observed. Observational studies on this important question are needed.

Click here to view abstract: <https://dx.doi.org/10.1093/schbul/sby095>

Sheaves, B., et al.

Cognitive behavioural therapy for nightmares for patients with persecutory delusions (Nites): An assessor-blind, pilot randomized controlled trial

Canadian Journal of Psychiatry, 2019

Nightmares are relatively common in patients experiencing psychosis but rarely assessed or treated. Nightmares may maintain persecutory delusions by portraying fears in sensory-rich detail. We tested the potential benefits of imagery-focused cognitive behavioural therapy (CBT) for nightmares on nightmare severity and persecutory delusions. CBT for nightmares is feasible and may be efficacious for treating nightmares and comorbid insomnia for patients with persecutory delusions. It shows promise on paranoia but potentially not on suicidal ideation.

Click here to view abstract: <http://dx.doi.org/10.1177/0706743719847422>

Valli, I., et al.

Uncovering neurodevelopmental features in bipolar affective disorder

The British Journal of Psychiatry, 2019 pp. 1-3

Schizophrenia and bipolar disorder are genetically related and their clinical features overlap. Schizophrenia is conceptualised as a neurodevelopmental disorder but the evidence for bipolar disorder is less clear. Cluster-analytic approaches reveal different cognitive profiles within bipolar disorder, possibly reflective of differing neurodevelopmental loads, which are also suggested by recent genetic and neuroimaging studies. Such studies suggest the potential utility of further clinical subcategories in bipolar disorder based on neurodevelopmental load.

Click here to view abstract: <http://dx.doi.org/10.1192/bjp.2019.117>

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Mood [affective] disorders

Andersson, G., et al.

Internet interventions for adults with anxiety and mood disorders: A narrative umbrella review of recent meta-analyses

Canadian Journal of Psychiatry, 2019

Internet-delivered cognitive behaviour therapy (ICBT) has existed for 20 years and there are now several controlled trials for a range of problems. In this paper, we focused on recent meta-analytic reviews of the literature and found moderate to large effects reported for panic disorder, social anxiety disorder, generalized anxiety disorder, posttraumatic stress disorder, and major depression. The growing number of meta-analytic reviews of studies now suggests that ICBT works and can be as effective as face-to-face therapy.

Click here to view abstract: <http://dx.doi.org/10.1177/0706743719839381>

Belzeaux, R., et al.

Predicting worsening suicidal ideation with clinical features and peripheral expression of messenger RNA and microRNA during antidepressant treatment

The Journal of Clinical Psychiatry, 2019 80, 3

To investigate how the combination of clinical and molecular biomarkers can predict worsening of suicidal ideation during antidepressant treatment. This study generated a predictive tool for TWSI that combines both biological and clinical variables. These biological variables can be easily quantified in peripheral tissues, thus rendering them viable targets to be used in both clinical practice and future studies of suicidal behaviors.

Click here to view abstract: <http://dx.doi.org/10.4088/JCP.18m12556>

Birkenhager, T. K., et al.

Improvement after two sessions of electroconvulsive therapy predicts final remission in inpatients with major depression

Acta Psychiatrica Scandinavica, 2019

To investigate whether early improvement, measured after two ECT sessions, is a good predictor of eventual remission in severely depressed inpatients receiving ECT. Early improvement during an ECT course may be assessed after two ECT sessions. Such improvement, defined as a 15% reduction in the MADRS score, is a moderately sensitive predictor for eventual remission in an inpatient population with severe major depression.

Click here to view abstract: <http://dx.doi.org/10.1111/acps.13054>

Bullock, B., et al.

Traits related to bipolar disorder are associated with an increased post-illumination pupil response

Psychiatry Research, 2019 278, pp. 35-41

This study investigated the melanopsin-driven post-illumination pupil response (PIPR) in relation to emotional-behavioural traits associated with bipolar disorder (measured with the General Behavior Inventory) in a non-clinical group (n = 61). These findings suggest that increased sensitivity to light may be a risk factor for mood problems in the general population, and support the idea that hypersensitivity to light is a trait vulnerability for, rather than symptom of, bipolar disorder.

Click here to view abstract: <http://dx.doi.org/10.1016/j.psychres.2019.05.025>

Carpenter, R. W., et al.

Positive and negative activation in the mood disorder questionnaire: Associations with psychopathology and emotion dysregulation in a clinical sample

Assessment, 2019

The Mood Disorder Questionnaire is a screening measure for bipolar disorder, previously found to comprise separate Positive and Negative Activation subscales. The findings suggest that it may be important to attend to both Mood Disorder Questionnaire subscales.

Click here to view abstract: <http://dx.doi.org/10.1177/1073191119851574>

Craske, M. G., et al.

Positive affect treatment for depression and anxiety: A randomized clinical trial for a core feature of anhedonia

Journal of Consulting and Clinical Psychology, 2019 87, 5, pp. 457-471

Loss of pleasure or interest in activities (i.e., anhedonia) is a risk factor for suicidality, treatment nonresponse, and relapse. Extant treatments that focus on reducing negative affect have limited effects upon positive affect (a core feature of anhedonia). We investigated whether a novel intervention aimed at increasing reward sensitivity was more efficacious for positive affect than a cognitive-behavior treatment aimed at reducing threat sensitivity, in individuals with clinically severe symptoms of depression or anxiety, and functional impairment. Compared to NAT, PAT demonstrated better outcomes (at 6MFU) on positive affect, depression, anxiety, stress, and suicidal ideation, for patients with symptomatic pretreatment levels of these outcomes.

Click here to view abstract: <http://dx.doi.org/10.1037/ccp0000396>

Kopala-Sibley, D. C., et al.

Personality trait predictive utility and stability in Transcranial Magnetic Stimulation (rTMS) for major depression: Dissociation of neuroticism and self criticism

Canadian Journal of Psychiatry, 2019

Cost-efficient and non-invasive predictors of antidepressant response to repetitive transcranial magnetic stimulation (rTMS) are required. The personality vulnerabilities-neuroticism and self-criticism-are associated with antidepressant outcomes in other modalities; however, self-criticism has not been examined in response to rTMS, and the literature on neuroticism and rTMS is inconsistent. Highly self-critical patients appear to benefit more from rTMS than less self-critical patients. Neuroticism, a conceptually similar but distinct personality domain, does not appear to predict antidepressant response, yet this vulnerability factor for depression decreases after rTMS.

Click here to view abstract: <http://dx.doi.org/10.1177/0706743719839705>

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Click here to view abstract: <http://dx.doi.org/10.1080/09638237.2017.1385734>

Martino, M., et al.

Abnormal functional relationship of sensorimotor network with neurotransmitter-related nuclei via subcortical-cortical loops in manic and depressive phases of bipolar disorder

Schizophrenia Bulletin, 2019

The study aimed to investigate the functional relationships of SMN with substantia nigra (SN) and raphe nuclei (RN) via subcortical-cortical loops, and their alteration in bipolar mania and depression, as characterized by psychomotor excitation and inhibition. These findings suggest an abnormal relationship of SMN with neurotransmitters-related areas via subcortical-cortical loops in mania and inhibited depression, finally resulting in psychomotor alterations.

Click here to view abstract: <http://dx.doi.org/10.1093/schbul/sbz035>

Mason, J. E., et al.

Relationships between health behaviors, posttraumatic stress disorder, and comorbid general anxiety and depression

Cognitive Behaviour Therapy, 2019 48, 3, pp. 184-199

Poor health outcomes associated with posttraumatic stress disorder (PTSD) may reflect engagement in unhealthy behaviors that increase morbidity risk and disengagement in healthy behaviors that decrease morbidity risk. Our results indicate that PTSD and comorbid generalized anxiety and depression symptoms were differentially associated with specific health constructs. Specifically, sedentary behavior and poor sleep quality were associated with PTSD, whereas low physical activity, poor sleep quality, and unhealthy eating habits were associated with depression.

Click here to view abstract: <http://dx.doi.org/10.1080/16506073.2018.1498119>

Needs, P., et al.

Psychotherapy and psychopharmacology utilization following repetitive transcranial magnetic stimulation (rTMS) in patients with major depressive disorder

Psychiatry Research, 2019 278, pp. 51-55

Lifetime prevalence of major depressive disorder (MDD) among a sample of adults in the United States has been reported as over 16%. Repetitive transcranial magnetic stimulation (rTMS) has become a treatment option for a subset of treatment-refractory patients with MDD. The reduction in medication utilization could reflect clinical improvement of the study population, and the absence of even greater reductions in utilization likely reflects the lack of clinical guidelines for antidepressant prescribing in the aftermath of rTMS treatment.

Click here to view abstract: <http://dx.doi.org/10.1016/j.psychres.2019.05.020>

Pagani, R., et al.

Twenty years of Lithium pharmacogenetics: A systematic review

Psychiatry Research, 2019 278, pp. 42-50

Lithium is among the best proven treatments for patients diagnosed with Bipolar Disorder, however response to Lithium appears to be considerably variable among individuals and it has been suggested that this inconstancy in Lithium response could be genetically determined. Despite some interesting preliminary findings, the pharmacogenetics of Lithium and the development of a specific pharmacogenetics test in bipolar disorder appears to be a field still in its infancy, even though the advent of genome-wide association studies holds particular promise for future studies, which should include larger samples.

Click here to view abstract: <http://dx.doi.org/10.1016/j.psychres.2019.05.036>

Rosso, G., et al.

Five-year follow-up of first-episode depression treated with psychodynamic psychotherapy or antidepressants

Psychiatry Research, 2019 275, pp. 27-30

The aim of this retrospective study was to evaluate the clinical course of patients who achieved remission from their first life-time major depressive episode after treatment with antidepressant (AD) therapy or brief dynamic therapy (BDT), a specific type of STPP, examining the recurrence rates during a 5-year treatment-free period. BDT may be more effective than AD pharmacotherapy in improving the long-term outcome of patients with a first major depressive episode; further studies comparing STPP and AD in terms of efficacy and cost-effectiveness are needed.

Click here to view abstract: <http://dx.doi.org/10.1016/j.psychres.2019.02.073>

Saguem, B. N., et al.

Affective temperaments and their relationships with life events in bipolar patients and siblings: a controlled study

Journal of Mental Health, 2019 pp. 1-7

Evaluate affective temperaments in bipolar patients, healthy siblings and controls, and address the relationship between affective temperaments and recent life events in these groups. Cyclothymic and hyperthymic temperaments were associated with bipolarity in patients and they could be characteristic traits of healthy siblings. Anxious/cyclothymic temperament might at least partially explain the high number of recent life events in bipolar patients and in siblings.

Click here to view abstract: <http://dx.doi.org/10.1080/09638237.2019.1608924>

Schatzberg, A. F.

Scientific issues relevant to improving the diagnosis, risk assessment, and treatment of major depression

The American Journal of Psychiatry, 2019 176, 5, pp. 342-347

Over the past two decades, research in the biology and treatment of major depression has led to advances in our understanding of the biology of the disorder and to the development of novel treatments. While progress has been made, a number of key issues have emerged regarding diagnosis of the disorder and how we develop and test new therapies. These issues need to be addressed to avoid the field's embarking on trails of research and treatment development that could actually mislead or misdirect our efforts to develop better diagnostic tools and more effective treatments.

Click here to view abstract: <http://dx.doi.org/10.1176/appi.ajp.2019.19030273>

Segal, Z. V., et al.

Practice of therapy acquired regulatory skills and depressive relapse/ recurrence prophylaxis following cognitive therapy or mindfulness based cognitive therapy

Journal of Consulting and Clinical Psychology, 2019 87, 2, pp. 161-170

To investigate whether usage of treatment-acquired regulatory skills is associated with prevention of depressive relapse/recurrence. Preventing major depressive disorder relapse/recurrence may depend upon developing DC in addition to managing residual symptoms. Following the acquisition of therapy skills during maintenance psychotherapies, DC is strengthened by continued skill utilization beyond treatment termination.

Click here to view abstract: <http://dx.doi.org/10.1037/ccp0000351>

Soric, M. M., et al.

Prevalence and predictors of benzodiazepine monotherapy in patients with depression: A national cross-sectional study

The Journal of Clinical Psychiatry, 2019 80, 4

Depression guidelines discourage benzodiazepine monotherapy and limit use to short-term adjunctive therapy with antidepressants; however, patients with depression continue to receive benzodiazepine monotherapy. The prevalence and predictors of this prescribing pattern have not been described previously and are warranted to assist clinicians in identifying patients at highest risk of receiving benzodiazepine monotherapy. Benzodiazepine monotherapy is utilized in nearly 1 in 10 patients treated for depression. Adults aged 45 to 65 years, patients prescribed opioids, patients seen by primary care providers, and those with underlying anxiety, epilepsy, or pulmonary disorders are at highest risk.

Click here to view abstract: <http://dx.doi.org/10.4088/JCP.18m12588>

Tundo, A., et al.

Pramipexole in the treatment of unipolar and bipolar depression. A systematic review and meta-analysis

Acta Psychiatrica Scandinavica, 2019

Several depressed patients do not respond to traditional antidepressants. Our aim was to systematically review the effectiveness and safety of pramipexole in unipolar and bipolar depression. Our study found some evidence for an effect of pramipexole for the treatment of major depressive episodes.

Click here to view abstract: <http://dx.doi.org/10.1111/acps.13055>

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Uncovering neurodevelopmental features in bipolar affective disorder

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Click here to view abstract: <http://dx.doi.org/10.1192/bjp.2019.117>

Van Vleet, T., et al.

Biases in processing of mood-congruent facial expressions in depression

Psychiatry Research, 2019 275, pp. 143-148

Cognitive models of depression suggest that depressed individuals exhibit a tendency to attribute negative meaning to neutral stimuli, and enhanced processing of mood-congruent stimuli. However, evidence thus far has been inconsistent. In this study, we sought to identify both differential interpretation of neutral information as well as emotion processing biases associated with depression. We found that overall success rate and reaction time on the Emotion Matcher task did not differ as a function of severity of depression. However, more depressed participants had significantly worse performance when presented with sad-neutral face pairs, as well as increased reaction times to happy-happy pairs.

Click here to view abstract: <http://dx.doi.org/10.1016/j.psychres.2019.02.076>

Wen, Y., et al.

eQTLs weighted genetic correlation analysis detected brain region differences in genetic correlations for complex psychiatric disorders

Schizophrenia Bulletin, 2019 45, 3, pp. 709-715

Psychiatric disorders are usually caused by the dysfunction of various brain regions. Incorporating the genetic information of brain regions into correlation analysis can provide novel clues for pathogenetic and therapeutic studies of psychiatric disorders. This study provides new clues for elucidating the mechanism of genetic correlations among various psychiatric disorders.

Click here to view abstract: <https://dx.doi.org/10.1093/schbul/sby080>

Zainal, N. H. and Newman, M. G.

Relation between cognitive and behavioral strategies and future change in common mental health problems across 18 years

Journal of Abnormal Psychology, 2019 128, 4, pp. 295-304

Major depressive disorder (MDD), generalized anxiety disorder (GAD), and panic disorder (PD), constitute common mental disorders that may have chronic and disabling courses. Using bivariate latent difference score models, this study aimed to test the dynamic trajectories between disorder counts and each CBS across 18 years. The reciprocal, bidirectional associations between specific CBS (goal persistence, positive reappraisal) and disorder counts support both vulnerability and scar models of depression and anxiety.

Click here to view abstract: <http://dx.doi.org/10.1037/abn0000428>

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Neurotic, stress related and somatoform disorders

Andersson, G., et al.

Internet interventions for adults with anxiety and mood disorders: A narrative umbrella review of recent meta-analyses

Canadian Journal of Psychiatry, 2019

Internet-delivered cognitive behaviour therapy (ICBT) has existed for 20 years and there are now several controlled trials for a range of problems. In this paper, we focused on recent meta-analytic reviews of the literature and found moderate to large effects reported for panic disorder, social anxiety disorder, generalized anxiety disorder, posttraumatic stress disorder, and major depression. The growing number of meta-analytic reviews of studies now suggests that ICBT works and can be as effective as face-to-face therapy.

Click here to view abstract: <http://dx.doi.org/10.1177/0706743719839381>

Carmi, L., et al.

Efficacy and safety of deep transcranial magnetic stimulation for obsessive-compulsive disorder: A prospective multicenter randomized double-blind placebo-controlled trial

The American Journal of Psychiatry, 2019

Obsessive-compulsive disorder (OCD) is a chronic and disabling condition that often responds unsatisfactorily to pharmacological and psychological treatments. Converging evidence suggests a dysfunction of the cortical-striatal-thalamic-cortical circuit in OCD, and a previous feasibility study indicated beneficial effects of deep transcranial magnetic stimulation (dTMS) targeting the medial prefrontal cortex and the anterior cingulate cortex. High-frequency dTMS over the medial prefrontal cortex and anterior cingulate cortex significantly improved OCD symptoms and may be considered as a potential intervention for patients who do not respond adequately to pharmacological and psychological interventions.

Click here to view abstract: <http://dx.doi.org/10.1176/appi.ajp.2019.18101180>

Craske, M. G., et al.

Positive affect treatment for depression and anxiety: A randomized clinical trial for a core feature of anhedonia

Journal of Consulting and Clinical Psychology, 2019 87, 5, pp. 457-471

Loss of pleasure or interest in activities (i.e., anhedonia) is a risk factor for suicidality, treatment nonresponse, and relapse. Extant treatments that focus on reducing negative affect have limited effects upon positive affect (a core feature of anhedonia). We investigated whether a novel intervention aimed at increasing reward sensitivity was more efficacious for positive affect than a cognitive-behavior treatment aimed at reducing threat sensitivity, in individuals with clinically severe symptoms of depression or anxiety, and functional impairment. Compared to NAT, PAT demonstrated better outcomes (at 6MFU) on positive affect, depression, anxiety, stress, and suicidal ideation, for patients with symptomatic pretreatment levels of these outcomes.

Click here to view abstract: <http://dx.doi.org/10.1037/ccp0000396>

Elsley, J. W. B., et al.

Encoding or consolidation? The effects of pre- and post-learning propranolol on the impact of an emotional scene

Journal of Behavior Therapy and Experimental Psychiatry, 2019

Researchers have conceived of post-traumatic stress disorder (PTSD) as a disorder of memory, and proposed that blocking the impact of stress-related noradrenaline release in the aftermath of trauma may be a way of preventing the 'over-consolidation' of trauma-related memories. In this study, we aimed to assess the impact of both pre- and post-learning propranolol on emotional and declarative memory for an emotional scene, using the 'trauma film paradigm'. An impact of propranolol on encoding could raise difficulties in interpretation when only pre-encoding propranolol is used to make inferences about consolidation.

Click here to view abstract: <http://dx.doi.org/10.1016/j.jbtep.2019.101480>

Erfanian, M., et al.

Misophonia and comorbid psychiatric symptoms: a preliminary study of clinical findings

Nordic Journal of Psychiatry, 2019 pp. 1-10

This study identifies the prevalence of psychiatric symptoms in misophonia sufferers, the association between severity of misophonia and psychiatric symptoms, and the association between misophonia severity and gender. Our findings highlight the importance of recognizing psychiatric comorbidity among misophonia sufferers. The presence of these varying psychiatric disorders' features in individuals with misophonia suggests that while misophonia has unique clinical characteristics with an underlying neurophysiological mechanism, may be associated with psychiatric symptoms. Therefore, when assessing individuals with misophonia symptoms, it is important to screen for psychiatric symptoms. This will assist researchers and clinicians to better understand the nature of the symptoms and how they may be interacting and ultimately allocating the most effective therapeutic strategies.

Click here to view abstract: <http://dx.doi.org/10.1080/08039488.2019.1609086>

Hansen, B., et al.

The Bergen 4-day treatment for OCD: four years follow-up of concentrated ERP in a clinical mental health setting

Cognitive Behaviour Therapy, 2019 48, 2, pp. 89-105

The present paper presents a four year follow-up of patients with obsessive-compulsive disorder treated by the Bergen 4-day treatment (B4DT), a concentrated form of exposure and response prevention (ERP). A comparison with previously published effectiveness studies of ERP indicated that the 4-day treatment yielded significantly higher proportions of remission at post-treatment and recovery at follow-up, as well as within-group effect size on the Y-BOCS.

Click here to view abstract: <http://dx.doi.org/10.1080/16506073.2018.1478447>

Malivoire, B. L., et al.

Look before you leap: the role of negative urgency in appraisals of ambiguous and unambiguous scenarios in individuals high in generalized anxiety disorder symptoms

Cognitive Behaviour Therapy, 2019 48, 3, pp. 217-240

The aim of the present study was to examine the relationship between NU and interpretation bias in individuals high in GAD symptoms (N = 111). The findings suggest that greater NU may have a role in the tendency for individuals high in GAD symptoms to make threatening interpretations in response to ambiguous scenarios, overtly threatening situations, and situations without indication of threat or danger.

Click here to view abstract: <http://dx.doi.org/10.1080/16506073.2018.1508247>

Mason, J. E., et al.

Relationships between health behaviors, posttraumatic stress disorder, and comorbid general anxiety and depression

Cognitive Behaviour Therapy, 2019 48, 3, pp. 184-199

Poor health outcomes associated with posttraumatic stress disorder (PTSD) may reflect engagement in unhealthy behaviors that increase morbidity risk and disengagement in healthy behaviors that decrease morbidity risk. Our results indicate that PTSD and comorbid generalized anxiety and depression symptoms were differentially associated with specific health constructs. Specifically, sedentary behavior and poor sleep quality were associated with PTSD, whereas low physical activity, poor sleep quality, and unhealthy eating habits were associated with depression.

Click here to view abstract: <http://dx.doi.org/10.1080/16506073.2018.1498119>

Moritz, S., et al.

"Phobie a deux" and other reasons why clinicians do not apply exposure with response prevention in patients with obsessive-compulsive disorder

Cognitive Behaviour Therapy, 2019 48, 2, pp. 162-176

Meta-analyses suggest that exposure with response prevention (ERP) is the most efficacious treatment for obsessive-compulsive disorder (OCD) and treatment guidelines for the disorder accordingly recommend ERP. Despite this, many therapists, including those with a cognitive-behavioral therapeutic background, do not perform ERP in patients with OCD.

Click here to view abstract: <http://dx.doi.org/10.1080/16506073.2018.1494750>

Niimura, J., et al.

Effectiveness of 1-day trauma-informed care training programme on attitudes in psychiatric hospitals: A pre-post study

International Journal of Mental Health Nursing, 2019

Many patients in mental health settings are likely to have histories of interpersonal traumatic experiences. Mental health providers are recommended to adopt trauma-informed care (TIC) to ensure sensitivity and responsiveness to the impact of trauma on patients. The aim of the study was to evaluate the effects of a TIC training programme on attitudes towards TIC in mental health professionals. These results suggested that this brief TIC training programme improved attitudes towards TIC practice significantly.

Click here to view abstract: <http://dx.doi.org/10.1111/inm.12603>

Wheeler, A. C., et al.

Anxiety-associated and separation distress-associated behaviours in Angelman syndrome

Journal of Intellectual Disability Research, 2019

Anxiety is considered a 'frequent' feature in the clinical criteria for Angelman syndrome; however, the nature and severity of anxiety symptoms have not been well characterised in this population. Anxiety behaviours, especially in response to separation from a preferred caregiver, have been described clinically but have not yet been explored empirically. Anxiety concerns, especially separation distress, are common in individuals with Angelman syndrome and represent an area of unmet need for this population.

Click here to view abstract: <http://dx.doi.org/10.1111/jir.12635>

Zainal, N. H. and Newman, M. G.

Relation between cognitive and behavioral strategies and future change in common mental health problems across 18 years

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Click here to view abstract: <http://dx.doi.org/10.1037/abn0000428>

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Behavioural syndromes associated with physiological disturbances and physical factors

Boyle, S.

How should the law determine capacity to refuse treatment for anorexia?

International Journal of Law and Psychiatry, 2019 64, pp. 250-259

This article critically assesses the way a certain court has determined the capacity of a person diagnosed with anorexia to refuse medical treatment. The result is a procedure in which the anorexic patient has no voice, and an outcome against which he or she has no effective legal recourse.

Click here to view abstract: <http://dx.doi.org/10.1016/j.ijlp.2019.05.001>

Erfanian, M., et al.

Misophonia and comorbid psychiatric symptoms: a preliminary study of clinical findings

Nordic Journal of Psychiatry, 2019 pp. 1-10

This study identifies the prevalence of psychiatric symptoms in misophonia sufferers, the association between severity of misophonia and psychiatric symptoms, and the association between misophonia severity and gender. Our findings highlight the importance of recognizing psychiatric comorbidity among misophonia sufferers. The presence of these varying psychiatric disorders' features in individuals with misophonia suggests that while misophonia has unique clinical characteristics with an underlying neurophysiological mechanism, may be associated with psychiatric symptoms. Therefore, when assessing individuals with misophonia symptoms, it is important to screen for psychiatric symptoms. This will assist researchers and clinicians to better understand the nature of the symptoms and how they may be interacting and ultimately allocating the most effective therapeutic strategies.

Click here to view abstract: <http://dx.doi.org/10.1080/08039488.2019.1609086>

Kurdyak, P., et al.

Identifying individuals with eating disorders using health administrative data

Canadian Journal of Psychiatry, 2019

Eating disorders are common and have a high public health burden. However, existing clinically relevant data sources are scarce, limiting the capacity to accurately measure the burden of eating disorders. This study tests the feasibility of generating a large clinically relevant cohort of individuals with eating disorders using health administrative data. It is feasible to use health administrative data to measure the clinically relevant burden of eating disorders. The cohorts differed significantly in the eating disorder diagnostic composition. Eating disorders have a high burden, but poor data availability has resulted in fewer public health-related eating disorders studies in comparison to other mental disorders. The use of administrative data can address this evidence gap.

Click here to view abstract: <http://dx.doi.org/10.1177/0706743719844183>

Lyons, G., et al.

Disappearing in a female world: Men's experiences of having an eating disorder (ed) and how it impacts their lives

Issues in Mental Health Nursing, 2019

This study focused on the lived experiences of men diagnosed with an ED, and its impact on 'everyday' aspects of their lives. Narratives highlight the need for further research if men are to receive appropriate mental health care and better understanding and acceptance on the part of society, service providers, employers and men themselves.

Click here to view abstract: <http://dx.doi.org/10.1080/01612840.2019.1576815>

Sheaves, B., et al.

Cognitive behavioural therapy for nightmares for patients with persecutory delusions (Nites): An assessor-blind, pilot randomized controlled trial

Canadian Journal of Psychiatry, 2019

Nightmares are relatively common in patients experiencing psychosis but rarely assessed or treated. Nightmares may maintain persecutory delusions by portraying fears in sensory-rich detail. We tested the potential benefits of imagery-focused cognitive behavioural therapy (CBT) for nightmares on nightmare severity and persecutory delusions. CBT for nightmares is feasible and may be efficacious for treating nightmares and comorbid insomnia for patients with persecutory delusions. It shows promise on paranoia but potentially not on suicidal ideation.

Click here to view abstract: <http://dx.doi.org/10.1177/0706743719847422>

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Disorders of adult personality and behaviour

Cooke, D. J. and Sellbom, M.

An examination of Psychopathy Checklist-Revised latent factor structure via exploratory structural equation modeling

Psychological Assessment, 2019 31, 5, pp. 581-591

The Psychopathy Checklist-Revised (PCL-R; Hare, 1991, 2003) is widely used in clinical and forensic practice. Its latent factor structure has been subject to debate and controversy for almost 40 years. The 3-factor model displayed stability across both analytic methods, with the latent factor correlations being smaller in the ESEM analysis. The 4-factor model displayed less stability across analytic methods, with a major crime factor accounting for a large proportion of variance in numerous items. Comprehensive Assessment of Psychopathic Personality domain ratings were used as external criteria. The concurrent validity of the 3-factor ESEM model was conceptually clearer than that for the equivalent 4-factor model. The application of ESEM may provide greater clarity to the debate regarding the latent structure of the PCL-R.

Click here to view abstract: <http://dx.doi.org/10.1037/pas0000676>

Flynn, S., et al.

The personality disorder patient pathway: Service user and clinical perspectives

Personality and Mental Health, 2019

There have been recent policy developments and research into care provision for service users with personality disorder. However, few studies have focused on service user and staff perspectives on how services could be improved. The care pathway for individuals with personality disorder is unclear to clinicians and service users, and elements of the pathway are disjointed and not working as effectively as they could. Guidelines recommended by National Institute for Health and Care Excellence are not being followed. Specialist psychological interventions should be available to ensure consistent and stable care provision.

Click here to view abstract: <http://dx.doi.org/10.1002/pmh.1444>

Hansen, S. J., et al.

Mental health professionals' perceived clinical utility of the ICD-10 vs. ICD-11 classification of personality disorders

Personality and Mental Health, 2019 13, 2, pp. 84-95

The ICD-11 classification of personality disorders (PDs) has adopted a dimensional approach which includes three levels of severity (mild, moderate and severe) with the option of specifying five trait qualifiers (negative affectivity, detachment, dissociality, disinhibition and anankastia) and one borderline pattern qualifier. This study examined mental health professionals' perceived clinical utility of the ICD-11 PD framework compared with the ICD-10 categorical PD framework. This study provided initial evidence that mental health professionals perceive the ICD-11 PD classification as slightly more useful for clinical practice than the ICD-10 classification.

Click here to view abstract: <http://dx.doi.org/10.1002/pmh.1442>

Hope, N. H. and Chapman, A. L.

Difficulties regulating emotions mediates the associations of parental psychological control and emotion invalidation with borderline personality features

Personality Disorders, 2019 10, 3, pp. 267-274

Extant research has supported a connection between socialization in childhood and difficulties regulating emotions. The present study investigated the impact of socialization factors related to emotions, parental autonomy support, parental psychological control, and childhood trauma on BPD features in a nonclinical young adult sample (N = 357). We found that recalled experiences of childhood trauma, emotional magnification of negative emotions, neglect of negative emotions, and parental psychological control were positively associated with BPD features. Difficulties regulating emotions mediated the relationships of childhood emotion socialization factors and psychological control with BPD features.

Click here to view abstract: <http://dx.doi.org/10.1037/per0000316>

Hutsebaut, J., et al.

Managing borderline personality disorder from a life course perspective: Clinical staging and health management

Personality Disorders, 2019

In this article, we present a life course perspective on borderline personality disorder (BPD), based on clinical staging (conditional stimulus [CS]) and health management (HM). Combining clinical staging and HM could provide a more effective and efficient framework for organizing mental health care for BPD.

Click here to view abstract: <http://dx.doi.org/10.1037/per0000341>

Lamont, E. and Dickens, G. L.

Mental health services, care provision, and professional support for people diagnosed with borderline personality disorder: systematic review of service-user, family, and carer perspectives

Journal of Mental Health, 2019 pp. 1-15

To critically synthesise evidence of service-users' and families' subjective experience of mental health care for borderline personality disorder. Service-users and families/carers should expect to receive high quality, fair and equal care. In light of current evidence, a cultural shift towards more relational, person centred and recovery-focused care could improve experiences.

Click here to view abstract: <http://dx.doi.org/10.1080/09638237.2019.1608923>

Muñoz-Negro, J. E., et al.

Paranoia and risk of personality disorder in the general population

Personality and Mental Health, 2019 13, 2, pp. 107-116

We hypothesized that paranoia is associated with personality disorder (PD) in the general population. Paranoia seems to either augment the risk for, or be part of, PD/BPD.

Click here to view abstract: <http://dx.doi.org/10.1002/pmh.1443>

Orbons, I. M. J., et al.

Continuity between DSM-5 section II and III personality disorders in a Dutch clinical sample

Journal of Personality Assessment, 2019 101, 3, pp. 274-283

The goal of this study was to evaluate the continuity across the Section II personality disorders (PDs) and the proposed Section III model of PDs in the Diagnostic and Statistical Manual of Mental Disorders (5th ed. [DSM-5]; American Psychiatric Association, 2013a). The results provided some support for the validity of the PID-5 and the DSM-5 Section III Alternative Model, although analyses did not show a perfect match. Both at the trait level and the domain level, analyses showed mixed evidence of significant relationships between the PID-5 trait facets and domains with the traditional DSM-IV PDs.

Click here to view abstract: <http://dx.doi.org/10.1080/00223891.2018.1467427>

Pucker, H. E., et al.

Description and prediction of social isolation in borderline patients over 20 years of prospective follow-up

Personality Disorders, 2019

Past social network analysis studies have indicated that patients with borderline personality disorder (BPD) are significantly more socially isolated than comparison subjects. The present study aimed to build on the findings of these cross-sectional social network analysis studies. It was found that borderline patients were significantly more likely to be socially isolated than personality-disordered comparison subjects over time. Additionally, among borderline subjects, three variables were found to be significant multivariate predictors of social isolation: lower childhood competence, lower trait extraversion, and lower trait agreeableness. Taken together, these results suggest that social isolation remains an unfortunate outcome in a sizable minority of borderline patients over time. These results also indicate that isolation is strongly associated with enduring aspects of competence and temperament in patients with BPD.

Click here to view abstract: <http://dx.doi.org/10.1037/per0000337>

ter Haar-Pomp, L., et al.

The impact of forced forensic psychiatric confinement on composition and structure in the personal networks of personality-disordered forensic psychiatric patients

Journal of Forensic Psychiatry and Psychology, 2019 30, 1, pp. 53-75

This study explored to what extent the composition and structure of personal networks of personality-disordered forensic psychiatric patients changed before and after forced confinement in a forensic psychiatric centre. No changes were observed in the patients' companionship, practical and emotional support networks. During forensic psychiatric treatment, patients reported some new relationships, especially with persons outside the forensic psychiatric centre.

Click here to view abstract: <http://dx.doi.org/10.1080/14789949.2018.1467947>

Tillem, S., et al.

Alpha response reveals attention abnormalities in psychopathy

Personality Disorders, 2019 10, 3, pp. 291-296

Decades of research indicate that individuals higher on psychopathy exhibit abnormal allocation of attention during goal pursuit. However, the manner in which attention is allocated to goal-relevant information and the downstream neurocognitive consequences of this attention abnormality remain unclear. The present study addresses this gap by examining the relationship between psychopathy and the allocation of attention during an electroencephalogram (EEG)-based continuous performance task in a sample of 61 adolescents and young adults. Psychopathy appears related to a unique pattern of attention allocation that prioritizes neural resources for goal-relevant information, resulting in alterations in the neural response for downstream cognitive functions.

Click here to view abstract: <http://dx.doi.org/10.1037/per0000314>

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Intellectual disability

Barak, S., et al.

The Game of Life soccer program: Effect on skills, physical fitness and mobility in persons with intellectual disability and autism spectrum disorder

Journal of Applied Research in Intellectual Disabilities, 2019

Soccer is the world's most popular sport. The present authors evaluated the effect of the Game of Life (GOL) soccer initiative on soccer skills, fitness and mobility of adults with intellectual disability (ID) and autism spectrum disorder (ASD). The findings indicated differences in entry-level performance and training impact between the two groups. This should be considered when developing training programmes for soccer players.

Click here to view abstract: <http://dx.doi.org/10.1111/jar.12620>

Edge, D. and Ewing, L.

The predictive validity of the MoCA-LD for assessing mental capacity in adults with intellectual disabilities

Journal of Applied Research in Intellectual Disabilities, 2019

Mental capacity assessments currently rely on subjective opinion. Researchers have yet to explore the association between key cognitive functions of rational decision making and mental capacity classifications for people with intellectual disabilities. This study offers a foundation for more objective approaches to mental capacity assessment. This demonstrates that assessments of cognitive ability can yield information that is helpful for mental capacity evaluations.

Click here to view abstract: <http://dx.doi.org/10.1111/jar.12621>

Hassan, N. M., et al.

Effectiveness of interventions to increase physical activity in individuals with intellectual disabilities: a systematic review of randomised controlled trials

Journal of Intellectual Disability Research, 2019 63, 2, pp. 168-191

People with intellectual disabilities (ID) often do not meet recommended guidelines for physical activity. The aim of this study was to systematically review available evidence that evaluated the effectiveness of interventions to increase physical activity in individuals with ID. There is inconsistent evidence of the effects of interventions for improving physical activity levels in individuals with ID. A progressive resistance training programme was found to maintain physical activity levels in adolescents with Down syndrome, while a multicomponent diet and physical activity programme and a physical activity and fitness programme were found to improve physical activity levels in adults with ID.

Click here to view abstract: <http://dx.doi.org/10.1111/jir.12562>

McGlinchey, E., et al.

Examining the effects of computerised cognitive training on levels of executive function in adults with Down syndrome

Journal of Intellectual Disability Research, 2019

Individuals with Down syndrome (DS) are at much greater risk of developing Alzheimer's disease, and one of the early clinical symptoms of Alzheimer's disease is executive dysfunction. In the general population, cognitive training has shown some promising results in relation to maintaining or improving cognitive processes. There is currently a gap in the literature in relation to cognitive training for adults with DS. This study showed that, while it has not been previously an area of focus, individuals with DS can complete a computerised cognitive training programme. Furthermore, the results were promising with significant improvements found in neuropsychological assessments of executive function.

Click here to view abstract: <http://dx.doi.org/10.1111/jir.12626>

Nancarrow, T., et al.

Bespoke stomp training for learning disability teams—does it work?

British Journal of Learning Disabilities, 2019

Intellectual disability (ID) is associated with polypharmacy particularly off-label psychotropics for “challenging behaviour.” NHS England introduced the “stopping over medication of people with a learning disability (LD), autism or both” (STOMP) initiative. The impact of delivering bespoke STOMP training was evaluated. We recommend semi-structured STOMP training developed locally with national underpinnings for all specialist ID teams, particularly focussed on front-line staff directly involved in the management of challenging behaviour.

Click here to view abstract: <http://dx.doi.org/10.1111/bld.12272>

Olivier-Pijpers, V. C., et al.

Influence of the organizational environment on challenging behaviour in people with intellectual disabilities: Professionals' views

Journal of Applied Research in Intellectual Disabilities, 2019 32, 3, pp. 610-621

We examined the influence of the organizational environment on challenging behaviour in people with intellectual disabilities to increase understanding of the quality of support services for people with intellectual disabilities. The creation of a supportive organizational environment for staff, who in turn can provide quality support services to residents with demanding care needs, was found to prevent challenging behaviour in people with intellectual disabilities.

Click here to view abstract: <http://dx.doi.org/10.1111/jar.12555>

Patterson, C. W., et al.

Third-wave therapies and adults with intellectual disabilities: A systematic review

Journal of Applied Research in Intellectual Disabilities, 2019

Third-wave therapies appear to produce positive outcomes for people without intellectual disabilities. This systematic review aimed to establish which third-wave therapies have been adapted for adults with intellectual disabilities and whether they produced positive outcomes. Evidence indicated that third-wave therapies improved mental health symptoms for some and improved challenging/offending behaviour, smoking and mindfulness/acceptance skills for most. These findings must be interpreted with caution due to the low methodological quality of included studies. Future research should build on the current evidence base, using scientifically rigorous designs and standardized measures.

Click here to view abstract: <http://dx.doi.org/10.1111/jar.12619>

Schaap, F. D., et al.

Effects of Dementia Care Mapping on job satisfaction and caring skills of staff caring for older people with intellectual disabilities: A quasi-experimental study

Journal of Applied Research in Intellectual Disabilities, 2019

The ageing of people with intellectual disabilities, involving consequences like dementia, creates a need for methods to support care staff. One promising method is Dementia Care Mapping (DCM). This study examined the effect of DCM on job satisfaction and care skills of ID-care staff. Dementia Care Mapping does not increase job satisfaction and care skills of staff caring for older people with intellectual disabilities. This result differs from previous findings and deserves further study.

Click here to view abstract: <http://dx.doi.org/10.1111/jar.12615>

Schepens, H. R. M. M., et al.

How to improve the quality of life of elderly people with intellectual disability: A systematic literature review of support strategies

Journal of Applied Research in Intellectual Disabilities, 2019 32, 3, pp. 483-521

The increased life expectancy of people with intellectual disability intensifies the need for age-specific support. Research on effects of support strategies on quality of life (QoL) of these people remains scattered. The studies indicated the importance of funding, provision and organization of services/personnel, education, and cooperation among different support systems. The provision of good housing or activities, support when these provisions change, provision of (mental) health care, dementia care and end-of-life care, life story work, future planning and support for (I)ADLs are crucial.

Click here to view abstract: <http://dx.doi.org/10.1111/jar.12559>

Ward, L. M., et al.

Oral health of adults with intellectual disabilities: a systematic review

Journal of Intellectual Disability Research, 2019

There have been several past reports that adults with intellectual disabilities experience poor oral health (tooth loss, periodontal health and untreated dental caries). Loss of a functional dentition has serious consequences, including problems with chewing, swallowing, nutrition, speech, temporomandibular joint osteoarthritis and pain and systemic health conditions. In recent years, social care provision for adults has changed, with deinstitutionalisation and home-based personalised care now being the typical provision in high income countries. Hence, oral health inequalities might be reducing. However, there is limited recent evidence-synthesis on the topic. We aimed to address this. Despite reports in the past of poor oral health amongst adults with intellectual disabilities, and despite it being preventable, there remains a high burden of poor oral health. This highlights the need to raise awareness, and for policies on effective daily oral care, and appropriate service provision.

Click here to view abstract: <http://dx.doi.org/10.1111/jir.12632>

Willems, M., et al.

Exploration of suitable behaviour change techniques for lifestyle change in individuals with mild intellectual disabilities: A Delphi study

Journal of Applied Research in Intellectual Disabilities, 2019 32, 3, pp. 543-557

Promotion of a healthy lifestyle for individuals with mild intellectual disabilities is important. However, the suitability of behaviour change techniques (BCTs) for these individuals is still unclear. Regardless of their position and education level, health professionals reached consensus about the suitability of BCTs for individuals with mild intellectual disabilities. Increased use of these BCTs could result in more effective promotion of a healthy lifestyle.

Click here to view abstract: <http://dx.doi.org/10.1111/jar.12548>

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Disorders of psychological development

Barak, S., et al.

The Game of Life soccer program: Effect on skills, physical fitness and mobility in persons with intellectual disability and autism spectrum disorder

Journal of Applied Research in Intellectual Disabilities, 2019

Soccer is the world's most popular sport. The present authors evaluated the effect of the Game of Life (GOL) soccer initiative on soccer skills, fitness and mobility of adults with intellectual disability (ID) and autism spectrum disorder (ASD). The findings indicated differences in entry-level performance and training impact between the two groups. This should be considered when developing training programmes for soccer players.

Click here to view abstract: <http://dx.doi.org/10.1111/jar.12620>

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Behavioural and emotional disorders with onset usually occurring in childhood and adolescence

Houtepen, J. A. B. M., et al.

Social support, attachment and externalizing behavior in forensic patients with attention-deficit hyperactivity disorder

International Journal of Law and Psychiatry, 2019 64, pp. 106-116

This study was designed to provide more insight into the relationship between social support and externalizing behavior in forensic patients with ADHD. Analyses of variance showed that forensic patients with ADHD had higher levels of externalizing behaviors and insecure attachment, and lower levels of secure attachment compared to both healthy and at risk controls. Multivariate regression analyses showed that social support was not associated with any of the externalizing behaviors, after accounting for attachment. In contrast, insecure attachment was associated with higher levels of all externalizing behaviors examined.

Click here to view abstract: <http://dx.doi.org/10.1016/j.ijlp.2019.02.008>

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Unspecified mental disorder

Bhavsar, V., et al.

Clozapine treatment and offending: A within-subject study of patients with psychotic disorders in Sweden

Schizophrenia Bulletin, 2019

We aimed to assess the effect of clozapine treatment on the rate of violent and nonviolent offending. There was a statistically greater rate reduction effect on violent offences for clozapine than olanzapine (RR for interaction: 4.84, 95% CI: 1.56, 14.86, P = .002). In patients with psychotic disorders, clozapine treatment is associated with a lower rate of violent offending compared to olanzapine.

Click here to view abstract: <http://dx.doi.org/10.1093/schbul/sbz055>

Byrne, G. and Ni Ghrada, A.

The application and adoption of four 'third wave' psychotherapies for mental health difficulties and aggression within correctional and forensic settings: A systematic review

Aggression and Violent Behavior, 2019 46, pp. 45-55

This review, using PRISMA guidelines, reviewed four third wave therapies, Acceptance and Commitment Therapy (ACT), Compassion Focused Therapy (CFT), Metacognitive Therapy (MCT) and Functional Analytic Psychotherapy (FAP) and their respective effectiveness in addressing psychological difficulties and aggression for those incarcerated in a number of forensic settings. ACT shows some potential promise as a treatment with a prisoner population but the general lack of methodologically sound studies greatly limits any conclusions that can be made. At present other treatments such as Cognitive Behavioural Therapy (CBT) and other third wave therapies, most notably, Dialectical Behaviour Therapy (DBT) have accrued more evidence as a result of greater amount of research.

Click here to view abstract: <http://dx.doi.org/10.1016/j.avb.2019.01.001>

Curley, A., et al.

Categorical mental capacity for treatment decisions among psychiatry inpatients in Ireland

International Journal of Law and Psychiatry, 2019 64, pp. 53-59

This study aimed to assess mental capacity for treatment decisions among psychiatry inpatients in Ireland and explore the relationship, if any, between mental capacity and various demographics and clinical variables. We assessed mental capacity for treatment decisions in 215 psychiatry inpatients in four psychiatry admission units. The relatively high rate of "partial mental capacity" identified in our work suggests that decision-making supports are likely to be of substantial importance in assisting psychiatry inpatients making decisions about treatment, especially involuntary inpatients whose mental capacity is especially likely to be impaired.

Click here to view abstract: <http://dx.doi.org/10.1016/j.ijlp.2019.02.001>

Happell, B., et al.

Developing an evidence-based specialist nursing role to improve the physical health care of people with mental illness

Issues in Mental Health Nursing, 2019 pp. 1-7

The substantial physical health disadvantage experienced by people diagnosed with mental illness is now identified in a growing body of research evidence. To date increased knowledge of the problem has not resulted in obvious and sustained changes. The aim of this article is to introduce the role of the Physical Health Nurse Consultant as a potential strategy. The specialist nursing role presented in this article, subject to the comprehensive evaluation proposed, could become an integral component of a comprehensive approach to addressing physical health inequities in people with mental illness.

Click here to view abstract: <http://dx.doi.org/10.1080/01612840.2019.1584655>

Kasteridis, P., et al.

Association between antipsychotic polypharmacy and outcomes for people with serious mental illness in England

Psychiatric Services, 2019

Although U.K. and international guidelines recommend monotherapy, antipsychotic polypharmacy among patients with serious mental illness is common in clinical practice. However, empirical evidence on its effectiveness is scarce. Therefore, the authors estimated the effectiveness of antipsychotic polypharmacy relative to monotherapy in terms of health care utilization and mortality. The study results support current guidelines for antipsychotic monotherapy in routine clinical practice.

Click here to view abstract: <http://dx.doi.org/10.1176/appi.ps.201800504>

Macdonald, A., et al.

Continuity of care and clinical outcomes in the community for people with severe mental illness

The British Journal of Psychiatry, 2019 214, 5, pp. 273-278

We set out to examine continuity of care in people with schizophrenia, and to relate this to demographic variables and clinical outcomes. There is evidence of declining continuity of care in this 11-year study of people with schizophrenia, and of an independent effect of this on worse clinical outcomes. We suggest that this is related to reorganisation of services.

Click here to view abstract: <http://dx.doi.org/10.1192/bjp.2018.261>

Owen, G. S., et al.

Advance decision-making in mental health - Suggestions for legal reform in England and Wales

International Journal of Law and Psychiatry, 2019 64, pp. 162-177

This paper argues that existing English and Welsh mental health legislation (The Mental Health Act 1983 (MHA)) should be changed to make provision for advance decision-making (ADM) within statute and makes detailed recommendations as to what should constitute this statutory provision. It is argued that the introduction of mental health ADM into the MHA will provide clarity within what has become a confusing area and will enable and promote the development and realisation of ADM as a form of self-determination.

Click here to view abstract: <http://dx.doi.org/10.1016/j.ijlp.2019.02.002>

Rennick-Egglestone, S., et al.

Mental health recovery narratives and their impact on recipients: Systematic review and narrative synthesis

Canadian Journal of Psychiatry, 2019

Mental health recovery narratives are often shared in peer support work and antistigma campaigns. Internet technology provides access to an almost unlimited number of narratives, and yet little is known about how they affect recipients. The aim of this study was to develop a conceptual framework characterizing the impact of recovery narratives on recipients. Mental health recovery narratives can promote recovery. Recovery narratives might be useful for clients with limited access to peers and in online interventions targeted at reducing social isolation in rural or remote locations, but support is needed for the processing of the strong emotions that can arise. Caution is needed for use with specific clinical populations.

Click here to view abstract: <http://dx.doi.org/10.1177/0706743719846108>

Salehi, A., et al.

Bonding and bridging social capital in the recovery of severe mental illness: a synthesis of qualitative research

Journal of Mental Health, 2019 28, 3, pp. 331-339

Social networks are known to have a major influence on the recovery journey of people with severe mental illness (SMI). Aims: To understand the role of bonding and bridging social capital in the recovery process following SMI and to identify the barriers that prevent social networks from being mobilized. All those involved in the management of SMI must be aware of how social support networks hinder or contribute to recovery. People with SMI need opportunities to form reciprocal relationships and sustain supportive networks that can assist them to endure the challenges presented by SMI.

Click here to view abstract: <https://dx.doi.org/10.1080/09638237.2018.1466033>

Talley, R. M., et al.

Perspectives of individuals with serious mental illness on a reverse-located care model: A qualitative study

Psychiatric Services, 2019

Individuals with serious mental illness experience excess mortality related to general medical comorbidities. Reverse-integrated and reverse-located models of care have been proposed as a system-level solution. Such models integrate primary care services within behavioral health settings. Further understanding of consumer perspectives on these models is needed to ensure that models adequately engage consumers on the basis of their expressed needs. This qualitative study examined the perspectives of English- and Spanish-speaking individuals with serious mental illness on their current experience with the management of their medical care and on a hypothetical reverse-located care model. Study findings add to prior literature indicating support for assistance with management of general medical health in the mental health setting among individuals with serious mental illness. Key themes similar to those in previous studies generate hypotheses for further evaluation.

Click here to view abstract: <http://dx.doi.org/10.1176/appi.ps.201800480>

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Offences

Violent Crime and Aggression

Bhavsar, V., et al.

Clozapine treatment and offending: A within-subject study of patients with psychotic disorders in Sweden

Schizophrenia Bulletin, 2019

We aimed to assess the effect of clozapine treatment on the rate of violent and nonviolent offending. There was a statistically greater rate reduction effect on violent offences for clozapine than olanzapine (RR for interaction: 4.84, 95% CI: 1.56, 14.86, P = .002). In patients with psychotic disorders, clozapine treatment is associated with a lower rate of violent offending compared to olanzapine.

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Click here to view abstract: <http://dx.doi.org/10.1016/j.avb.2019.01.001>

Carr, W. A., et al.

Criminal thinking as a risk factor for psychiatric inpatient aggression

The International Journal of Forensic Mental Health, 2019

Thinking styles that predispose offenders to antisocial behavior have been shown to predict violence and aggression among inmates. This study explored this relationship among civil psychiatric inpatients. This study's results reinforce the importance of symptom-driven hostility to predicting inpatient aggression and violence, while highlighting the relatively minor role of specific criminal thinking styles in aggressive behavior among institutionalized psychiatric patients.

Click here to view abstract: <http://dx.doi.org/10.1080/14999013.2019.1604584>

Quinn, C., et al.

The use of restrictive practices on males released from prison and entering acute mental health services: A retrospective cross-sectional comparative study

Issues in Mental Health Nursing, 2019

This study aimed to determine restrictive practices use on males admitted involuntarily from prison compared to those admitted from the community. Those admitted from prison were no more likely to experience restrictive practices; but were more likely to have a co-existing diagnosis of alcohol/substance use or personality disorder, in addition to a primary diagnosis of psychotic illness. The proportionate use of restrictive practices despite such complex presentations is potentially indicative of the clinical use of effective alternative management strategies.

Click here to view abstract: <http://dx.doi.org/10.1080/01612840.2019.1572845>

Strand, S. J. M. and Selenius, H.

Assessing risk for inpatient physical violence in a female forensic psychiatric sample - comparing HCR-20v2 with the female additional manual to the HCR-20v2

Nordic Journal of Psychiatry, 2019 pp. 1-9

Out from the sparse literature on risk assessment for violence committed by women the Female Additional Manual (FAM) was developed to be a complement to the HCR-20v2. The aim of this study was to investigate and compare the psychometrics of the HCR-20v2 with and without the FAM on risk for inpatient physical violence for female forensic psychiatric patients. The results support the use of HCR-20v2 when assessing risk for inpatient violence for female forensic psychiatric patients, but with only some support for adding or changing risk factors according to the FAM.

Click here to view abstract: <http://dx.doi.org/10.1080/08039488.2019.1613447>

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Juvenile Offenders

Yonek, J. C., et al.

Factors associated with use of mental health and substance use treatment services by justice-involved youths

Psychiatric Services, 2019

Nonincarcerated (community-supervised) youths who are first-time offenders have high rates of mental and substance use disorders. However, little is known about their use of psychiatric services (mental health and substance use) or factors associated with service use. This study examined the prevalence, determinants, and barriers to service use among community-supervised youths. Results suggest a need for interventions to increase access to and engagement in psychiatric services for community-supervised youths and the importance of caregiver factors in designing such interventions.

Click here to view abstract: <http://dx.doi.org/10.1176/appi.ps.201800322>

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Treatment (including assessment)

Physical Health

Barak, S., et al.

The Game of Life soccer program: Effect on skills, physical fitness and mobility in persons with intellectual disability and autism spectrum disorder

Journal of Applied Research in Intellectual Disabilities, 2019

Soccer is the world's most popular sport. The present authors evaluated the effect of the Game of Life (GOL) soccer initiative on soccer skills, fitness and mobility of adults with intellectual disability (ID) and autism spectrum disorder (ASD). The findings indicated differences in entry-level performance and training impact between the two groups. This should be considered when developing training programmes for soccer players.

Click here to view abstract: <http://dx.doi.org/10.1111/jar.12620>

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Click here to view abstract: <http://dx.doi.org/10.1080/01612840.2019.1584655>

Hassan, N. M., et al.

Effectiveness of interventions to increase physical activity in individuals with intellectual disabilities: a systematic review of randomised controlled trials

Journal of Intellectual Disability Research, 2019 63, 2, pp. 168-191

People with intellectual disabilities (ID) often do not meet recommended guidelines for physical activity. The aim of this study was to systematically review available evidence that evaluated the effectiveness of interventions to increase physical activity in individuals with ID. There is inconsistent evidence of the effects of interventions for improving physical activity levels in individuals with ID. A progressive resistance training programme was found to maintain physical activity levels in adolescents with Down syndrome, while a multicomponent diet and physical activity programme and a physical activity and fitness programme were found to improve physical activity levels in adults with ID.

Click here to view abstract: <http://dx.doi.org/10.1111/jir.12562>

Lee, E. E., et al.

Comparison of schizophrenia outpatients in residential care facilities with those living with someone: Study of mental and physical health, cognitive functioning, and biomarkers of aging

Psychiatry Research, 2019 275, pp. 162-168

This paper aims to compare mental and physical health, cognitive functioning, and selected biomarkers of aging reflecting metabolic pathology and inflammation, in outpatients with schizophrenia from two residential settings: residential care facilities (RCFs) and living with someone in a house/apartment. RCF residents had several indicators of worse prognosis (never being married, higher daily antipsychotic dosages, increased comorbidities and higher Framingham risk for coronary heart disease) than individuals living with someone. However, RCF residents had better mental well-being and lower BMI, as well as comparable biomarkers of aging as those living with someone.

Click here to view abstract: <http://dx.doi.org/10.1016/j.psychres.2019.02.067>

Willems, M., et al.

Exploration of suitable behaviour change techniques for lifestyle change in individuals with mild intellectual disabilities: A Delphi study

Journal of Applied Research in Intellectual Disabilities, 2019 32, 3, pp. 543-557

Promotion of a healthy lifestyle for individuals with mild intellectual disabilities is important. However, the suitability of behaviour change techniques (BCTs) for these individuals is still unclear. Regardless of their position and education level, health professionals reached consensus about the suitability of BCTs for individuals with mild intellectual disabilities. Increased use of these BCTs could result in more effective promotion of a healthy lifestyle.

Click here to view abstract: <http://dx.doi.org/10.1111/jar.12548>

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Risk management

Deering, K., et al.

Patient perspectives of helpful risk management practices within mental health services. A mixed studies systematic review of primary research

Journal of Psychiatric and Mental Health Nursing, 2019

To review research and explore what patients consider beneficial in risk management practice. Connectivity appears important. Particularly patients feeling involved, and their voices being heard in both the identification of risks and then shaping risk management practice. Moreover, this included involvement of friends, family, and peers to widen input and supportive networks beyond clinical relationships.

Click here to view abstract: <http://dx.doi.org/10.1111/jpm.12521>

Levin, S. K., et al.

Adherence to planned risk management interventions in Swedish forensic care: What is said and done according to patient records

International Journal of Law and Psychiatry, 2019 64, pp. 71-82

The aim of this study was to investigate risk management interventions that were planned and realized during forensic care by analysing patient records. Analysing risk management interventions actually planned and realized in clinical settings can reveal the preventive role of structured risk assessments and how different interventions mediate violence risk.

Click here to view abstract: <http://dx.doi.org/10.1016/j.ijlp.2019.02.003>

Stanley, I. H., et al.

Documenting suicide risk assessments and proportionate clinical actions to improve patient safety and mitigate legal risk

Behavioral Sciences & the Law, 2019 37, 3, pp. 304-312

Few clinical practices are as important for simultaneously augmenting patient safety and mitigating legal risk as the judicious evaluation and stratification of a patient's risk for suicide, proportionate clinical actions based thereon taken by the healthcare provider, and contemporaneous documentation of the foregoing.

Click here to view abstract: <http://dx.doi.org/10.1002/bsl.2409>

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Self-harm and Suicide

Belzeaux, R., et al.

Predicting worsening suicidal ideation with clinical features and peripheral expression of messenger RNA and microRNA during antidepressant treatment

The Journal of Clinical Psychiatry, 2019 80, 3

To investigate how the combination of clinical and molecular biomarkers can predict worsening of suicidal ideation during antidepressant treatment. This study generated a predictive tool for TWSI that combines both biological and clinical variables. These biological variables can be easily quantified in peripheral tissues, thus rendering them viable targets to be used in both clinical practice and future studies of suicidal behaviors.

Click here to view abstract: <http://dx.doi.org/10.4088/JCP.18m12556>

Bryan, C. J.

Cognitive behavioral therapy for suicide prevention (CBT-SP): Implications for meeting standard of care expectations with suicidal patients

Behavioral Sciences & the Law, 2019 37, 3, pp. 247-258

Accumulating evidence supports the efficacy of cognitive behavioral therapy for suicide prevention (CBT-SP) as an empirically supported treatment approach for suicidal patients. The present article provides an overview of the procedures used in CBT-SP and discusses how these procedures meet, or even exceed, standard of care expectations for outpatient mental healthcare clinicians. Finally, the relevance of clinician fidelity to the CBT-SP model when evaluating standard of care expectations is discussed.

Click here to view abstract: <http://dx.doi.org/10.1002/bsl.2411>

Clements, C., et al.

Self-harm in midlife: analysis using data from the Multicentre Study of Self-harm in England

The British Journal of Psychiatry, 2019 pp. 1-8

To describe characteristics and treatment needs of people in midlife who present to hospital following self-harm. Self-harm in midlife represents a key target for intervention. Addressing underlying issues, alcohol use and economic factors may help prevent further self-harm and suicide.

Click here to view abstract: <http://dx.doi.org/10.1192/bjp.2019.90>

Gohar, S. M., et al.

Association between leptin levels and severity of suicidal behaviour in schizophrenia spectrum disorders

Acta Psychiatrica Scandinavica, 2019 139, 5, pp. 464-471

We examined the association between leptin and suicidal behaviour in schizophrenia, together with the influence of other clinical and biological indices. Lower leptin levels were associated with higher severity of suicidal behaviour in schizophrenia.

Click here to view abstract: <http://dx.doi.org/10.1111/acps.13019>

Gutridge, K., et al.

An exploratory study of women prisoners' attitudes towards their self-harm and the use of medical skin camouflage

Journal of Forensic Psychiatry and Psychology, 2019 30, 1, pp. 167-184

Self-harm is a growing problem in UK prisons with women self-harming more than men. Self-harm can leave permanent scarring. Research on scarring suggests that living with scars can lead to psychological difficulties; however, there is little research on the specific effects of self-harm scars. Our findings indicate that women in prison tend to feel embarrassed and self-conscious about their scars, and the presence of scars affects their relationships within prison. The women were enthusiastic about MSC, suggesting that it has the potential to affect women's well-being and ability to engage with others.

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Katsman, K. and Jeglic, E. L.

An analysis of self-reported suicide attempts and ideation in a national sample of incarcerated individuals convicted of sexual crimes

Journal of Sexual Aggression, 2019

Although suicide in correctional settings has been recognised as a serious problem, the research on suicide among incarcerated individuals remains limited. The current study provides an analysis of the prevalence and factors associated with self-reported suicidal thoughts and behaviours in a large national sample of individuals convicted of a sexually based crime.

Click here to view abstract: <http://dx.doi.org/10.1080/13552600.2019.1611959>

Paashaus, L., et al.

Do suicide attempters and suicide ideators differ in capability for suicide?

Psychiatry Research, 2019 275, pp. 304-309

The aim of this study was to investigate the role of different aspects of capability for suicide (fearlessness about death, subjective pain tolerance, objective pain persistence) in differentiating suicide ideators from suicide attempters, single attempters from multiple attempters and recent attempters from distant attempters. No differences in fearlessness about death, subjective pain tolerance and objective pain persistence were found in suicide ideators vs. attempters, single vs. multiple attempters and recent vs. distant attempters.

Click here to view abstract: <http://dx.doi.org/10.1016/j.psychres.2019.03.038>

Sher, L.

Resilience as a focus of suicide research and prevention

Acta Psychiatrica Scandinavica, 2019

Suicide is a major medical and social problem. Decades of suicide research have mostly focused on risk factors for suicidal behavior while overlooking protective factors such as resilience that may help to address this important public health issue. Improving resilience should be a part of a treatment plan of every psychiatric patient. Mental health professionals will probably have the best success in reducing suicide risk in psychiatric patients if they actively concentrate on increasing stress resilience using both psychosocial and pharmacological interventions.

Click here to view abstract: <http://dx.doi.org/10.1111/acps.13059>

Siddaway, A. P., et al.

Characterizing self-injurious cognitions: Development and validation of the Suicide Attempt Beliefs Scale (SABS) and the Nonsuicidal Self-Injury Beliefs Scale (NSIBS)

Psychological Assessment, 2019 31, 5, pp. 592-608

Self-injurious cognitions (SICs) are cognitions about deliberately injuring oneself (self-injurious behavior [SIB]). Existing measures of the content of SICs provide varying coverage, highlighting a lack of consensus regarding which cognitions characterize SIB. Various analyses indicate that SA and NSSI SICs are similar but distinct phenomena, supporting the use of separate terminology and definitions of SA and NSSI, and pointing to the importance of separating SA and NSSI in research and clinical practice.

Click here to view abstract: <http://dx.doi.org/10.1037/pas0000684>

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Click here to view abstract: <http://dx.doi.org/10.1002/bsl.2409>

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Therapeutic modalities (psychodynamic, cognitive behavioural etc.)

Birkenhager, T. K., et al.

Improvement after two sessions of electroconvulsive therapy predicts final remission in inpatients with major depression

Acta Psychiatrica Scandinavica, 2019

To investigate whether early improvement, measured after two ECT sessions, is a good predictor of eventual remission in severely depressed inpatients receiving ECT. Early improvement during an ECT course may be assessed after two ECT sessions. Such improvement, defined as a 15% reduction in the MADRS score, is a moderately sensitive predictor for eventual remission in an inpatient population with severe major depression.

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Click here to view abstract: <http://dx.doi.org/10.1016/j.avb.2019.01.001>

Davies, B. E., et al.

'monsters don't bother me anymore' forensic mental health service users' experiences of acceptance and commitment therapy for psychosis

Journal of Forensic Psychiatry & Psychology, 2019

Acceptance and Commitment Therapy for psychosis (ACTp) is an approach that aims to change the relationship an individual with psychosis has with difficult thoughts, emotions and experiences. This service evaluation project explored service users' experiences and meanings of ACTp within a medium secure mental health service. These findings suggest that ACTp is an approach that should be considered a therapeutic option within forensic mental health contexts.

Click here to view abstract: <http://dx.doi.org/10.1080/14789949.2019.1614650>

Patterson, C. W., et al.

Third-wave therapies and adults with intellectual disabilities: A systematic review

Journal of Applied Research in Intellectual Disabilities, 2019

Third-wave therapies appear to produce positive outcomes for people without intellectual disabilities. This systematic review aimed to establish which third-wave therapies have been adapted for adults with intellectual disabilities and whether they produced positive outcomes. Evidence indicated that third-wave therapies improved mental health symptoms for some and improved challenging/offending behaviour, smoking and mindfulness/acceptance skills for most. These findings must be interpreted with caution due to the low methodological quality of included studies. Future research should build on the current evidence base, using scientifically rigorous designs and standardized measures.

Click here to view abstract: <http://dx.doi.org/10.1111/jar.12619>

Segal, Z. V., et al.

Practice of therapy acquired regulatory skills and depressive relapse/ recurrence prophylaxis following cognitive therapy or mindfulness based cognitive therapy

Journal of Consulting and Clinical Psychology, 2019 87, 2, pp. 161-170

To investigate whether usage of treatment-acquired regulatory skills is associated with prevention of depressive relapse/recurrence. Preventing major depressive disorder relapse/recurrence may depend upon developing DC in addition to managing residual symptoms. Following the acquisition of therapy skills during maintenance psychotherapies, DC is strengthened by continued skill utilization beyond treatment termination.

Click here to view abstract: <http://dx.doi.org/10.1037/ccp0000351.supp>

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Prisons

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Click here to view abstract: <http://dx.doi.org/10.1080/13552600.2019.1611959>

Otte, S., et al.

Psychometric validation of the Brief Symptom Inventory 25 Forensic (BSI-25-F)

Journal of Forensic Psychiatry and Psychology, 2019 30, 1, pp. 112-126

The Brief Symptom Inventory 25 Forensic (BSI-25-F) is a screening instrument for measuring the psychophysical distress of prisoners and forensic patients. The aim of the study was to validate the instrument. To conclude, the new BSI-25-F represents an economic, practicable, and reliable screening instrument for identifying prisoners who are in a need of treatment.

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Secure Units

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The application and adoption of four 'third wave' psychotherapies for mental health difficulties and aggression within correctional and forensic settings: A systematic review

Aggression and Violent Behavior, 2019 46, pp. 45-55

This review, using PRISMA guidelines, reviewed four third wave therapies, Acceptance and Commitment Therapy (ACT), Compassion Focused Therapy (CFT), Metacognitive Therapy (MCT) and Functional Analytic Psychotherapy (FAP) and their respective effectiveness in addressing psychological difficulties and aggression for those incarcerated in a number of forensic settings. ACT shows some potential promise as a treatment with a prisoner population but the general lack of methodologically sound studies greatly limits any conclusions that can be made. At present other treatments such as Cognitive Behavioural Therapy (CBT) and other third wave therapies, most notably, Dialectical Behaviour Therapy (DBT) have accrued more evidence as a result of greater amount of research.

Click here to view abstract: <http://dx.doi.org/10.1016/j.avb.2019.01.001>

Carr, W. A., et al.

Criminal thinking as a risk factor for psychiatric inpatient aggression

The International Journal of Forensic Mental Health, 2019

Thinking styles that predispose offenders to antisocial behavior have been shown to predict violence and aggression among inmates. This study explored this relationship among civil psychiatric inpatients. This study's results reinforce the importance of symptom-driven hostility to predicting inpatient aggression and violence, while highlighting the relatively minor role of specific criminal thinking styles in aggressive behavior among institutionalized psychiatric patients.

Click here to view abstract: <http://dx.doi.org/10.1080/14999013.2019.1604584>

Davies, B. E., et al.

An evaluation of the effectiveness of positive behavioural support within a medium secure mental health forensic service

Journal of Forensic Psychiatry and Psychology, 2019 30, 1, pp. 38-52

A number of recent influential reports recommend the use of proactive and preventative approaches such as Positive Behavioural Support (PBS) in the management of challenging behaviours. In this study, PBS was implemented in a medium secure forensic mental health service, a novel context. This study indicated that PBS was an effective intervention in the management of challenging behaviour in this forensic mental health context.

Click here to view abstract: <http://dx.doi.org/10.1080/14789949.2018.1459785>

Davies, B. E., et al.

'monsters don't bother me anymore' forensic mental health service users' experiences of acceptance and commitment therapy for psychosis

Journal of Forensic Psychiatry and Psychology, 2019

Acceptance and Commitment Therapy for psychosis (ACTp) is an approach that aims to change the relationship an individual with psychosis has with difficult thoughts, emotions and experiences. This service evaluation project explored service users' experiences and meanings of ACTp within a medium secure mental health service. These findings suggest that ACTp is an approach that should be considered a therapeutic option within forensic mental health contexts.

Click here to view abstract: <http://dx.doi.org/10.1080/14789949.2019.1614650>

Hotzy, F., et al.

Involuntary admission for psychiatric treatment: Compliance with the law and legal considerations in referring physicians with different professional backgrounds

International Journal of Law and Psychiatry, 2019 64, pp. 142-149

Involuntary admission (IA) for psychiatric treatment is a massive restriction of human rights. Therefore, its execution is regulated by law. During executing IAs referring physicians find themselves in a dual role: support of patients in the recovery process but also safe-keeper of society. We aimed to assess whether referring physicians can comply with those legal requirements for an IA. Additionally, we examined whether legal considerations differed according to the physicians' professional backgrounds and attitudes towards coercion in general. Interventions should be developed to facilitate a compliance with legal requirements during IA. Physicians who execute IAs must have a thorough knowledge of the clinical and legal basis for their actions.

Click here to view abstract: <http://dx.doi.org/10.1016/j.ijlp.2019.03.005>

Houtepen, J. A. B. M., et al.

Social support, attachment and externalizing behavior in forensic patients with attention-deficit hyperactivity disorder

International Journal of Law and Psychiatry, 2019 64, pp. 106-116

This study was designed to provide more insight into the relationship between social support and externalizing behavior in forensic patients with ADHD. Analyses of variance showed that forensic patients with ADHD had higher levels of externalizing behaviors and insecure attachment, and lower levels of secure attachment compared to both healthy and at risk controls. Multivariate regression analyses showed that social support was not associated with any of the externalizing behaviors, after accounting for attachment. In contrast, insecure attachment was associated with higher levels of all externalizing behaviors examined.

Click here to view abstract: <http://dx.doi.org/10.1016/j.ijlp.2019.02.008>

Ireland, C. A., et al.

Predicting security incidents in high secure male psychiatric care

International Journal of Law and Psychiatry, 2019 64, pp. 40-52

The contribution of environmental and organisational factors in predicting security incidents within a high secure male psychiatric setting is considered using a series of connected studies; a systematic literature review comprising 41 studies and five inquiries (Study 1) to identify core themes of likely importance; application of these themes to incident data through assessment of the ward culture, as perceived by 73 male psychiatric patients and 157 staff (Study 2); and detailed examination of noted relevant factors in the form of interpersonal style, meaningful activity and physical environmental characteristics in a study comprising 62 patients and 151 staff (Study 3). It was predicted that security incidents would be identified through inclusion of environmental and organisational factors. The research proposes a preliminary framework - the McKenna Framework for understanding Incidents in Secure Settings (M-FISS) - to explain the occurrence of security incidents in secure psychiatric care.

Click here to view abstract: <http://dx.doi.org/10.1016/j.ijlp.2019.01.004>

Levin, S. K., et al.

Adherence to planned risk management interventions in Swedish forensic care: What is said and done according to patient records

International Journal of Law and Psychiatry, 2019 64, pp. 71-82

The aim of this study was to investigate risk management interventions that were planned and realized during forensic care by analysing patient records. Analysing risk management interventions actually planned and realized in clinical settings can reveal the preventive role of structured risk assessments and how different interventions mediate violence risk.

Click here to view abstract: <http://dx.doi.org/10.1016/j.ijlp.2019.02.003>

Otte, S., et al.

Psychometric validation of the Brief Symptom Inventory 25 Forensic (BSI-25-F)

Journal of Forensic Psychiatry and Psychology, 2019 30, 1, pp. 112-126

The Brief Symptom Inventory 25 Forensic (BSI-25-F) is a screening instrument for measuring the psychophysical distress of prisoners and forensic patients. The aim of the study was to validate the instrument. To conclude, the new BSI-25-F represents an economic, practicable, and reliable screening instrument for identifying prisoners who are in a need of treatment.

Click here to view abstract: <http://dx.doi.org/10.1080/14789949.2018.1516229>

Quinn, C., et al.

The use of restrictive practices on males released from prison and entering acute mental health services: A retrospective cross-sectional comparative study

Issues in Mental Health Nursing, 2019

This study aimed to determine restrictive practices use on males admitted involuntarily from prison compared to those admitted from the community. Those admitted from prison were no more likely to experience restrictive practices; but were more likely to have a co-existing diagnosis of alcohol/substance use or personality disorder, in addition to a primary diagnosis of psychotic illness. The proportionate use of restrictive practices despite such complex presentations is potentially indicative of the clinical use of effective alternative management strategies.

Click here to view abstract: <http://dx.doi.org/10.1080/01612840.2019.1572845>

Smith, K. J., et al.

The predictive validity of the hcr20v3 within scottish forensic inpatient facilities: A closer look at key dynamic variables

The International Journal of Forensic Mental Health, 2019

The predictive validity of the HCR-20v3 has not been demonstrated in a UK forensic inpatient population. In particular, the validity of insight and positive symptoms of psychosis, two clinical risk factors within the HCR-20v3, require further evidence of their validity in this patient group. Post-hoc analyses indicated that even when combined with the risk management subscale, itself a significant predictor, the clinical subscale remained the strongest predictor of violence.

Click here to view abstract: <http://dx.doi.org/10.1080/14999013.2019.1618999>

Strand, S. J. M. and Selenius, H.

Assessing risk for inpatient physical violence in a female forensic psychiatric sample - comparing HCR-20v2 with the female additional manual to the HCR-20v2

Nordic Journal of Psychiatry, 2019 pp. 1-9

Out from the sparse literature on risk assessment for violence committed by women the Female Additional Manual (FAM) was developed to be a complement to the HCR-20v2. The aim of this study was to investigate and compare the psychometrics of the HCR-20v2 with and without the FAM on risk for inpatient physical violence for female forensic psychiatric patients. The results support the use of HCR-20v2 when assessing risk for inpatient violence for female forensic psychiatric patients, but with only some support for adding or changing risk factors according to the FAM.

Click here to view abstract: <http://dx.doi.org/10.1080/08039488.2019.1613447>

ter Haar-Pomp, L., et al.

The impact of forced forensic psychiatric confinement on composition and structure in the personal networks of personality-disordered forensic psychiatric patients

Journal of Forensic Psychiatry and Psychology, 2019 30, 1, pp. 53-75

This study explored to what extent the composition and structure of personal networks of personality-disordered forensic psychiatric patients changed before and after forced confinement in a forensic psychiatric centre. No changes were observed in the patients' companionship, practical and emotional support networks. During forensic psychiatric treatment, patients reported some new relationships, especially with persons outside the forensic psychiatric centre.

Click here to view abstract: <http://dx.doi.org/10.1080/14789949.2018.1467947>

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Women's Services

Gutridge, K., et al.

An exploratory study of women prisoners' attitudes towards their self-harm and the use of medical skin camouflage

Journal of Forensic Psychiatry and Psychology, 2019 30, 1, pp. 167-184

Self-harm is a growing problem in UK prisons with women self-harming more than men. Self-harm can leave permanent scarring. Research on scarring suggests that living with scars can lead to psychological difficulties; however, there is little research on the specific effects of self-harm scars. Our findings indicate that women in prison tend to feel embarrassed and self-conscious about their scars, and the presence of scars affects their relationships within prison. The women were enthusiastic about MSC, suggesting that it has the potential to affect women's well-being and ability to engage with others.

Click here to view abstract: <http://dx.doi.org/10.1080/14789949.2018.1530285>

Strand, S. J. M. and Selenius, H.

Assessing risk for inpatient physical violence in a female forensic psychiatric sample - comparing HCR-20v2 with the female additional manual to the HCR-20v2

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Click here to view abstract: <http://dx.doi.org/10.1080/08039488.2019.1613447>

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Health Policy / Management

Mental Health Practice

Deering, K., et al.

Patient perspectives of helpful risk management practices within mental health services. A mixed studies systematic review of primary research

Journal of Psychiatric and Mental Health Nursing, 2019

To review research and explore what patients consider beneficial in risk management practice. Connectivity appears important. Particularly patients feeling involved, and their voices being heard in both the identification of risks and then shaping risk management practice. Moreover, this included involvement of friends, family, and peers to widen input and supportive networks beyond clinical relationships.

Click here to view abstract: <http://dx.doi.org/10.1111/jpm.12521>

Flynn, S., et al.

The personality disorder patient pathway: Service user and clinical perspectives

Personality and Mental Health, 2019

There have been recent policy developments and research into care provision for service users with personality disorder. However, few studies have focused on service user and staff perspectives on how services could be improved. The care pathway for individuals with personality disorder is unclear to clinicians and service users, and elements of the pathway are disjointed and not working as effectively as they could. Guidelines recommended by National Institute for Health and Care Excellence are not being followed. Specialist psychological interventions should be available to ensure consistent and stable care provision.

Click here to view abstract: <http://dx.doi.org/10.1002/pmh.1444>

Grant, A., et al.

'If you're crying this much you shouldn't be a consultant': the lived experience of UK doctors in training with mental illness

International Review of Psychiatry, 2019 pp. 1-11

There is some disagreement in the literature whether doctors in training suffer more from mental illness than an age-matched population. However, mental illness among doctors in training is a cause for concern because of the dual problems of reticence about accessing help and the clinical risk of doctors practising while mentally ill. The belief that is widely held among doctors in training is that to disclose a mental illness would be seen as weakness and may damage their career. This study demonstrates the suffering encountered by doctors in training with mental illness. The job becomes much more difficult to do safely when mentally unwell.

Click here to view abstract: <http://dx.doi.org/10.1080/09540261.2019.1586326>

Hansen, S. J., et al.

Mental health professionals' perceived clinical utility of the ICD-10 vs. ICD-11 classification of personality disorders

Personality and Mental Health, 2019 13, 2, pp. 84-95

The ICD-11 classification of personality disorders (PDs) has adopted a dimensional approach which includes three levels of severity (mild, moderate and severe) with the option of specifying five trait qualifiers (negative affectivity, detachment, dissociality, disinhibition and anankastia) and one borderline pattern qualifier. This study examined mental health professionals' perceived clinical utility of the ICD-11 PD framework compared with the ICD-10 categorical PD framework. This study provided initial evidence that mental health professionals perceive the ICD-11 PD classification as slightly more useful for clinical practice than the ICD-10 classification.

Click here to view abstract: <http://dx.doi.org/10.1002/pmh.1442>

López-López, I. M., et al.

Prevalence of burnout in mental health nurses and related factors: a systematic review and meta-analysis

International Journal of Mental Health Nursing, 2019

The aim of this study was to determine the prevalence of burnout in mental health nurses and to identify its predictors. In most cases, the literature informs about moderate levels of emotional exhaustion, depersonalization, and personal accomplishment. The studies inform that variables such as work overload, work-related stress, professional seniority, male gender, being single, and aggression at work, among other factors, contribute to burnout development.

Click here to view abstract: <http://dx.doi.org/10.1111/inm.12606>

McKeown, M., et al.

'Catching your tail and firefighting': the impact of staffing levels on restraint minimisation efforts

Journal of Psychiatric and Mental Health Nursing, 2019

To explore views on staffing levels in context of attempting to minimise physical restraint practices on mental health wards. Findings emerged from a wider dataset with the broader aim of exploring experiences of a restraint reduction initiative. Tendencies detracting from relational aspects of care are not independent of insufficiencies in staffing. The relational, communicative, and organisational developments that would enable reductions in use of restraint are labour intensive and vulnerable to derailment by insufficient and poorly skilled staff.

Click here to view abstract: <http://dx.doi.org/10.1111/jpm.12532>

Niimura, J., et al.

Effectiveness of 1-day trauma-informed care training programme on attitudes in psychiatric hospitals: A pre-post study

International Journal of Mental Health Nursing, 2019

Many patients in mental health settings are likely to have histories of interpersonal traumatic experiences. Mental health providers are recommended to adopt trauma-informed care (TIC) to ensure sensitivity and responsiveness to the impact of trauma on patients. The aim of the study was to evaluate the effects of a TIC training programme on attitudes towards TIC in mental health professionals. These results suggested that this brief TIC training programme improved attitudes towards TIC practice significantly.

Click here to view abstract: <http://dx.doi.org/10.1111/inm.12603>

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Recovery – Rehabilitation

Rennick-Egglestone, S., et al.

Mental health recovery narratives and their impact on recipients: Systematic review and narrative synthesis

Canadian Journal of Psychiatry, 2019

Mental health recovery narratives are often shared in peer support work and antistigma campaigns. Internet technology provides access to an almost unlimited number of narratives, and yet little is known about how they affect recipients. The aim of this study was to develop a conceptual framework characterizing the impact of recovery narratives on recipients. Mental health recovery narratives can promote recovery. Recovery narratives might be useful for clients with limited access to peers and in online interventions targeted at reducing social isolation in rural or remote locations, but support is needed for the processing of the strong emotions that can arise. Caution is needed for use with specific clinical populations.

Click here to view abstract: <http://dx.doi.org/10.1177/0706743719846108>

Salehi, A., et al.

Bonding and bridging social capital in the recovery of severe mental illness: a synthesis of qualitative research

Journal of Mental Health, 2019 28, 3, pp. 331-339

Social networks are known to have a major influence on the recovery journey of people with severe mental illness (SMI). Aims: To understand the role of bonding and bridging social capital in the recovery process following SMI and to identify the barriers that prevent social networks from being mobilized. All those involved in the management of SMI must be aware of how social support networks hinder or contribute to recovery. People with SMI need opportunities to form reciprocal relationships and sustain supportive networks that can assist them to endure the challenges presented by SMI.

Click here to view abstract: <http://dx.doi.org/10.1080/09638237.2018.1466033>

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Curley, A., et al.

Categorical mental capacity for treatment decisions among psychiatry inpatients in Ireland

International Journal of Law and Psychiatry, 2019 64, pp. 53-59

This study aimed to assess mental capacity for treatment decisions among psychiatry inpatients in Ireland and explore the relationship, if any, between mental capacity and various demographics and clinical variables. We assessed mental capacity for treatment decisions in 215 psychiatry inpatients in four psychiatry admission units. The relatively high rate of "partial mental capacity" identified in our work suggests that decision-making supports are likely to be of substantial importance in assisting psychiatry inpatients making decisions about treatment, especially involuntary inpatients whose mental capacity is especially likely to be impaired.

Click here to view abstract: <http://dx.doi.org/10.1016/j.ijlp.2019.02.001>

Hotzy, F., et al.

Involuntary admission for psychiatric treatment: Compliance with the law and legal considerations in referring physicians with different professional backgrounds

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Click here to view abstract: <http://dx.doi.org/10.1016/j.ijlp.2019.03.005>

Owen, G. S., et al.

Advance decision-making in mental health - Suggestions for legal reform in England and Wales

International Journal of Law and Psychiatry, 2019 64, pp. 162-177

This paper argues that existing English and Welsh mental health legislation (The Mental Health Act 1983 (MHA)) should be changed to make provision for advance decision-making (ADM) within statute and makes detailed recommendations as to what should constitute this statutory provision. It is argued that the introduction of mental health ADM into the MHA will provide clarity within what has become a confusing area and will enable and promote the development and realisation of ADM as a form of self-determination.

Click here to view abstract: <http://dx.doi.org/10.1016/j.ijlp.2019.02.002>

Stanley, I. H., et al.

Documenting suicide risk assessments and proportionate clinical actions to improve patient safety and mitigate legal risk

Behavioral Sciences & the Law, 2019 37, 3, pp. 304-312

Few clinical practices are as important for simultaneously augmenting patient safety and mitigating legal risk as the judicious evaluation and stratification of a patient's risk for suicide, proportionate clinical actions based thereon taken by the healthcare provider, and contemporaneous documentation of the foregoing.

Click here to view abstract: <http://dx.doi.org/10.1002/bsl.2409>

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