

## Highlights of this issue

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### FORENSIC LEARNING DISABILITY – ROOM FOR THERAPEUTIC OPTIMISM

A significant proportion of people with learning disabilities and challenging behaviour are excluded from ordinary services, and an offender 'tag' can further segregate care pathways for this group. Reed *et al* (pp. 499–504) examined differences between those with and without a forensic history to ascertain whether the former are indeed more violent. Using a retrospective cohort design involving in-patients they found, surprisingly, that people in the offender group were significantly less likely to be aggressive to others or to use weapons and significantly more likely to harm themselves. Both groups showed a reduction in their challenging behaviour during admission, with no significant difference in treatment outcome. Results support an active management plan and optimism for community resettlement of all such individuals, including those with a forensic 'tag'.

### OPENNESS ABOUT HOMOSEXUALITY – ADVERSE EXPERIENCES

In a UK sample of gay, lesbian and bisexual people 30% had attempted suicide (Warner *et al*, pp. 479–485). High levels of perceived discrimination in the form of physical attacks, verbal abuse, property damage and bullying at school were reported and these were linked to suicidal ideation and mental disorder. Openness did not appear to be associated with better outcomes, as younger respondents who were more open about their sexual orientation were more

likely to report discrimination and hostility, mental disorder, harmful drinking and deliberate self-harm.

### OLANZAPINE IN BIPOLAR DISORDER

Although dysphoric symptoms represent a significant complicating factor in the optimal management of bipolar disorder, treatment options are limited. In a post hoc analysis, Baker *et al* (pp. 472–478) found that olanzapine therapy combined with either valproate or lithium effectively treated coexisting manic and depressive symptoms in patients who experienced inadequate response or breakthrough symptoms during lithium or valproate monotherapy.

### GENETIC SUSCEPTIBILITY TO NEUROLEPTIC-INDUCED EXTRAPYRAMIDAL SYMPTOMS

Genetic factors have recently been suggested as having a role in the susceptibility to extrapyramidal symptoms. Consequently, a positive family history of a primary movement disorder may be associated with their development. Studying 100 in-patients, Lencer *et al* (pp. 465–471) found that a positive family history had significant predictive value for the occurrence of extrapyramidal symptoms. The results raise the possibility of shared genetic factors in primary and secondary movement disorders and support the use of the neuroleptic medication with the lowest risk of extrapyramidal side-effects for patients with

a family history of primary movement disorders.

### AUDITORY HALLUCINATIONS FROM ONE'S OWN INNER SPEECH?

Although recent neuroimaging studies have shown that both speech generation and perception areas are activated during auditory hallucinations in schizophrenia, they have not resolved the key issue of the sequence in which different areas are involved. Shergill *et al* (pp. 516–517) measured brain activity before, during and after hallucinations, to show that the left inferior frontal cortex, which is implicated in the generation of inner speech, is activated before patients report that they are aware of auditory hallucinations, whereas the lateral temporal cortex, which is involved in speech perception, is engaged when the patient actually perceives auditory speech a few seconds later. This strongly suggests that hallucinations of speech are indeed derived from one's own inner speech.

### SINGLE-CELL ACCOMMODATION AND SUICIDE IN CUSTODY

Studying national suicides in Austrian correctional facilities and matched prisoner controls, Fruehwald *et al* (pp. 494–498) found a history of suicidality, psychiatric diagnosis, receipt of psychotropic medication, a highly violent index offence and single-cell accommodation to predict suicide. The authors underline the necessity for all correctional staff to take suicidal behaviour as seriously in custodial settings as in any other circumstance. Taylor *et al* (pp. 486–493) suggest that, in the general population, lessening social and economic disparities would lower the prevalence of both mental disorder and suicide attempts.

### SEASON'S GREETINGS

The Editor, Editorial Board and staff of the *Journal* wish all our readers a happy holiday season and a peaceful New Year.