overestimation of the effect of a shorter inter-pregnancy interval. However, if male gender was indeed on the causal pathway between inter-pregnancy interval and schizophrenia, this would not, of itself, lead to a biased estimate of association between inter-pregnancy interval and schizophrenia. Furthermore, if male gender was indeed on the causal pathway, then adjusting for gender should lead to an attenuation of the association between inter-pregnancy interval and schizophrenia; however, adjusting for gender made no difference to our results, indicating that gender is unlikely to be an adequate explanation as a mechanism for the association with shorter inter-pregnancy interval.


6 Macdonald AJD, Elphick M. Combining routine outcomes measurement and “Payment by Results”: will it work and is it worth it? Br J Psychiatry 2011; 199: 178–9.

