Assessing Suicide Risk in the Emergency Department

A new study in the American Journal of Preventive Medicine found that universal suicide risk screening in emergency departments (EDs) approximately doubled the number of patients who were positively identified as thinking about or having attempted suicide. In the study, suicide risk screenings among 236,791 ED visits over 5 years rose from 26% to 84%, increasing detection of suicide risk from 2.9% to 5.7%.

Nurses at eight EDs were trained to administer a brief patient screener focusing on three suicide risk factors: depressive symptoms, active suicidal ideation, and lifetime suicide attempts. Ninety percent of patients with positive screens were discharged with resources, including lists of community-based services, a self-help safety plan, and a wallet card with local suicide prevention lifeline numbers. Among patients with positive screens in the study’s final phase, those who agreed to participate following their ED discharge received a more intensive intervention via a series of structured telephone calls with trained nurses.


Yeast Infections More Common in Individuals With Mental Illness

A new study in NPJ Schizophrenia found that a history of Candida yeast infections was more common in a group of men with schizophrenia or bipolar disorder than in those without these disorders, and that women with schizophrenia or bipolar disorder who tested positive for Candida performed worse on a standard memory test than women with schizophrenia or bipolar disorder who had no evidence of past infection. Researchers took blood samples from a group of 808 individuals ages 18 to 65. This group comprised 277 controls without a history of mental illness, 261 individuals with schizophrenia, and 270 individuals with bipolar disorder. The blood samples were used to quantify the amount of IgG class antibodies to Candida, which indicates a past infection with the yeast. After accounting for factors such as age, race, medications, and socioeconomic status, which could skew results, researchers looked for patterns that suggested links between mental illness and infection rates.

When researchers looked only at men, they found 26% of those with schizophrenia had Candida antibodies compared to 14% of controls. There was no difference in

Individuals With Schizophrenia Use Digital Technology as a Coping Resource

The National Alliance on Mental Illness (NAMI) released the results of a survey showing that individuals with schizophrenia use digital technology generally as much as the rest of the population—and in ways that help them cope with its effects.

The survey was conducted online from August 25, 2014 to September 8, 2014, and involved 457 respondents. Results showed that 90% of respondents owned more than one digital device, such as a personal computer, tablet, or smartphone.

In addition, many respondents used their devices to cope with mental illness in the following ways:

- by blocking or managing auditory hallucinations with music or audio files (42%);
- for health information on the Internet (38%);
- for calendar reminders (37%);
- for transportation and map needs (32%);
- for medication management (28%);
- for supporting others (26%);
- for developing relationships with other individuals with schizophrenia (26%);
- for monitoring symptoms (25%); and
- for identifying coping strategies (24%).

infection rate between women with schizophrenia (31.3%) and controls (29.4%). The higher infection rate percentages in women compared to men likely reflect an increased susceptibility for this type of infection in all women. Men with bipolar disorder also had clear increases in Candida, with a 26.4% infection rate compared to 14% in male controls.

The data add support to the idea that environmental exposures related to lifestyle and immune system factors may be linked to schizophrenia and bipolar disorder, and that those factors may be different for each illness. Similarly, specific mental illnesses and related symptoms may be different in men versus women.


Low-Income Mothers of Color Receive Little Relief from Postpartum Depression

Health care providers and human service agencies often manage postpartum depression with formal mental health treatments and antidepressant therapies, but for new, low-income African American and Latina mothers, their experiences with postpartum depression and the types of formal and informal services that help manage their depression. Postpartum depression affects 13% to 19% of all new mothers, but the rates are higher for new African American and Latina mothers (>38%).

Estimates reveal that 60% of African American and Latina mothers do not receive services to help manage their depression. As such, the importance of church emerged as one of the most consistent responses. The next step is to begin working with churches and church leaders to reach out to pregnant women and postpartum mothers in the community.


Psychiatric Symptoms Affect Mental Health Court Engagement

New research from the University of Missouri found that for mental health courts to be successful, every professional engaged in the process should be aware of the relationship between psychiatric symptoms and participant engagement within the system, and connect participants with comprehensive treatment and services as early as possible.

Researchers analyzed the relationship between psychiatric symptoms and mental health court engagement by looking at treatment adherence, substance use, days spent in jail, probation violations, and retention during a 6-month follow-up period, and found that symptoms of depression, anxiety, and guilt were more severe for participants incarcerated during the follow-up period. The results highlight the importance of providing quality mental health and substance use treatment that addresses participants’ health needs.


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New Psychological Disorder Identified: Maladaptive Daydreaming

A new psychological disorder has been identified in a series of new studies: maladaptive daydreaming. Researchers found that individuals with the disorder spend an average of 60% of their waking time in an imaginary world that they have created, knowing it is a fantasy and not losing contact with the real world.

These studies showed recurring themes. One study reported the development and validation of a maladaptive daydreaming scale (MDS) using a large sample of 447 individuals. The MDS was shown to differentiate well between normal and maladaptive daydreaming and offered the first diagnostic and research instrument for the newly discovered disorder. In the second study, 340 participants ages 13 to 78 (from 45 countries) were tested. Data showed that more than one half of individuals said that the disorder disrupted their sleep and that the first thing they are aware of when they wake in the morning is their urge to daydream; respondents reported having rich fantasy worlds with complex storylines.

Although maladaptive daydreaming first started as a positive experience providing pleasure and relaxation, it quickly developed into an addictive habit that took over individuals’ lives and impaired their functioning.

Transcranial Direct Current Stimulation Helps Decrease Cravings in Binge Eating Disorder

Transcranial direct current stimulation (tDCS) has proven effective for binge eating disorder (BED) for the first time, according to researchers at the University of Alabama at Birmingham.

Researchers tested 30 adults (male and female) with BED or subthreshold BED with a 20-minute session of tDCS targeting the right dorsolateral prefrontal cortex for stimulation. They also administered a “sham” session in which participants were hooked to the tDCS device but did not receive stimulation to control for possible placebo effects.

Results showed that tDCS decreased cravings significantly more than sham for sweets, savory proteins, and an all-foods category. The strongest reductions occurred in men. In both sexes, tDCS decreased total food intake by 11% and preferred-food intake by 17.5% during the control sham session. tDCS also reduced the desire to binge eat in men on the day of tDCS treatment compared to sham administration.

Participants reported no negative side effects, other than slight itching from the electrodes during stimulation. This proof-of-concept study will now allow researchers to test the effects of multiple tDCS sessions, which should induce neuroplasticity.

Cognitive-Behavioral Therapy May Help Individuals Who Self-Harm

An updated review in the Cochrane Library evaluated evidence of a range of psychosocial interventions for adults who self-harm, and included 55 trials in which a total of 17,699 participants were randomized to receive either a psychosocial intervention or care they would normally have received. The most commonly evaluated studies were cognitive-behavioral therapy (CBT)-based psychological therapies. Some of the other interventions were aimed at helping individuals who had a history of multiple episodes of self-harm, or focused on helping individuals maintain their treatment and contact with mental health services.

Of the 55 studies, 18 evaluated CBT. Data were analyzed from 17 of the 18 studies that reported on the repetition of self-harm. Individuals who had received CBT-based psychological therapy were less likely to self-harm, although the quality of the evidence was low. Following CBT, 6% fewer individuals self-harmed when compared to those who did not receive CBT. Benefits of CBT-based psychological therapy were also found for depressed mood, hopelessness about the future, and suicidal thoughts. Other interventions for individuals with a history of multiple episodes may help them self-harm less often; however, only a small number of trials evaluated these interventions.


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