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HIGHLIGHTS IN THIS ISSUE

The editorial in this issue reviews the orexins/hypocretins, a recently recognized group of neuropeptides, involved in sleep, arousal, narcolepsy and possibly other disorders.

Two articles concern epidemiology. Kessler and colleagues (pp. 959–976) report large scale development and validation of 10-item and 6-item versions of a scale with impressive performance in screening for DSM-IV psychiatric disorder in US and Australian general populations. Sacker & Wiggins (pp. 977–990) use two longitudinal cohort studies to examine gender and social class differences in psychological distress. Both narrowed over two decades with the higher rates in women and those in manual occupations falling, to become nearer males and non-manual occupations. Disadvantage is apparently lessening.

In another study of gender and disorder Fergusson and colleagues in New Zealand (pp. 991–996) find that the greater exposure of females to sexual violence explains some, but not all of their greater liability to internalizing disorders. In other aetiological studies, Enns *et al*. (pp. 997–1008) find associations of community disorder with lack of care on the Parental Bonding Instrument, while Reichborn-Kjennerud *et al*. (pp. 1009–1020) in a Norwegian twin sample find genetic links between back-neck pain and anxiety and depressive symptoms.

Four studies concern depression. In an important neuroendocrine study of chronic depression Watson *et al*. (pp. 1021–1028) find absence of the usual depressive HPA axis abnormalities, strongly suggesting that these normalize with time. Matsuo *et al*. (pp. 1029–1038) employ the little-used non-invasive technique of near infrared spectroscopy, to show a reduction in euthymic affective disorder patients compared with controls in the increase of oxyHb in the frontal region during a verbal fluency task and during hyperventilation, indicating persisting or antecedent abnormalities. In a controlled trial Chabrol *et al*. (pp. 1039–1047) find a brief cognitive-behavioural intervention reduces depression scores in postpartum mothers at risk for post-natal depression. Fava *et al*. (pp. 1049–1057) find personality disorder diagnoses to decline in frequency after treatment for depression, suggesting that depression contributes to and antidepressant ameliorates the behaviours and attitudes which comprise the personality disorders.

Two studies interface with psychoimmunology. In an important prospective study over up to 9 years, Leserman *et al*. (pp. 1059–1073) find progression of HIV accelerated by stressful life events, dysphoric mood and raised cortisol. Arnold *et al*. (pp. 1075–1089) report effects of inducing influenza-like symptoms in patients with chronic fatigue syndrome compared with normal controls. While somatic symptoms of CFS were exacerbated, cognitive and mood symptoms were not.

Three papers report findings in schizophrenia. Hooley & Campbell (pp. 1091–1099) find high expressed emotion relatives attribute more control to ill family members than do low EE relatives, but are actually themselves more controlling. Their high control predicts relapse in schizophrenia but not depression. Gooding & Tallent (pp. 1101–1107) find that schizophrenics show atypical perceptual biases in response to emotional chimeric faces. Malla *et al*. (pp. 1109–1119) report predictors of outcome at 1 year of first-episode psychosis, including some potential modifiable factors such as medication adherence and residual symptoms.

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