

UNIVERSITY OF LEEDS
School of Psychology

Semester 1, 2019-2020

PSYC2503 & PSYC3403
(MM7615 on Minerva)

PSYCHOLOGICAL DISORDERS
Syllabus & Reading Lists

Course Tutors

Professor John Rodgers (r.j.rodgers@leeds.ac.uk)

Professor Anna Madill (a.l.madill@leeds.ac.uk)

**This handout and all lecture slides can be accessed in the module area (MM7615) on
Minerva**

*Tip for printing lecture slides: under File Menu - select 'print'; under Print What – select 'handouts – (6
slides per page); for clearest format – tick 'pure black & white' box; then OK.*

Course Aims & Learning Objectives

This module introduces you to psychological and biological perspectives on mental disorder. In Anna Madill's (abnormal psychology; AM) lectures, we take a critical approach to the meaning of abnormality, conceptual models for understanding this field, and theories, research and treatments associated with several key disorders. In John Rodgers' (biological psychology, JR) lectures, we further develop your appreciation of brain and behaviour through in-depth study of the role of brain chemistry in the major disorders. Following a review of the general principles of neurotransmission/drug action and discussion of common research strategies, we critically assess the major biochemical theories of mental disorder (depression, anxiety & schizophrenia). We consider how and why these theories have changed over time and, importantly, how they relate to the mechanisms of action of psychotherapeutic drugs. In each instance, attention will be given to the limitations of existing drugs & progress towards the development of novel therapies.

As a result of doing this module (lectures & independent reading), you should be able to:

- 1) understand the DSM system for classifying psychological disorders.
- 2) explain the different models for understanding psychological disorders and their inter-relationships.
- 3) describe the signs and symptoms of depressive disorders, anxiety disorders, obsessive-compulsive disorder and schizophrenia.
- 4) review & critically evaluate the major psychological theories & therapies for these disorders.
- 5) review & critically evaluate the major biochemical theories & pharmacotherapies for these disorders.

Tutorial

Please refer to your timetable for the scheduling of the tutorial for this module.

Assessment

Feedback on progress (formative assessment) will be given via three MCQ class tests (see below).

Examination (summative assessment) will occur at the end of the Semester (see below).

NOTE : good exam answers demand evidence of reading beyond lecture slides & core texts

You can access past exam papers via the SES website:

http://students.leeds.ac.uk/info/10111/examinations_and_assessment/825/past_exam_papers

Psychology Students, PPST, Exchange Students & JYA Students (all PSYC2503)

This course is formally assessed by one 2-hour unseen written exam (100%) held in the first semester examination period (January). The examination paper comprises two sections. Section 1 is a compulsory 30-item MCQ covering all aspects of the module (15 items 'psychological'; 15 items 'biological') while, in Section 2, students must write one essay from a choice of four titles covering the module (2 'psychological' titles and 2 'biological' titles). For further details, check

<http://webprod3.leeds.ac.uk/catalogue/dynmodules.asp?Y=201718&M=PSYC-2503>

Intercalating Students/JHons (PSYC3403)

This course is assessed by a 500-word assignment (20%) plus a 2-hour unseen written exam (80%) held in the first semester examination period (January). Details of the 500-word assignment will be posted on Minerva. **Please check the Undergraduate Psychology Handbook for the hand-in date.**

The examination paper comprises two sections. Section 1 is a compulsory 30-item MCQ covering all aspects of the module (15 items 'abnormal'; 15 items 'biological') while, in Section 2, students must write one essay from a choice of four titles covering the module (2 'psychology' titles and 2 'biological' titles). For further details, check

<http://webprod3.leeds.ac.uk/catalogue/dynmodules.asp?Y=201718&M=PSYC-3403>

All coursework deadlines are at 12 noon. Specific dates are published in the Psychology Undergraduate Handbook on Minerva.

Lectures: Time and Place

Lectures will be held over **weeks 1-10** in **Semester 1**
Mondays 12.30-2.00pm (Michael Sadler RBLT): CHECK MOST RECENT TIMETABLE

There will be 10 sessions in total, comprising 4 lectures by Anna Madill (psychological approaches; AM) and 6 lectures by John Rodgers (biological psychology; JR). Although scheduled for 90 min, actual lecture duration may vary on either side of this average. There will be three, short in-class MCQ practice tests. The lecturer will provide the correct answers. These tests are intended to provide you with feedback on your developing knowledge base and do not contribute to formal module assessment.

Exam feedback session
Thursday 28th February 10-11am G44 in the Psychology building

Lecture Timetable: Overview

Week 1

Mon Sept 30 **Lecture 1:** Abnormal psychology; Classification and models of mental disorder (AM)

Week 2

Mon Oct 7 **Lecture 2:** Psychological approaches to depression (AM) → *MCQ class test*

Week 3

Mon Oct 14 **Lecture 3:** Psychological approaches to anxiety (AM)

Week 4

Mon Oct 21 **Lecture 4:** Psychological approaches to schizophrenia (AM) → *MCQ class test*

Week 5

Mon Oct 28 **Lecture 5:** Biological approach to mental disorder; neurons & how they work (JR)

Week 6

Mon Nov 4 **Lecture 6:** Drug action in the CNS, & general research strategies (JR)

Week 7

Mon Nov 11 **Lecture 7:** Biochemistry & pharmacology of depression (JR)

Week 8

Mon Nov 18 **Lecture 8:** Electroconvulsive Therapy (ECT) (JR) → *MCQ class test*

Week 9

Mon Nov 25 **Lecture 9:** Biochemistry & pharmacology of anxiety (JR)

Week 10

Mon Dec 2 **Lecture 10:** Biochemistry & pharmacology of schizophrenia (JR)

Core Reading

PLEASE SEE LIBRARY SOURCE-LINK VERSION ON MINERVA (MODULE LEARNING RESOURCES SECTION) THROUGH WHICH YOU ARE A MERE CLICK AWAY FROM EACH READING

Anna Madill's Lectures

Core Text

Comer, R. J. (2016). Fundamentals of Abnormal Psychology. 10th Ed. MacMillan.

Any recent textbook on Abnormal Psychology will be useful for this half module. Make sure, though, that the textbook is published post-2013 and refers to the DSM-5 classificatory system. The following source should be used selectively to supplement lecture notes and the core text.

Recommended Library Consultations

Tyrer, P., & Steinberg, D. (2013). Models for mental disorder. 5e. Wiley Blackwell.

Any edition of this book that is in the library will be fine if you cannot access 5th edition.

John Rodgers' Lectures

Core Text

Linden, D. (2019). The Biology of Psychological Disorders. Second Edition. Red Globe Press (Macmillan International Higher Education).

Lecture-by-Lecture Reading

The following is a list of reading to support each lecture. Obviously this is quite a long list and we do **NOT** expect you to read all these references! What we have done is to provide you with a list of all the references used in lectures plus some more from which you can select according to your revision strategy and interest. Learning to be economical while selecting pertinent material is a skill essential to your academic development. **The more important references are marked with an asterisk.**

You can access these readings online through the module Minerva online course reading folder.

CLASSIFICATION AND MODELS OF MENTAL DISORDER

Anna Madill

Chapters 1, 2 & 3: CORE TEXT [Comer, 2016]

Dip into Tyrer and Steinberg (2013) especially the final chapter. (Any edition of this book that is in the library will be fine if you cannot access 5th edition)

Highlights of changes from DSM-IV-TR to DSM-5 and further proposed changes: APA
<http://www.dsm5.org/Documents/changes%20from%20dsm-iv-tr%20to%20dsm-5.pdf>

PSYCHOLOGICAL APPROACHES TO DEPRESSION

Anna Madill

Chapter 6: CORE TEXT [Comer 2016]

- *Abramson, L. Y., Seligman, M. E. P., & Teasdale, J. (1978). Learned helplessness in humans: Critique and reformulation. *Journal of Abnormal Psychology, 87*, 49-74.
- Ainsworth, M. D. & Bowlby, J. (1991). An ethological approach to personality development. *American Psychologist, 46*, 331-341.
- Blatt, S. J., & Homann, E. (1992). Parent-child interaction in the etiology of dependent and self-critical depression. *Clinical Psychology Review, 12*, 47-91.
- Bornstein, R. F. (1992). The dependent personality: Developmental, social, and clinical perspectives. *Psychological Bulletin, 112*, 3-23.
- Brown, G. W. & Harris, T. O. (1978). *Social Origins of Depression: A Study of Psychiatric Disorder in Women*. London: Tavistock.
- Carter, J. S., & Garber, J. (2011). Predictors of the first onset of a major depressive episode and changes in depressive symptoms across adolescence: stress and negative cognitions. *Journal of Abnormal Psychology, 120*, 779-796.
- Constantino et al. (2012). The relation between changes in patients' interpersonal impact messages and outcome in treatments for chronic depression. *Journal of Consulting and Clinical Psychology, 80*, 354-364.
- Freud, S. (1917). *Mourning and Melancholia*. Collected works.
- *Harré, R., & Finlay-Jones, R. (1986). Emotion talk across times. In R. Harré (Ed.), *The Social Construction of Emotions*. Oxford: Blackwell.
- Hiroto, D. S. (1974). Locus of control and learned helplessness. *Journal of Experimental Psychology, 102*, 187-193.
- Holmes T.H. & Rahe R.H. (1967). The social readjustment rating scale. *Journal of Psychosomatic Research, 11*, 213–218.
- Hundt, N. E., Mignogna, J., Underhill, C., & Cully, J. A. (2012). The relationship between use of CBT skills and depression treatment outcome: A theoretical and methodological review of the literature. *Behavior Therapy, 44*, 12-26.
- Kessler, R. C. & Evelyn J. Bromet, E. J. (2013). The epidemiology of depression across cultures. *Annual Review of Public Health, 34*, 119-138.
- Klerman, G. L. (2004). *Interpersonal Psychotherapy of Depression*. Roman & Littlefield.
- Lemmens, L. H., Arntz, A., Peeters, F. P., Hollon, S. D., Roefs, A., & Huibers, M. J. (2011). Effectiveness, relapse prevention and mechanisms of change of cognitive therapy vs. interpersonal therapy for depression: Study protocol for a randomised controlled trial. *Trials, 12*, 150.

- Lewinsohn, P. M., Youngren, M. A., & Grosscup, S. J. (1979). Reinforcement and depression. In R. A. Depue (Ed.), *The Psychobiology of the Depressive Disorders*. New York: Academic Press.
- Lewinsohn et al. (1994). Adolescent psychopathology: 2. Psychosocial risk factors for depression. *Journal of Abnormal Psychology, 103*, 302-315.
- Maier, S. F. & Seligman, M. E. P. (1976). Learned helplessness: Theory and evidence. *Journal of Experimental Psychology, 105*, 3-46.
- Moore, M. T., & Fresco, D. M. (2012). Depressive realism: A meta-analytic review. *Clinical Psychology Review, 32*, 496-509.
- *Perris, C. (1991). An interactionistic integrating view of depressive disorders and their treatment. *Acta Psychiatrica Scandinavica, 84*, 413-423. (Sorry it's an old reference but can't find a more recent one that pulls together all the basics so well)
- Roshanaei-Moghaddam, B., Pauly, M. C., Atkins, D. C., Baldwin, S. A., Stein, M. B., & Roy-Byrne, P. (2011). Relative effects of CBT and pharmacotherapy in depression versus anxiety: Is medication somewhat better for depression, and CBT somewhat better for anxiety?. *Depression and Anxiety, 28*, 560-567.
- *Stegenga, B. T. et al. (2012). Recent life events pose greatest risk for onset of major depressive disorder during mid-life. *Journal of Affective Disorders, 136*, 505-513.
- Whisman, M. A. & Schonbrun, Y. C. (2010). Marital distress and relapse prevention for depression (pp. 251-269). In C. S. Richards & J. G. Perri (Eds), *Relapse Prevention for Depression*. APA.
- Willoughby, R. (2013). Notes on psychologies of vulnerability (pp. 16-34). G. Brotherton & M. Cronin (Eds.), *Working with Vulnerable Children, Young People and Families*. Routledge.
- http://books.google.co.uk/books?hl=en&lr=&id=gaAqAAAAQBAJ&oi=fnd&pg=PA16&dq=childhood+%22adult+vulnerability+to+depression+%22&ots=nGkrs_Mgc0&sig=Ob1sDWurEhkSmEQePLUsNdArEzM#v=onepage&q=childhood%20%22adult%20vulnerability%20to%20depression%20%22&f=false

PSYCHOLOGICAL APPROACHES TO ANXIETY DISORDERS AND OBSESSIVE-COMPULSIVE DISORDER

Anna Madill

Chapter 4: CORE TEXT [Comer, 2016]

- Bandura, A. (1986). Fearful expectations and avoidant actions as coeffects of personal self-inefficacy. *American Psychologist, 41*, 1389-91.
- Baxter, A. J., Scott, K. M., Vos, T., & Whiteford, H. A. (2013). Global prevalence of anxiety disorders: a systematic review and meta-regression. *Psychological Medicine, 43*, 897–910.
- Bond, A. J. & Lader, M. H. (1996). *Understanding Drug Treatment in Mental Health Care*. Chichester, UK: Wiley.
- Bram, A. & Bjorgvinsson, T. (2004). A psychodynamic clinician's foray into cognitive-behavioral therapy utilizing exposure-response prevention for obsessive-compulsive disorder. *American Journal of Psychotherapy, 58*, 304-320.
- Clark, D. M. (1996). Panic disorder: From theory to therapy (pp. 318-344). In P. M. Salkovskis (Ed.), *Frontiers of Cognitive Therapy*. NY: Guilford Press.
- Deacon B. J. & Abramowitz, J. S. (2004). Cognitive and behavioral treatments for anxiety disorders: A review of meta-analytic findings. *Journal of Clinical Psychology, 60*, 429–441.
- *Huppert, J. D. (2009). Anxiety disorders and depression comorbidity (pp. 576-586). In M. M. Anthony & M. B. Stein (Eds),. *Oxford Handbook of Anxiety and Related Disorders*. Oxford University Press. http://pluto.huji.ac.il/~huppertj/Anxiety_Disorders_and_Depression_Comorbidity.pdf

- Marques et al. (2011). Cross-cultural variations in the prevalence and presentation of anxiety disorders. *Expert Review of Neurotherapeutics*, 11, 313-322.
- McGehee, R. H. (2005). Child psychoanalysis and obsessive-compulsive symptoms: The treatment of a ten-year-old boy. *Journal of the American Psychoanalytic Association*, 53, 213-237.
- McShane, K. M. (2011). Mental health in Haiti: A resident's perspective. *Academic Psychiatry*, 35, 8-10.
- Mowrer, O. H. (1947). On the dual nature of learning: A reinterpretation of 'conditioning' and 'problem-solving'. *Harvard Educational Review*, 17, 102-148.
- Mineka, S., Watson, D. & Clark, L. A. (1998). Comorbidity of anxiety and unipolar mood disorders. *Annual Review of Psychology*, 49, 377-412.
- Mukhopadhyay, P., Tarafder, S., Bilimoria, D. D., Paul, D., & Bandyopadhyay, G. (2010). Instinctual impulses in obsessive compulsive disorder: A neuropsychological and psychoanalytic interface. *Asian journal of psychiatry*, 3, 177-185.
- *Seligman, M. E. P. (1971). Phobias and preparedness. *Behavior Therapy*, 2, 307-320.
- Tzouramanis, P. et al. (2009). Evaluation of cognitive-analytic therapy (CAT) outcome in patients with panic disorder. *Psychiatrike= Psychiatriki*, 21, 287-293.
- Opris, D. et al. (2012). Virtual reality exposure therapy in anxiety disorders: A quantitative meta-analysis. *Depression and Anxiety*, 29, 85-93.
- *Watson, J. B., & Rayner, R. (1920). Conditioned emotional reactions. *Journal of Experimental Psychology*, 3, 1-14.
- Wolpe, J. (1958). *Psychotherapy by Reciprocal Inhibition*. Stanford, CA: Stanford University Press.
- Wilkinson, R. & Pickett, K. (2009). *The Spirit Level*. Allen Lane.

PSYCHOLOGICAL APPROACHES TO SCHIZOPHRENIA

Anna Madill

Chapter 12: CORE TEXT [Comer, 2016]

- Ayllon, T. & Michael, J. (1959). The psychiatric nurse as a behavioral engineer. *Journal of Experimental Analytical Behavior*, 2, 323-334.
- Bebbington, P. E. & Kuipers, E. (2011). Schizophrenia and psychosocial stresses (pp. 599-624). In D. R. Weinberg & P. Harrison (Eds.), *Schizophrenia*. NJ: Wiley-Blackwell.
- Beck, A. T. & Rector, N. A. (2000). Cognitive therapy of schizophrenia: A new therapy for the new millennium. *American Journal of Psychotherapy*, 54, 291-300.
- Benton, M. K. & Schroeder, H. E. (1990). Social skills training with schizophrenics: A meta-analytic evaluation. *Journal of Consulting and Clinical Psychology*, 58, 741-747.
- Bleuler, E. (1915/1950). *Dementia Praecox or the Group of Schizophrenias*. New York: International Universities Press.
- Burbach, F. R. et al. (2010). Family interventions for first episode psychosis (pp. 210-225). In P. French et al. (Eds.), *Promoting Recovery in Early Psychosis: A Practice Manual*. NJ: Wiley-Blackwell.
- Burns, T. & Drake, B. (2011). Mental health services and patients with schizophrenia. In D. R. Weinberg & P. Harrison (Eds.), *Schizophrenia*, NJ: Wiley: Blackwell.
- Fernando, S (Ed.) (1995). *Mental Health in a Multi-Ethnic Society: A Multi-Disciplinary Handbook*. London: Routledge.

- *Fox, J. W. (1990). Social class, mental illness, and social mobility: The social selection-drift hypothesis for serious mental illness. *Journal of Health and Social Behavior*, 31, 344-353.
- *Freeman, D. & Garety, P. A. (2004). Bats amongst the birds. *The Psychologist*, 17, 642-645.
- Freud, S. (1924). The loss of reality in neurosis and psychosis. In *Sigmund Freud's Collected Papers* (Vol 2, pp. 272-282). London: Hogarth Press.
- Fromm-Reichmann, F. (1948). Notes on the development of treatment of schizophrenics by psychoanalytic psychotherapy. *Psychiatry*, 11, 263-273.
- Galderisi, S. (2013). Improving schizophrenia outcome. *European Psychiatry*, 28, 1.
- Gottdiener, W. H. (2006) Individual psychodynamic psychotherapy of schizophrenia: Empirical evidence for the practicing clinician. *Psychoanalytic Psychology*, 23, 583-589.
- Gunter, M. (2005). Individual psychotherapy versus milieu therapy in childhood and adolescence. *Therapeutic Communities*, 26, 163-173.
- Hayes, S. C & Lillis, J. (2012). *Acceptance and Commitment Therapy: Theories of Psychotherapy Series*. Washington, DC: APA.
- Huxley, N. A., Rendall, M., & Sederer, L. (2000). Psychosocial treatments in schizophrenia: A review of the past 20 years. *Journal of Nervous and Mental Disease*, 188, 187-201.
- Jung, C. G. (1953). Psychiatric activities. In, *Memories, Dreams, Reflections*. London: Collins.
- Lawson, W. B. (2008). Schizophrenia in African Americans (pp. 616-623). In K. T. Mueser & D. V. Jeste (Eds.), *Clinical Handbook of Schizophrenia*. NY: Guilford Press.
- *Longden, E., Madill, A., & Waterman, M. (2012). Dissociation, trauma, and the role of lived experience: Towards a new conceptualisation of voice hearing. *Psychological Bulletin*, 138, 28-76.
- Mechanic D., McAlpine, D. Rosenfield, S. & Davis, D. (1994). Effects of illness, attribution and depression on the quality of life among persons with serious mental illness. *Social Science & Medicine*, 39, 155-164.
- Morrison A.P. et al (2014). Cognitive therapy for people with schizizophrenia specturm disorders not taking antipsychotic drugs: a single-blind randomised controlled trial. *The Lancet* 383 (9926), 1395-1403.
- National Institute for Clinical Excellence (2002). *Schizophrenia: Core Interventions in the Treatment and Management of Schizophrenia in Primary and Secondary Care*. London: Author.
- Rosenfarb et al. (2000). Neurocognitive vulnerability, interpersonal criticism, and the emergence of unusual thinking by schizophrenic patients during family transactions. *Archives of General Psychiatry*, 57, 1174-1179.
- Russinova, A. et al. (2002). Correlates of vocational recovery for persons with schizophrenia. *International Review of Psychiatry*, 14, 33-311.
- Saha, S. et al. (2005). A systematic review of the prevalence of schizophrenia. *PLoS Medicine*, 2, e141.
- Sullivan, H. S. (1953). *The Interpersonal Theory of Psychiatry*. New York: Norton.
- Swartz et al. (2012). Psychological therapies (pp. 207-224). In J. A. Lieberman et al. (Eds.), *Essentials of Schizophrenia*. Arlington, VA: American Psychiatric Publishing.
- Tost, H. & Meyer-Lindenberg, A. (2012). Puzzling over schizophrenia: Schizophrenia, social environment and the brain. *Nature Medicine* 18, 211-213.
- Warner, R. (1994). *Psychiatry and the Political Economy*. London: Routledge.
- Willick, M. S. (2001). Psychoanalysis and schizophrenia: A cautionary tale. *Journal of the American Psychoanalytical Association*, 49, 27-56.

Lectures 5 & 6: BIOLOGICAL APPROACH TO MENTAL DISORDER; DRUG ACTION IN CNS

John Rodgers

Textbook sources are generally sufficient for these two foundational lectures. More specifically,

Chapters 2, 8 & 9 in the CORE TEXT [Linden 2019]

Also useful are

Chapters 1-4 in **Carlson NR**, *THE PHYSIOLOGY OF BEHAVIOR* 10e, Allyn & Bacon (2010)

NOTE: *Carlson also has a chapter or two on mental illness which provide a relatively gentle introduction to key themes and concepts covered in this module*

Illustrative papers on the efficacy of combination therapies

deJonghe F et al (2001). Combining psychotherapy and antidepressants in the treatment of depression. **Journal of Affective Disorders** 64: 217-229.

Kupfer DJ & Frank E (2001). The interaction of drug- and psychotherapy in the long-term treatment of depression. **Journal of Affective Disorders** 62: 131-137.

Mitte K (2005). Meta-analysis of cognitive-behavioral treatments for generalized anxiety disorder: a comparison with pharmacotherapy. **Psychological Bulletin** 131: 785-795.

Van Apeldoorn FJ et al. (2008). Is a combined therapy more effective than either CBT or SSRI alone? Results of a multicenter trial on panic disorder with or without agoraphobia. **Acta Psychiatrica Scandinavica** 117: 260-270.

Lynch D et al (2010). Cognitive behavioural therapy for major psychiatric disorder: does it really work? A meta-analytical review of well-controlled trials. **Psychological Medicine** 40: 9-24.

Browning M et al (2011). Using an experimental medicine model to explore combination effects of pharmacological and cognitive interventions for depression and anxiety. **Neuropsychopharmacology** 36: 2689-2697.

BIOCHEMISTRY & PHARMACOLOGY OF DEPRESSION

John Rodgers

Chapter 13: CORE TEXT [Linden 2019]

*Collier DA et al (1996). A novel functional polymorphism within the promotor of the serotonin transporter gene: possible role in susceptibility to affective disorders. **Molecular Psychiatry** 6: 453-460.

Fava M & Kendler KS (2000). Major depressive disorder. **Neuron** 28: 335-341.

*Vetulani J & Nalepa I (2000). Antidepressants: past, present and future. **European Journal of Pharmacology** 405: 351-363.

*Pariante CM & Miller AH (2001). Glucocorticoid receptors in major depression: relevance to pathophysiology and treatment. **Biological Psychiatry** 49: 391-404.

*Pichot W et al. (2001). HPA axis dysfunction in major depression: relationship to 5-HT_{1A} receptor activity. **Neuropsychobiology** 44: 74-77.

Spillman MK et al. (2001). Tryptophan depletion in SSRI-recovered depressed patients. **Psychopharmacology** 155: 123-127.

*Caspi A et al. (2003). Influence of life stress on depression: moderation by a polymorphism in the 5-HTT gene. **Science** 301: 386-389.

*Katz MM et al (2004) Onset and early behavioral effects of pharmacologically different antidepressants and placebo in depression. **Neuropsychopharmacology** 29: 566-579.

Schloss P, Henn FA (2004). New insights into the mechanisms of antidepressant therapy. **Pharmacology & Therapeutics** 102: 47-60.

Healy D (2004). **Let Them Eat Prozac**. The unhealthy relationship between the pharmaceutical industry and depression. New York University Press, New York and London.

Posternak MA, Zimmerman M (2005). Is there a delay in the antidepressant effect? A meta-analysis. **Journal of Clinical Psychiatry** 66: 148-158.

Willis-Owen SA et al (2005). The serotonin transporter length polymorphism, neuroticism and depression: a comprehensive assessment of association. **Biological Psychiatry** 58: 451-456.

*Willner P et al (2005). Dopaminergic mechanism of antidepressant action in depressed patients. **Journal of Affective Disorders** 86: 37-45.

~~*Caspi A & Moffitt TE (2006) Gene-environment interactions in psychiatry: joining forces with neuroscience. **Nature Reviews: Neuroscience** 7: 583-590~~

Taylor MJ et al (2006). Early onset of selective serotonin reuptake inhibitor antidepressant action. **Archives of General Psychiatry** 63: 1217-1223.

Dunlop BW & Nemeroff CB (2007). The role of dopamine in the pathophysiology of depression. **Archives of General Psychiatry** 64: 327-337.

*Papakostas GI et al (2007). Are antidepressant drugs that combine serotonergic and noradrenergic mechanisms of action more effective than the selective serotonin reuptake inhibitors in treating major depressive disorder? A meta-analysis of studies of newer agents. **Biological Psychiatry** 11: 1217-1227.

*Harmer CJ (2008). Serotonin and emotional processing: does it help explain antidepressant drug action? **Neuropharmacology** 55: 1023-1028.

~~*Fox E et al. (2009). Looking on the bright side: biased attention and the human serotonin transporter gene. **Proceedings of the Royal Society B**, 276: 1747-1751.~~

Harmer CJ et al (2009). Why do antidepressants take so long to work? A cognitive neuropsychological model of antidepressant drug action. **British Journal of Psychiatry** 195: 102-108.

Tranter R et al (2009). The effect of serotonergic and noradrenergic antidepressants on face emotion processing in depressed patients. **Journal of Affective Disorders** 118: 87-93.

*Della Pasqua O et al (2010). The missing link between clinical endpoints and drug targets in depression. **Trends in Pharmacological Sciences** 31: 144-152.

~~*Caspi A et al (2010). Genetic sensitivity to the environment: the case of the serotonin transporter gene and its implications for studying complex diseases and traits. **American Journal of Psychiatry** 167: 509-527.~~

Uher R, McGuffin P (2010). The moderation by the serotonin transporter gene of environmental adversity in the etiology of depression: 2009 update. **Molecular Psychiatry** 15: 18-22.

*Karg K et al. (2011). The serotonin transporter promoter variant (5-HTTLPR), stress and depression meta-analyses revisited: evidence of genetic moderation. **Archives of General Psychiatry** 68: 444-454.

Krystal JH et al. (2013). Rapid-acting glutamatergic antidepressants: the path to ketamine and beyond. **Biological Psychiatry** 73: 1133-1141.

~~Bradley AJ and Lonox-Smith AJ (2013). Does adding noradrenaline reuptake inhibition to selective serotonin reuptake inhibition improve efficacy in patients with depression? A systematic review of meta-analyses and large randomised pragmatic trials. **Journal of Psychopharmacology** 27: 74-758.~~

*Argyropoulos SV and Nutt DJ (2013). Anhedonia revisited: is there a role for dopamine-targeting drugs for depression? **Journal of Psychopharmacology** 27: 869-877.

Brown ES et al. (2014). Association of depressive symptoms with hippocampal volume in 1936 adults. **Neuropsychopharmacology** 39: 770-779.

*Fond G et al (2014). Ketamine administration in depressive disorders: a systematic review and meta-analysis. **Psychopharmacology** 231: 3663-3676.

Hagele C et al (2015). Dimensional psychiatry: reward dysfunction and depressive mood across psychiatric disorders. **Psychopharmacology** 232: 331-341.

*Korte et al (2015). The many different faces of major depression: is it time for personalised medicine? **European Journal of Pharmacology** 753: 88-104.

Brown ES et al. (2015). Hippocampal volume in healthy controls given 3-day stress doses of hydrocortisone. **Neuropsychopharmacology** 40: 1216-1221.

*Otte C et al (2016). Major depressive disorder. **Nature Reviews Disease Primers** 2: article number 16065. <https://doi.org/10.1038/nrdp.2016.65>

*Jacobsen JPR et al (2016). Adjunctive 5-hydroxytryptophan slow-release for treatment resistant depression: clinical and preclinical rationale. **Trends in Pharmacological Sciences** 37: 933-944.

Wilkinson ST et al (2017). The effect of a single dose of intravenous ketamine on suicidal ideation: a systematic review and individual participant data meta-analysis. **American Journal of Psychiatry**, **Published Online:** 3 Oct 2017 <https://doi-org.wam.leeds.ac.uk/10.1176/appi.ajp.2017.17040472>

~~*Cipriani A et al (2018). Comparative efficacy and acceptability of 21 antidepressant drugs for the acute treatment of adults with major depressive disorder: a systematic review and network meta-analysis. **The Lancet** 391: 1357-1366.~~

*Culverhouse RC et al (2018). Collaborative meta-analysis finds no evidence of a strong interaction between stress and 5-HTTLPR genotype contributing to the development of depression. **Molecular Psychiatry** 23: 133-142.

Block TS et al (2018). Combined analysis of mifepristone for psychotic depression: plasma levels associated with clinical response. **Biological Psychiatry** 84: 46-54.

*Moda-Sava RN et al (2019). Sustained rescue of prefrontal circuit dysfunction by antidepressant-induced spine formation. **Science** 364: eaat8078 12 April 2019.

*Undurraga J, Baldessarini RJ (2019). Direct comparison of tricyclic and serotonin-reuptake inhibitor antidepressants in randomized head-to-head trials in acute major depression: systematic review and meta-analysis. **Journal of Psychopharmacology** 31: 1184-1189

*Border R et al (2019). No support for historical candidate gene or candidate gene-by-interaction hypotheses for major depression across multiple large samples. **American Journal of Psychiatry** 176: 376-387.

ELECTROCONVULSIVE THERAPY [E.C.T.]

John Rodgers

Not well covered in CORE TEXT [Chapter 10, Linden 2019]
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BIOCHEMISTRY & PHARMACOLOGY OF ANXIETY

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BIOCHEMISTRY & PHARMACOLOGY OF SCHIZOPHRENIA

John Rodgers

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Anna Madill/John Rodgers/September 2019