

In other journals

7 M A Y

BIPOLAR DEPRESSION — DO ADJUNCTIVE ANTIDEPRESSANTS WORK?

Using an adjunctive antidepressant medication as well as a mood stabiliser in patients with bipolar depression may not be useful, according to US researchers. In a double-blind, placebo-controlled study, 179 subjects with bipolar depression were randomly assigned to treatment with a mood stabiliser plus antidepressant therapy or mood stabiliser plus placebo. The primary outcome was the number of patients achieving durable recovery (8 consecutive weeks of euthymia). The rate of switch to mania or hypomania was also examined. No significant differences were found between the two groups in rates of durable recovery, nor was there a difference in the number of subjects experiencing mania or hypomania. The authors concluded that mood-stabilising therapy provides equal benefit to adjunctive therapy with antidepressant medication in these patients and called for further research into the effectiveness of various mood stabilisers in the treatment of bipolar disorder.

N Engl J Med Online, 28 Mar 2007

TODDLER TAMING

Parenting programs can be effective in improving outcomes for children at risk of developing a conduct disorder, a Welsh study has suggested. Researchers conducted a randomised controlled trial involving 153 parents from socially disadvantaged areas,

using the Webster-Stratton “Incredible Years” intervention program. The 12-week intervention teaches key parenting skills and gives support to parents of preschool children assessed as being at risk of developing a conduct disorder. Antisocial and hyperactive behaviour were significantly reduced in the intervention group of children, as were levels of parental stress and depression. The authors comment that the disappointing results from similar programs in England need to be further explored.

BMJ 2007; 334: 678-684

SAFETY VALVES

Prosthetic valve endocarditis (PVE) is associated with significant morbidity and mortality and accounts for a large percentage of cases of infective endocarditis worldwide. A large prospective cohort study involving patients from 28 countries has shed some light on the prevalence, clinical characteristics, and outcome of this considerable problem. The International Collaboration on Endocarditis collected data from over 3000 patients with infective endocarditis from 61 centres around the world. The leading causative pathogen of PVE is *Staphylococcus aureus*, with the aortic valve the commonest prosthetic valve involved. The first year after implantation is the highest risk period for the development of PVE, with health-care associated PVE accounting for 36.5% of infections.

JAMA 2007; 297: 1354-1361

TURNING UP THE HEAT ON ASTHMA

Bronchial thermoplasty, a bronchoscopic procedure that reduces airway smooth muscle mass, can improve long-term asthma control, according to an international randomised controlled trial. A total of 112 patients with asthma were selected. All patients had been treated with inhaled corticosteroids and long-acting β_2 adrenergic agonists (LABA), and only those with impaired asthma control when LABA were withdrawn were included in the

trial. Subjects were randomly assigned to either bronchial thermoplasty or a control group and underwent a 2-week period without use of LABA prior to commencement of the treatment trial. After 12 months, the mean number of mild exacerbations was found to be less in the thermoplasty group compared with the control group, with approximately 10 fewer mild exacerbations per patient per year in the thermoplasty group. Despite a higher frequency of adverse events in the subjects undergoing bronchial thermoplasty, particularly in the immediate post-intervention period, the authors comment that the therapy appears to be beneficial in reducing mild exacerbations, with the effect lasting at least 1 year after treatment.

N Engl J Med 2007; 356: 1327-1337

DRY NIGHTS, HAPPY DAYS

Children who experience nocturnal enuresis after 5 years of age can be successfully managed with a community-based program using body-worn alarms, without pharmacological intervention, an Australian study has shown. Researchers report on the establishment of a continence clinic within a suburban paediatric practice, where over 500 children aged 5 years or older were involved in the study. After selection to ensure no predisposing medical problems, children were given body-worn enuresis alarms and followed up regularly at the clinic, including attendance at support programs with their parents. A total of 79% of the children achieved nocturnal dryness, with a further 13% reporting a reduction in the number of wet nights. The mean time to achieve dryness was 10.4 weeks, with a significant gender difference, the time being greater for boys. The authors conclude that good results in treating nocturnal enuresis can be achieved using alarms without pharmacological intervention, if sufficient support is offered in a community setting.

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Dr Tanya Grassi, MJA

