



## Editorial

**Siegfried Kasper (Chief Editor)**

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## EDITORIAL

Dear colleagues,

It is my great pleasure to introduce to you our last issue of 2014 focusing on biological and cognitive aspects of substance use disorders and eating disorders as well as treatment strategies in ADHD.

In order to examine the hypothesis that patients with eating disorders have a bias towards local information at the expense of global integration (weak central coherence), Lang and colleagues reviewed current literature and performed meta-analyses on 16 studies. In addition to corroborating the results of previous studies by providing evidence of **inefficient global processing**, analyses provided evidence of **superior local processing**, which is interpreted as **supporting the weak central coherence hypothesis in eating disorders**.

By using positron emission tomography to measure [ $^{18}\text{F}$ ]MPPF, a selective 5-HT<sub>1A</sub> receptor antagonist with a serotonin-like affinity, Galusca and co-workers examined changes of **brain serotonergic activity** in patients with purging-type **bulimia nervosa**. Results showed symmetrical large clusters of increased [ $^{18}\text{F}$ ]MPPF binding in insula, temporo-parietal corex, prefrontal cortex, limbic cortex, paralimbic cortex and raphe nuclei.

Introducing our second topic, Keshvarzi and colleagues tested the **effectiveness of a 12-week sleep training programme** in improving emotional, social and behavioural functioning in **children with ADHD**. Analyses revealed that sleep improved quantitatively and qualitatively in the intervention group. More specifically, children in the intervention group reported improvements of mood, emotions and relationships, their parents observed also improvements in physical well-being and social acceptance, when

compared to the ADHD group without intervention and to healthy controls.

Heralding our third topic, Peles and colleagues examined **sleep indices and cognitive status** with respect to methadone **take-home doses (THD)** privileges in patients with **methadone maintenance treatment**. The authors found patients who never had THD to show the highest rates of poor sleep, daily sleepiness and impaired cognitive status. Using cognitive tests as part of the decision for dispensing THD is discussed.

In a longitudinal study covering 20 years, Peles and co-workers aimed to characterize lifetime psychiatric diagnosis groups among **methadone maintenance treatment patients and associations of diagnosis to long-term retention and survival**. Results revealed that solely Axis II patients (personality disorders) had the worst mean long-term retention when compared to patients with either Axis I, Axis I & II or no psychiatric diagnosis. Mean survival since admission was found to be similar for all groups.

Finally, a brief report by Hong and colleagues addressed the association between inhalant misuse and subcortical brain volumes in adolescents. The authors found **decreased right thalamic volumes in adolescent inhalant users** and a negative correlation between thalamic volume and severity of inhalant use in the subgroup of Korean participants. These findings seem to support a particular sensitivity of the thalamus to damage following chronic inhalant exposure during adolescence.

Yours sincerely,

Siegfried Kasper, MD  
Chief Editor