CLINICAL CAPSULES

Pituitary Volume Steady in Bipolar

No differences were found in pituitary gland volume between 16 bipolar children and 21 healthy controls, said Hua Hsuan Chen of the University of Texas, San Antonio, and colleagues.

Studies of bipolar adults have shown a reduced pituitary volume compared with healthy controls, so the researchers examined young patients to determine whether these differences were present early in the disease (Depress. Anxiety 2004;20:182-6). MRI scans showed an unadjusted mean volume of 0.73 mL among the bipolar children (mean age, 15 years) and 0.69 mL among the control children. This similarity suggests that ongoing hypothalamus and pituitary dysfunction might contribute to the volume differences over time.

Continuum of Eating Disorders Seen

Subclinical eating disorders were diagnosed in 7% of 259 female students aged 17-20 years, reported Paolo Cotrufo, Ph.D., of the University of Naples, Caserta, Italy, and associates.

The investigators sought to characterize less severe forms of eating disorders. The girls completed a sociodemographic questionnaire, the General Health Questionnaire, and the Eating Disorder Inventory 2 (ED2). The ED2 consists of 11 subscales, including drive for thinness, bulimia, and body dissatisfaction. Two psychologists interviewed the 49 girls who scored at least 14 on the drive for thinness scale. Each girl completed the ED2 Symptom Checklist, which measures eating attitudes, compensatory strategies, and menstrual regularity (J. Adolesc. 2005;28:147-54).

Two girls met the criteria for full-blown bulimia nervosa, nine met partial criteria for bulimia, one met partial criteria for binge-eating disorder, 15 met the criteria for subclinical anorexia, and three met the criteria for subclinical bulimia. The other 19 were false-positive cases. The higher prevalence of subclinical anorexia vs. full and partial bulimia suggests that eating disorders might begin with the psychopathology of anorexia and evolve toward bulimia.

Hostility Drives Smoking Initiation

An interaction between depressive symptoms and hostility was strongly associated with initiation of smoking in middle school students, reported Jie Wu Weiss, Ph.D., and colleagues at the University of Southern California, Alhambra.

Adolescents who have difficulty controlling their anger often use smoking as a coping mechanism, the researchers noted. An ethnically diverse sample of 1,699 students completed 160-item surveys in both the sixth and seventh grades (J. Adolesc. 2005;28:49-62).

Overall, 141 children (8.3%) said they had smoked at least once by sixth grade. Compared with never smokers, those who had smoked scored significantly higher on baseline depressive symptoms, hostility, and socioeconomic status. An additional 141 of the original never-smokers reported smoking at least once by seventh grade, and higher depression and hostility scores at baseline were significantly associated with smoking initiation.

Deficits Don't Predict Teen Problems

Children aged 3-36 months who were diagnosed with minor developmental deficits did not show significantly more emotional or behavioral problems in adolescence compared with typical control children, said Daniel Hardoff, M.D., of Bnai Zion Medical Center, Haifa, Israel, and his colleagues.

In a study of 116 children, the most common diagnoses were mild motor impairment (32 children) and language abnormalities (27 children). After 12-16 years, parents completed the Child Behavior Checklist and their now-adolescents completed the Youth Self-Report. All the scores were within the nonpathologic range (J. Adolesc. Health 2005;36:70-1). The only significant difference was in self-perception of internalizing emotional problems, with males scoring higher than females.

Self-Cutting Linked to Risky Sex

Self-cutting was significantly associated with risky sexual behaviors in a study of 293 adolescents aged 13-18 years who were not psychotic, reported Larry K. Brown, Ph.D., and his associates at Brown University in Providence, R.I.

The researchers examined the characteristics of self-cutters as part of a larger longitudinal study and found that self-cutting was significantly associated with being female, white, sexually abused, and impulsive; HIV prevention self-efficacy was not predictive of self-cutting (Psychiatr. Serv. 2005;56:216-8). Although sexually active adolescents who were self-cutters were less likely than noncutters to have had sex within the past month, the self-cutters were also significantly less likely to consistently use condoms. Prior studies also have associated self-cutting with increased risk for HIV because self-cutters might share cutting implements.

—Heidi Splete