

• IN THIS ISSUE •

Since joining Pubmed Central over five years ago, our journal continues to develop, with the citations for published articles increasing year by year. Journal data from the SCOPUS database was recently published online, and as is reflected in the results from 2016, *Shanghai Archives of Psychiatry* has continued to develop and is now ranked as one of the top psychiatry journals in Asia [<http://www.scimagojr.com>].^[1] The *Shanghai Archives of Psychiatry* aims to serve as a bridge between Western and Chinese psychiatry, and this issue features several articles which highlight differences that mental disorders may have in an Eastern and Western context, especially in the treatment of eating disorders and attention deficit/hyperactivity disorder (ADHD) as well as neurodegenerative disorders.

This issue begins with a meta-analysis by Li and colleagues^[2] examining the applicability of alpha7 nAChR agonists for the treatment of negative symptoms and cognitive deficits that are seen in schizophrenia. Though the main thrust of treatment for schizophrenia often focuses on alleviation of positive symptoms, research has revealed a stable clinical subtype of schizophrenia known as deficit schizophrenia.^[3] Numerous studies have been conducted with alpha7 nAChR agonists as an intervention for this subtype, however results remain inconclusive. This paper identified 8 studies that met inclusion criteria for meta-analysis, however results showed that there was no statistically significant overall improvement for patients in either cognitive deficit or negative symptoms.

Research surrounding eating disorders in China has generated much debate. The first original research article by Zheng and colleagues^[4] is the first ever classification study of inpatients with eating disorders in Mainland China. They evaluated the different symptom manifestations as variables and compared them with the latest guideline classification. This article also discusses the cross-cultural applicability of ICD-11 in China. Based on their findings, the authors suggest that future studies should improve the low weight standard for the Chinese population and focus on atypical eating disorders that are not associated with obesity. If you want to learn more about the atypical eating disorder in China, please refer to the relevant articles.^[4,5,6] In addition, we have another article examining the associations between internet usage, body image and eating behaviors of secondary school students in Thailand. It was found that time spent on the internet was associated with a decrease in body image satisfaction and eating behavior problems.^[7]

Though ADHD in adults can cause tremendous social and occupational problems, in addition to the personal suffering of individuals with this disorder, many of the diagnostic tools for adult ADHD were developed in western countries and do not necessarily translate

well into Asian contexts. An original article by Kiatrungrit and colleagues^[8] reports on their validation of the Thai version of the ADHD Self-Report Scale. Studying a large sample from the metropolitan Bangkok area, they found that the ASRS V1.1 had satisfactory internal consistency and adequate sensitivity and specificity. The authors conclude that while these results suggest ASRS V1.1 may be useful as a screening tool for adult ADHD in Thai individuals, further studies should examine its utility as a measure of adult ADHD symptom severity.

Closely associated with ADHD are behavioral disorders such as Oppositional and Defiant Disorder (ODD) and Conduct Disorder (CD). However, much like ADHD, research on ODD and CD in Asian populations is greatly lacking compared with western populations. In an original research article by Xu and colleagues^[9] the executive function (EF) of Chinese youth with ODD was compared with those who had only ADHD using a battery of various measures. It was found that children with ODD had significantly poorer performance on EF tasks.

Perhaps one of the greatest challenges China faces in its next stage of development for mental health services is how to properly address the rapid increase in neurodegenerative disorders that come hand in hand with an ageing population. The forum^[10] by Wang and Commentary^[11] by professor Yu discuss recent advances, and setbacks, in the journey to find pharmacological solutions to this looming spectre. In addition, Heok^[12] presents lessons from work done in Singapore with elderly Chinese to improve training for mental health professionals and increase resources in the community system.

This issue also features two interesting case reports that highlight the importance of providing culturally relevant treatments to patients. A paper published by the French psychiatrist Dr. Montgrémier who collaborated with Dr. Jue Chen reports on her work with a Chinese patient suffering from bulimia nervosa.^[13] Eating disorders were wrongly thought for a long time to be specific to Western countries. The report focuses on the case of a Chinese girl with bulimia nervosa who discovered her adoption. In her unique case, transcultural psychiatry allows us to take into account new factors that help the understanding of the disorder and suggest new and more effective methods of care. And Dr. Zhu^[14] presents the case of a patient whose anxiety disorder presented as a fever rash. Interestingly, successful treatment of the anxiety disorder with Sertraline and psychological counseling also eliminated the associated physiological symptoms.

Finally, our Biostatistics in Psychiatry section in this issue by Zheng and colleagues^[15] discusses the topic of calculating sample size for comparing groups with

continuous outcomes. As the authors note, sample size calculation can often feel for clinical researchers like ‘a magic trick’ used by statisticians, however clinicians play an important role in this process as well. Like

many of the previous papers published in this section, clinicians and researchers will find useful information for conducting more thorough and well-planned studies.

(edited by Jinghong Chen, Drew Fralick)

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