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**Blunted stress reactivity is a distinctive feature in clinically depressed patients.**
Alfred L. *Evidence-Based Nursing* 2019;22(3):73.
[Findings from the 11 studies indicated that depressed patients had a different HR and HF-HRV stress reactivity profile when compared with non-depressed patients. ECG tests showed that depressed patients had blunted stress reactivity demonstrated by a lower fluctuation in HR and HF-HRV. Interesting findings that require further empirical exploration included; blunted stress reactivity in depressed women that have a history of childhood trauma, and gender differences in stress reactivity.]
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**Comparative efficacy and tolerability of 32 oral antipsychotics for the acute treatment of adults with multi-episode schizophrenia: a systematic review and network meta-analysis.**
[There are some efficacy differences between antipsychotics, but most of them are gradual rather than discrete. Differences in side-effects are more marked. These findings will aid clinicians in balancing risks versus benefits of those drugs available in their countries. They should consider the importance of each outcome, the patients' medical problems, and preferences.]
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**Global, regional, and national burden of suicide mortality 1990 to 2016: systematic analysis for the Global Burden of Disease Study 2016.**
Naghavi M. *BMJ* 2019;364:l94.
[To use the estimates from the Global Burden of Disease Study 2016 to describe patterns of suicide mortality globally, regionally, and for 195 countries and territories by age, sex, and Socio-demographic index, and to describe temporal trends between 1990 and 2016.]

**Long work hours, weekend working and depressive symptoms in men and women: findings from a UK population-based study.**
[Globalised and 24/7 business operations have fuelled demands for people to work long hours and weekends. Research on the mental health effects of these intensive temporal work patterns is sparse, contradictory or has not considered gender differences. Our objective was to examine the relationship between these work patterns and depressive symptoms in a large nationally representative sample of working men and women in the UK.]
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Mechanisms and moderators in mindfulness- and acceptance-based treatments for binge eating spectrum disorders: A systematic review.
[Analyses of mechanisms of action and moderators of outcome in MABTs for BN and BED appear promising, but the use of more sophisticated statistical analyses and adequate replication is necessary.]
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Melatonin and agomelatine for preventing seasonal affective disorder.
Nussbaumer-Streit B. Cochrane Database of Systematic Reviews 2019;6:CD011271.
[Seasonal affective disorder is a pattern of recurrent major depressive episodes that most commonly starts in autumn or winter and remits in spring. The prevalence of SAD depends on latitude and ranges from 1.5% to 9%. The predictable seasonal aspect of SAD provides a promising opportunity for prevention in people who have a history of SAD. This is one of four reviews on the efficacy and safety of interventions to prevent SAD; we focus on agomelatine and melatonin as preventive interventions.]

Meta-analysis on the efficacy of psychological treatments for anorexia nervosa
[Despite progress in the development of specialized treatments, the efficacy of psychological treatment over an active control condition could not be established. Outcomes, however, are obscured by low-quality and heterogeneous studies.]
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Residual eating disorder symptoms and clinical features in remitted and recovered eating disorder patients: A systematic review with meta-analysis.
[The presence of residual ED symptoms in AN is quantitatively supported, whereas the presence of residual ED symptoms in BN should be further investigated. Data on binge-eating disorder are missing. Future research should use consistent, multicomponent, and standardized comparable indicators of recovery.]
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Guidelines

The following new guidance has recently been published:

Best practice in the engagement and empowerment of families and carers affected by eating disorders.
BEAT Eating Disorders;2019.
https://www.beateatingdisorders.org.uk/guidance-urges-support-families-carers
[The UK’s eating disorder charity Beat has launched new guidance encouraging healthcare
providers to ensure better support for families of people with eating disorders, including by offering an assessment of their own mental health needs and offering access to peer-to-peer support programmes. This paper proposes a series of best practice standards for adoption by all health care providers offering eating disorder services.

Freely available online

Reports

The following report(s) may be of interest:

**Music groups on acute mental health inpatient wards.**
The Mental Elf; 2019.
[Una Foye highlights a small qualitative study that explores the benefits of establishing music groups on acute mental health inpatient wards. She reflects on the boredom felt by many inpatients and the importance of social connection and a positive ward atmosphere that may indirectly improve recovery and mental well-being.]

Freely available online

**Position statement on early intervention for eating disorders PS03/19.**
Royal College of Psychiatrists (RCPsych); 2019.
[The principle of early diagnosis and treatment to optimise disease outcomes is widely accepted in medicine. In psychiatry, these ideas have most strongly penetrated the psychosis field, where comprehensive early intervention programmes for first-episode cases have been introduced. The EDs field has not seen any parallel developments. We focus here on outlining the rationale and need for this.]

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