Further Progress in the Etiopathology of Depressive Disorder

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Editorial

Depression, as one of the mental disorders, is the most difficult one to diagnose and to manage. The disorder affects more than 350 million people worldwide [1]. Patients with depression might manifest differently in memory, attention and behavior in different disease stages, and medical history and the growing endemic condition might be influencing factors for the etiopathology of the disorder.

In order to explore the features of remitted depressed patients in the attentional bias towards facial expression of Happiness and Sadness, Li et al. used the eye-tracking technique to collect the eye-movement data of facial expression reactions of the remitted depressed patients and healthy volunteers. They found that the remitted depressed group showed an attentional bias tendency towards Happiness, suggesting that their initiative efforts to form a "protective bias" to relieve depressive symptoms [2].

Using a modified Sternberg working memory paradigm, accompanying affective pictures with different valences, Li et al. also had conducted another investigation on the capability to experience emotion in 22 patients with first-onset and untreated major depressive disorder and in 22 healthy volunteers. They found greater pupil diameter changes towards positive emotions, and better working memory performances on negative emotions in major depressive disorder, comparing to those in the healthy volunteers. They further recommended the mood-congruent memory effect and anhedonia as the core symptoms of depression, and suggested that anhedonia could be an endophenotypic marker for the disorder [3].

To investigate the clinical predictors of depression in a prison situation, Uche and Princewill had interviewed 400 prisoners in Nigeria, screening with the Beck Depression Inventory and the depression components of WHO SCAN. They found significant clinical factors, including retroviral status and past psychiatric history, with the strongest predictors of depression being the past psychiatry history [4].

Our colleague Hariri from Taif University of Saudi Arabia had explored if clients with vitamin D deficiency have different depression and anxiety levels comparing to those with vitamin D insufficiency, with data from 246 participants of Saudi Arabia, where Vitamin D deficiency is becoming a serious endemic condition. He found that individuals with low vitamin D levels, whether deficient or insufficient, may suffer from depression and anxiety problems [5].

These excellent researchers have identified some clinical characteristics of the depression disorder and have enriched the scientific knowledge about its etiology and pathology. These findings might provide new hints for the prevention and treatment of the disorder worldwide.

References

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