EARLY CAREER PSYCHIATRISTS

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- 1101 Modafinil Augmentation Therapy in Unipolar and Bipolar Depression: A Systematic Review and Meta-Analysis of Randomized Controlled Trials

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e1046 Symptomatic Remission and Cognitive Impairment in First-Episode Schizophrenia: A Prospective 3-Year Follow-Up Study

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Introduction: Early Career Offerings

We are pleased to offer another installment of the Early Career Psychiatrists section. In this part of the *Journal*, we showcase work by early career authors.

Chang et al, in an online-only offering, present new findings on remission and first-episode psychosis. Importantly, they studied cognitive impairment in a prospective study in individuals who experienced a first episode of schizophrenia. In longitudinal follow-up of a 3-year duration, 44.6% of participants experienced sustained remission. Remitted patients not surprisingly had better functional and vocational outcomes than nonremitters. They also demonstrated better verbal memory. The authors discuss possible relationships between verbal memory impairment and other aspects of symptomatology.

Goss and colleagues present a systematic review and meta-analysis of modafinil augmentation in mood disorders. As unipolar depression and bipolar disorder are often treatment refractory, adjuvant therapies are frequently utilized. They assessed 6 randomized controlled trials that met their inclusion criteria, representing 910 participants. The augmentation of ongoing pharmacotherapy with modafinil appears efficacious and well tolerated in both major depressive disorder and bipolar disorder.

Iza et al provide new data on the factors associated with treatment seeking for anxiety disorders. Their study draws on the National Epidemiologic Survey on Alcohol and Related Conditions, Wave 2, a rich database that has given rise to many publications. Conducted in 2004-2005, the survey included 34,653 participants who were interviewed for psychiatric diagnostic assessments and associated variables. In the current article, the authors assessed factors associated with treatment engagement among individuals with verified anxiety disorders that included panic disorder, generalized anxiety disorder, social anxiety disorder, and specific phobia. They also assessed the duration between onset of illness and treatment seeking. Variable rates of treatment seeking were found among the different anxiety disorders. Panic disorder was associated with the most rapid initiation of treatment after onset of illness, followed by generalized anxiety disorder, social anxiety disorder, and specific phobia. Further, at the time of interview, a greater percentage of patients with panic disorder had sought treatment compared to the other anxiety disorders. Comorbid mood and anxiety disorders increased treatment seeking, while personality disorders decreased it. Demographics associated with treatment seeking were also examined.

We hope that you enjoy the Early Career Psychiatrists section.

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