A MODERN PERSPECTIVE ON SOME OF THE MOST HIGHLY CITED JNPN PAPERS OF ALL TIME

Mood disorder as a specific complication of stroke

Alan J Carson

Dr Alan J Carson, University of Edinburgh, discusses the realisation that depression after stroke was not simply a reaction to disability

Appraising the impact of Folstein et al’s 1977 report on ‘Mood disorder as a specific complication of stroke’ is a challenging task for someone who did not enter medical school until the mid-1980s. Stroke changed in the 1970s, and the view in retrospect appears unrecognisable. This was a dramatic change, from an intellectual backwater too dull for neurologists to even bother seeing, to become a hot topic: a disease to be studied in mega trials and a standard bearer for evidence based medicine. Prior to the 1970s, with the exception of dysphasia, neuropsychiatric complications had been given scant thought—it was a disorder that affected how people walked. It was recognised that some elderly patients became depressed after stroke but the prevailing view of the anatomy of depression. Appearing, as it did, contemporaneously with the development of cerebral imaging techniques, this was the impetus researchers had needed. Over the next 2 decades, 145 reports were made on this topic. Sadly, the theory of anatomical location of brain lesions as a simplistic explanation for mood disorder did not stand up to scrutiny. It was perhaps too good to be true; a salient reminder of the need for confirmation in humans of findings from animal models.

In critical analysis the paper itself has a straightforward script was not cluttered with t tests and hazard ratios, and that is something editors welcome in any era.

And the key messages were important—the realisation that depression after stroke was not simply an understandable reaction to disability has stood the test of time. We now know that 55% of stroke patients suffer from depression (95% CI 29% to 36%). We now know that this depression leads to increased disability and probably increased mortality. Most importantly, we now know that antidepressants are effective in treating it. Countless patients round the world are benefiting from this knowledge and that is an impact that any researcher can be proud of.

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MOOD DISORDER AS A SPECIFIC COMPLICATION OF STROKE

Authors: Folstein MF, Maibeger R, McHugh PR
Year published: 1977

Robert Robinson published a fascinating study demonstrating that experimentally induced strokes in rats led to alteration in cerebral metabolism of catecholamines that correlated with behavioural changes in the rats that mimicked depression. Folstein’s data appeared to be an early example of translational research and were widely disseminated as they appeared to link laboratory based neurobiology with clinical practice. Tantalisingly it seemed to offer a human model for studying the anatomy of depression. Appearing, as it did, contemporaneously with the development of cerebral imaging techniques, this was the impetus researchers had needed. Over the next 2 decades, 145 reports were made on this topic. Sadly, the theory of anatomical location of brain lesions as a simplistic explanation for mood disorder did not stand up to scrutiny. It was perhaps too good to be true; a salient reminder of the need for confirmation in humans of findings from animal models.

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Competing interests None.

Provenance and peer review Commissioned; not externally peer reviewed.

Received 17 November 2011
Accepted 21 December 2011
Published Online First 29 January 2012

J Neurol Neurosurg Psychiatry 2012;83:859.
doi:10.1136/jnnp-2011-301854

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J Neurol Neurosurg Psychiatry 2012 83: 859 originally published online January 29, 2012
doi: 10.1136/jnnp-2011-301854

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