### CAMBRIDGE

# **JOURNALS**

# Epidemiology and Psychiatric Sciences

#### Editor

Michele Tansella, University of Verona, Italy

Epidemiology and Psychiatric Sciences is an international, peer-reviewed journal published quarterly. It provides updated data and scientific information to epidemiologists, psychiatrists, psychologists, statisticians and other research and mental health workers primarily concerned with public health and epidemiological and social psychiatry.



# Epidemiology and Psychiatric Sciences

is available online at: http://journals.cambridge.org/eps

#### To subscribe contact Customer Services

#### in Cambridge:

Phone +44 (0)1223 326070 Fax +44 (0)1223 325150 Email journals@cambridge.org

#### in New York:

Phone +1 (845) 353 7500 Fax +1 (845) 353 4141 Email subscriptions\_newyork@cambridge.org

#### **Price information**

is available at: http://journals.cambridge.org/eps

#### Free email alerts

Keep up-to-date with new material – sign up at http://journals.cambridge.org/alerts

For free online content visit: http://journals.cambridge.org/eps



#### INSTRUCTIONS FOR CONTRIBUTORS

#### SUBMISSION OF MANUSCRIPTS

Manuscripts should be submitted online via our manuscript submission and tracking site, http://www.editorialmanager.com/psm/. Full instructions for electronic submission are available directly from this site. To facilitate rapid reviewing, communications for peer review will be electronic and authors will need to supply a current e-mail address when registering to use the system.

Papers for publication from Europe (except those on genetic topics, irrespective of country), and all papers on imaging topics, should be submitted to the UK Office.

Papers from the Americas, Asia, Africa, Australasia and the Middle East (except those dealing with imaging topics), and all papers dealing with genetic topics, irrespective of country, should be sent to US Office.

Generally papers should not have text more than 4500 words in length (excluding these sections) and should not have more than a combined total of 5 tables and/or figures. Papers shorter than these limits are encouraged. For papers of unusual importance the editors may waive these requirements. A structured abstract of no more than 250 words should be given at the beginning of the article using the headings: Background; Methods; Results; Conclusions. The name of an author to whom correspondence should be sent must be indicated and a full postal address given in the footnote. Any acknowledgements should be placed at the end of the text (before the References section)

Declaration of Interest: A statement must be provided in the acknowledgements listing all financial support received for the work and, for all authors, any financial involvement (including employment, fees, share ownership) or affiliation with any organization whose financial interests may be affected by material in the manuscript, or which might potentially bias it. This applies to all papers including editorials and letters to the editor.

Contributors should also note the following:

- 1. S.I. units should be used throughout in text, figures and tables.
- 2. Authors should spell out in full any abbreviations used in their manuscripts.
- 3. Foreign quotations and phrases should be followed by a translation.
- 4. If necessary, guidelines for statistical presentation may be found in: **Altman DG, Gore SM, Gardner MJ & Pocock SJ** (1983). Statistical guidelines for contributors to medical journals. *British Medical Journal* 286, 1489–1493.

**REFERENCES** (1) The Harvard (author-date) system should be used in the text and a complete list of References cited given at the end of the article. In a text citation of a work by more than two authors cite the first author's name followed by et al. (but the names of all of the authors should be given in the References section). Where several references are cited together they should be listed in rising date order. (2) The References section should be supplied in alphabetical order (authors' names in **bold**, journal titles in full), following the text. Some examples follow:

Miller PM, Byrne M, Hodges A, Lawrie SM, Johnstone EC (2002). Childhood behaviour, psychotic symptoms and psychosis onset in young people at high risk of schizophrenia: early findings from the Edinburgh high risk study. *Psychological Medicine* 32, 173–179.

Cleckley HJ (1941). The Mask of Sanity, 2nd edn. Mosby: St. Louis, MO.

Brewer WJ, Wood SJ, DeLuca C, Pantelis C (2006). Models of olfaction for exploring neurodevelopment. In Olfaction and the Brain (ed. W. J. Brewer, D. Castle and C. Pantelis), pp. 97–121. Cambridge University Press: Cambridge.

(3) Online citations

doi (when published online prior to printed issue)

Lauritsen MB, Pedersen CB, Mortensen CB (2004). The incidence and prevalence of pervasive developmental disorders: a Danish population-based study. *Psychological Medicine*. Published online: 21 October 2004. doi:10.1017/S0033291704002387.

URL

World Bank (2003). Quantitative techniques for health equity analysis – Technical Notes (http://siteresources.worldbank. org/INTPAH/Resources/Publications/Quantitative-Techniques/health.eq tn07.pdf). Accessed 15 February 2006.

[Authors are requested to print-out and keep a copy of any online-only material, in case the URL changes or is no longer maintained.]

FIGURES AND TABLES Only essential figures and tables should be included. Further tables, figures, photographs and appendices, may be included with the online version on the journal website. To ensure that your figures are reproduced to the highest possible standards, Cambridge Journals recommends the following formats and resolutions for supplying electronic figures. Please ensure that your figures are saved at final publication size and are in our recommended file formats. Following these guidelines will result in high quality images being reproduced in both the print and the online versions of the journal. Line artwork: Format: tif or eps, Colour mode: black and white (also known as 1-bit), Resolution: 1200 dpi; Combination artwork (line/tone): Format: tif or eps, Colour mode: grayscale (also known as 8-bit), Resolution: 800 dpi; Black and white halftone artwork: Format: tif, Colour mode: grayscale (also known as 8-bit), Resolution: 300 dpi; Colour halftone artwork: Format: tif, Colour mode: CMYK colour, Resolution: 300 dpi. All photographs, graphs, and diagrams should be referred to as figures and should be numbered consecutively in Arabic numerals. Captions for figures should be typed double-spaced on separate sheets. Tables Tables should be typed above the table.

**PROOFS AND OFFPRINTS** Page proofs will be sent to the author designated to receive correspondence. corrections other than to printer's errors may be charged to the author. The corresponding author of each paper will receive a PDF file of their article and hard copy offprints may be purchased if they are ordered on the form supplied when the proof is returned.

# PSYCHOLOGICAL MEDICINE

## **CONTENTS**

EDITORIAL  Pragmatic design in randomized controlled trials  Purgato M, Barbui C, Stroup S & Adams C	225
REVIEW ARTICLES Stepped care treatment delivery for depression: a systematic review and meta-analysis van Straten A, Hill J, Richards DA & Cuijpers P	<b>c</b> 231
A meta-analysis of the prevalence of attention deficit hyperactivity disorder in incarcerated populations Young S, Moss D, Sedgwick O, Fridman M & Hodgkins P	247
Prodromal dementia with Lewy bodies Donaghy PC, O'Brien JT & Thomas AJ	259
ORIGINAL ARTICLES  Maternal antenatal anxiety, postnatal stroking and emotional problems in children: outcomes predicted from pre- and postnatal programming hypotheses  Sharp H, Hill J, Hellier J & Pickles A	I 269
Unemotional traits predict early processing deficit for fearful expressions in young violent offenders: an investigation usin continuous flash suppression  Jusyte A, Mayer S V, Künzel E, Hautzinger M  & Schönenberg M	
A network meta-analysis on comparative efficacy and all-cause discontinuation of antimanic treatments in acute bipolar mania  Yildiz A, Nikodem M, Vieta E, Correll CU & Baldessarini RJ	299
The quality of the interparental relationship does not moderate the etiology of child conduct problems  Burt SA, Wildey MN & Klump KL	319
Gene-environment interplay between parent-child relationship problems and externalizing disorders in adolescence and young adulthood Samek DR, Hicks BM, Keyes MA, Bailey J, McGue M & lacono WG	333
Mental health in Dutch adolescents: a TRAILS report on prevalence, severity, age of onset, continuity and co-morbidity of DSM disorders  Ormel J, Raven D, van Oort F, Hartman CA, Reijneveld SA,	
Veenstra R, Vollebergh WAM, Buitelaar J, Verhulst FC & Oldehinkel AJ	345

ADHD in DSM-5: a field trial in a large, representative sample of 18- to 19-year-old adults  Matte B, Anselmi L, Salum GA, Kieling C, Gonçalves H,	
Menezes A, Grevet EH & Rohde LA	361
Decision making in young people at familial risk of depression  Mannie ZN, Williams C, Browning M & Cowen PJ	375
Do premorbid and post-onset cognitive functioning differ between schizophrenia and bipolar disorder? A systematic review and meta-analysis Trotta A, Murray RM & MacCabe JH	381
Differences in prefrontal blood oxygenation during an acute multitasking stressor in ecstasy polydrug users Roberts CA, Wetherell MA, Fisk JE & Montgomery C	395
The association between cannabis abuse and subsequent schizophrenia: a Swedish national co-relative control study Giordano GN, Ohlsson H, Sundquist K, Sundquist J & Kendler KS	407
A randomized controlled trial of in-patient treatment for anorexia nervosa in medically unstable adolescents Madden S, Miskovic-Wheatley J, Wallis A, Kohn M, Lock J, Le Grange D, Jo B, Clarke S, Rhodes P, Hay P & Touyz S	415
Psychotic experiences and psychological distress predict contemporaneous and future non-suicidal self-injury and suicide attempts in a sample of Australian school-based adolescents  Martin G, Thomas H, Andrews T, Hasking P & Scott JG	429
Is there an excess of significant findings in published studies	423
of psychotherapy for depression?  Flint J, Cuijpers P, Horder J, Koole SL & Munafò MR	439
· · · · · · · · · · · · · · · · · · ·	
Correspondence	447



