

New Research From Clinical Psychological Science

June 28, 2019



Read about the latest research published in *Clinical Psychological Science*:

[Misremembrance of Things Past: Depression Is Associated With Difficulties in the Recollection of Both Specific and Categorical Autobiographical Memories](#)

Caitlin Hitchcock, Evangeline Rodrigues, Catrin Rees, Siobhan Gormley, Barbara Dritschel, and Tim Dalgleish



This research suggests that major depressive disorder (MDD) may be associated with impaired recollection of both specific events and of events that happened on different occasions (categorical memories). A sample of adults with a diagnosis of MDD who were experiencing a major depressive episode and a sample of adults with no history of depression saw positive, neutral, or negative cue words and were instructed to recall specific or categorical memories related to each cue. Relative to never-depressed participants, participants with MDD had difficulty remembering specific and categorical autobiographical events and alternating between remembering specific and categorical memories. These findings suggest helping individuals with MDD generate both specific and categorical memories and move between them may help alleviate the autobiographical retrieval problems encountered in MDD. Moreover, interventions to ameliorate depression symptoms might be more effective if they focus on the deliberate recall of specific and recurring events, the researchers suggest.

[The Roles of Early Response and Sudden Gains on Depression Outcomes: Findings From a Randomized Controlled Trial of Behavioral Activation in Goa, India](#)

Daisy R. Singla, Steven D. Hollon, Christopher G. Fairburn, Sona Dimidjian, and Vikram Patel

This research examines whether early response and sudden gains in a psychological treatment program for depression predict a reduction in symptoms after 3 months and sustained recovery after 12 months. Participants were adults from Goa, India, who had depressive symptoms and had been exposed to the

Healthy Activity Program (HAP) in their health center. HAP is a six- to eight-session behavioral activation treatment, adapted for the cultural context. It includes psychological education, activation of social networks, and activity monitoring and structuring, among other strategies. Participants who had shown an early response to HAP (i.e., 50% reduction in depressive symptoms by the third session) had lower depressive symptoms 3 months and 12 months later compared with those who did not show an early response. However, this advantage was only shown by those participants who, besides an early response had also had sudden gains (i.e., a steep and stable drop in depression scores between sessions). This indicates that sudden gains might be a better predictor of depression outcomes than early response. The researchers suggest that among patients who do not show early response and sudden gains, treatment approaches that step up to alternative or more specialized treatments might improve depression outcomes.

[Inflammatory Proteins Predict Change in Depressive Symptoms in Male and Female Adolescents](#)

Daniel P. Moriarity, Naoise Mac Giollabhui, Lauren M. Ellman, Joshua Klugman, Christopher L. Coe, Lyn Y. Abramson, and Lauren B. Alloy

Individuals with depression tend to have higher levels of inflammation, as measured by the presence of proinflammatory cytokines in their blood. To investigate the relationship between depressive symptoms and inflammation in adolescents (ages 12–20), the researchers collected blood from a sample of community adolescents and measured their depressive symptoms, at baseline and up to five more times thereafter. Analysis indicated that a high concentration of a specific type of protein, the C-reactive protein (CRP), predicted increase in depressive symptoms over the follow-ups. Female participants with higher concentrations of interleukin-6 showed increased depressive symptoms 13 to 31 months after the first assessment. Male participants who had high blood concentrations of a different protein, tumor necrosis factor- α , showed increased depressive symptoms shortly after the first assessment for male participants. Female participants with high tumor necrosis factor- α concentrations showed heightened depressive symptoms 13 to 31 months after the initial assessment. Moreover, depression symptoms were lower at 31 months after the initial assessment for male participants with high concentrations of interleukin-8. Exploratory analysis also identified that higher concentrations of proinflammatory proteins predicted different depressive symptoms. These findings indicate that inflammatory proteins may help to predict the evolution of depression in adolescents. The relationship between proinflammatory cytokines and depression seems to differ by sex, time to follow-up, and the specific protein being analyzed. Given these results, the authors reinforce the importance of assessing the utility of anti-inflammatory medications as adjunct therapeutics for depression.

[Facial Affect and Interpersonal Affiliation: Displays of Emotion During Relationship Formation in Social Anxiety Disorder](#)

Sarah L. Pearlstein, Charles T. Taylor, and Murray B. Stein

Treatment strategies for people with social anxiety disorder (SAD) may be optimized by identifying behaviors that can contribute to their difficulties in developing relationships. One of these behaviors might be the facial display of emotion, which is important for relationship formation. In this research, the facial displays of emotion of people with and without SAD were compared during social interaction. While being videotaped, participants interacted with a confederate for 25 min, alternating responses to a series of questions that gradually increased in the depth of self-disclosure. Confederates then rated their desire for future interaction with the participants. The participants' facial displays of fear and smiling

during the interaction were analyzed by an automated software that detects facial-muscle movements associated with different emotions. Participants with SAD smiled less frequently and intensely than those without SAD, but did not show differences regarding expressions of fear. These differences in smiling emerged mostly when participants were listening to the confederate. The lack of smiling was associated with the confederates' lower desire to interact with the participants in the future. These findings suggest that diminished smiling in response to social interaction may hinder relationship development in SAD, indicating that effective treatment might focus on patients' facial expressions in overcoming the disorder.