

1565 Sex Differences in
Pediatric Bipolar Disorder.

1574 Deliberate Self-Harm in
Young People: Characteristics
and Subsequent Mortality
in a 20-Year Cohort of Patients
Presenting to Hospital.

1584 Impulse-Control Disorders
in Adolescent Psychiatric
Inpatients: Co-Occurring
Disorders and Sex Differences.

1593 Suicidality, Psychopathology,
and Gender in Incarcerated
Adolescents in Austria.

Are Girls and Boys From Different Planets?

In this issue of “Focus on Childhood and Adolescent Mental Health,” we examine 4 studies that identified significant gender differences in the clinical characteristics of psychopathology in children and adolescents. Well-established differences exist between boys and girls in neurodevelopment and the onset of puberty. Therefore, examining differences between boys and girls in the presentation and manifestations of child and adolescent mental health disorders is essential to establishing effective gender-specific intervention strategies. Furthermore, as described by Duax and colleagues, determining whether developmentally-specific gender differences occur in the phenomenology of a psychiatric disorder (e.g., bipolar disorder) may clarify whether the disorders are similar or distinct in pathophysiology and etiology. Specifically, Duax and colleagues examined gender differences in the presentation of bipolar disorders in a large (N = 387) sample of youth with bipolar spectrum disorder (i.e., bipolar I and II, bipolar disorder not otherwise specified, and cyclothymia). They found that girls present with higher rates of depression than boys, and boys present with higher rates of mania. Consistent with adult bipolar disorder (with the exception of bipolar II disorder, which is more common in women than men), there were no gender-related differences in rates of any of the bipolar disorders studied. The authors discuss the developmental and clinical implications of their findings.

Hawton and Harriss examined the long-term outcomes of a large cohort (N > 5000) of adolescents and young adults who presented with deliberate self-harm. Deliberate self-harm was more likely to be associated with alcohol use in male subjects than female subjects. During follow-up, the risk of death was 4 times greater than expected, and the risk of suicide was more than 10 times greater than expected. The relative risk of all-cause death as well as that for death by suicide was 3 times greater in male than in female subjects. Among males, previous deliberate self-harm was the only risk factor for suicide. In contrast, risk factors for suicide among females included previous deliberate self-harm, psychiatric treatment at the time of deliberate self-harm, and previous psychiatric treatment. The significant differences that emerged between males and females during this study may be useful for developing gender-specific prevention and intervention strategies.

Grant and colleagues examined gender differences in impulse-control disorders in adolescent psychiatric inpatients. In adults, compulsive buying, trichotillomania, skin picking, and kleptomania are more common in women, and pathologic gambling, compulsive sexual behaviors, intermittent explosive disorder, and pyromania are more common in men. Few studies, however, have formally evaluated impulse-control disorders in an adolescent sample. The authors of this study report that, in general, impulse-control disorders are underdiagnosed in adolescent inpatients. Additionally, a greater number of girls than boys in their sample had an impulse-control disorder. Although numerically, girls had higher rates of compulsive buying, trichotillomania, skin picking, and compulsive sexual behaviors, only the rate of pyromania was statistically greater in girls than boys. Although this adolescent sample was limited to psychiatric inpatients, the authors discuss the clinical implications of these important preliminary findings, which will guide further research into the phenomenology and treatment of impulse-control disorders in adolescents.

Plattner and colleagues examined gender differences in suicidal behaviors in a unique sample of juvenile delinquents from Austria. The authors determined that major depressive disorder, attention-deficit/hyperactivity disorder, and social phobia predicted suicidality in boys and posttraumatic stress disorder predicted suicidality in girls. The findings of this study suggest that gender-specific differences in psychopathology are important to assess, particularly in juvenile delinquent samples where there are distinct predictors of suicidal behaviors.

In summary, the 4 articles included in this section of “Focus on Childhood and Adolescent Mental Health” identified gender-specific clinical characteristics associated with psychopathologic behaviors that will serve as the initial steps toward establishing more effective preventative and targeted intervention strategies.

Melissa P. DelBello, M.D.
Deputy Editor