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# Moving the Field Forward: New Data Regarding Women's Mental Health

**W**e are pleased to present the first "Focus on Women's Mental Health" section of *The Journal of Clinical Psychiatry* for 2006! In this installment, we highlight important advances in broadly different areas of women's mental health.

A recent headline in the *USA Today* (12/27/2005) touted "Breast Cancer Discovery Is Year's Biggest News." The headline referred to the breast cancer drug Herceptin that has been demonstrated to greatly reduce the risk of relapse in patients with breast cancer. With this advance and others in the fight against diseases that were once considered terminal, more patients are living with diagnoses that may pose chronic risks or complications with treatment of comorbid conditions. While mortality is reduced, patients with breast cancer are living longer with the condition. In consideration of the high rate of depression in women in general, the study by Musselman and colleagues focuses attention on the treatment of women with breast cancer who have major depression. They conducted a small, double-blind, placebo-controlled trial of desipramine, paroxetine, or placebo. There were no statistical differences in efficacy between the groups, and neither antidepressant appeared more effective than the placebo in the trial. The authors discuss their findings and consider the important issue of why there is such a paucity of placebo-controlled trials of antidepressant medications in women with breast cancer, considering the common clinical use of these medications in this context.

Joffe et al. also address an understudied and important topic of women's health in this issue. In their article, they studied menstrual dysfunction in women prior to the onset of psychiatric illness and initiation of psychotropic medication. The topic of psychotropic medication, bipolar disorder, and menstrual dysfunction has received particular attention in relation to the possibility that the anticonvulsant valproate may increase the risk of polycystic ovary syndrome (PCOS) and has been best studied in the neurology literature. It is unclear how prevalent PCOS is in women with bipolar disorder and whether menstrual abnormalities are most likely due to mood-stabilizing medications, the underlying mood disorders, or other variables. Joffe et al. seek to help us understand these issues further.

Lastly, Klier et al. provide us with a report in which 5 mothers who were using St. John's wort were assessed for hyperforin levels in breast milk and plasma, and the breastfed infants of 2 of the mothers were assessed for levels in plasma. They found relatively low levels of exposure through breast milk and an absence of adverse events in this report of a small number of subjects. Health care providers are often in the difficult situation of having almost no data on which to discuss the risks and benefits of treatment options with pregnant and postpartum patients. Publication of this type of data, despite the small sample size, provides us with more information to share with patients.

We thank authors and readers for their feedback to our "Focus on Women's Mental Health" section. If you have any comments, please contact me at [marlenef@email.arizona.edu](mailto:marlenef@email.arizona.edu).

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