



"A Prospective Investigation of Major Depressive Disorder and Comorbidity in Abused and Neglected Children Grown Up," by Cathy Widom, Kimberly DuMont and Sally Czaja, Archive of General Psychiatry, January 2007.

This article summarizes findings from a prospective study of 1196 persons, 676 of whom were found to be abused or neglected by courts in a Midwestern metropolitan area between 1967-71, and 520 controls matched by sex, race, age and hospital of birth (for abused and neglected pre-school children) or elementary school and grade level for the school age group. These individuals were interviewed between 1989 and 1995, 22.3 years (on average) after initial information gathering on children in the study. Interviewers were blind to the purpose of the study and to the participants' membership in the group of young adults with histories of abuse / neglect or in the control group. Members of the control group subsequently reported to CPS were eliminated from the study and replaced, when possible, with another matched comparison subject.

The authors assert that "individuals who experienced any physical abuse or multiple forms of abuse or neglect were at elevated risk for Major Depressive Disorder (MDD) compared to the control group; adjusted odds ratio - 1.72. In addition, neglected children were at increased risk for current MDD (odds ratio - 1.59) whereas children who had experienced other forms of child maltreatment had rates of current MDD similar to the control group's. In addition, abused and / or neglected children also experienced almost twice as many episodes of MDD (31 episodes per person) as the matched controls through young adulthood.

Abused and neglected children who experienced MDD had earlier onset than the control group; according to the authors, "the two groups (abused and / or neglected and controls) begin to diverge at an early age (< 10 years) and the differences... continue throughout the assessment period."

The authors state that "91.3% of those with lifetime MDD in the sample also met the criteria for at least 1 of the other DSM-III -R disorders assessed herein." Young adults with lifetime MDD and a history of child abuse or neglect were significantly more likely than members of the control group to meet the criteria of at least one other lifetime DSM diagnosis, such as PTSD, drug abuse and / or dependence, antisocial personality disorder or dysthymia. Among those with current MDD, almost 80% of the abused and neglected group -- compared to 69% of the control group -- met the criteria for another current disorder "although the only significant difference was for PTSD."

The study found that "controls are significantly more likely than abused and / or neglected individuals to have MDD after drug abuse and / or dependence or alcohol

abuse and / or dependence diagnoses. In contrast, abused and / or neglected individuals are more likely than controls to have MDD before drug abuse and / or dependence (40% vs.. 17%). The authors comment that "our findings provide support for the "self medication" hypothesis (i.e., substance abuse medicates psychiatric symptoms), because a substantial portion of the maltreated group reported MDD before alcohol or other drug abuse and / or dependence."

One surprising finding of this study was the lack of a statistically significant relationship between a history of childhood sexual abuse and MDD. The authors state that childhood victims of sexual abuse report more depressive symptoms than controls, but not to the extent to meet the criteria for MDD. The authors hypothesize that the weak statistical power resulting from the relatively small sample of sex abuse cases may have partially accounted for this result. This study provides new evidence that neglected children are at increased risk of depression. "These results underscore the need to detect and treat the long term psychological sequelae of childhood neglect. Approximately one quarter of the neglected children in our sample met the criteria for lifetime MDD, and 15% for current MDD," the authors state. "In addition, these findings reveal that onset of depression began in childhood for many of the children."

The authors remind readers that "Because much childhood victimization occurs in the context of multi-problem homes, the maltreatment may be a marker of other family problems that together lead to the development of depressive disorders." In addition, the authors assert that "Depressed parents may be more likely to abuse their children and transmit depressive genes to their offspring."

Unfortunately, this study does not include information regarding the CPS histories of these young adults with their own children. One plausible mechanism for the intergenerational transmission of child abuse and neglect (in the one third of cases where this occurs) is the combination of MDD and other comorbid psychiatric disorders and entrenched poverty resulting from a low level of education. The early onset of depression in many of these children found in this study suggests that depression may interfere with educational attainment, as well as with the capacity to find and maintain employment. This is an explanatory model for the intergenerational transmission of child maltreatment worth careful scrutiny.