

mood-stabilising properties of lithium in patients.

Enhanced 5-HT_{1A} neurotransmission appears to dissipate within a few days of lithium withdrawal, revealing and leaving unopposed the pro-manic behavioural effects of increased 5-HT₂ activity. These findings in animals support a hypothesis of 5-HT₂ receptor over-activity in mania and hypomania, with clear therapeutic indications. Indirectly, these findings also suggest that claims for lithium's therapeutic effects should not 'be taken with a pinch of salt'.

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Ethnicity and clozapine metabolism

Sir: Taylor's review (1997) focused on the variability of clozapine metabolism from

the effect of compounds on the cytochrome P450 system. We would like to highlight the possible influence of ethnicity on clozapine metabolism. To date, there are only three studies published in English of plasma clozapine levels in Asians. Chang *et al* (1993) found the daily mean plasma clozapine level of 77 of their Chinese patients with schizophrenia was significantly higher than those reported in American and European studies. Similarly, Chong *et al* (1997) found the mean plasma clozapine concentration attained in Chinese patients was higher than that reported in American studies, even though the Chinese patients had a lower mean daily dose of clozapine. However, it is difficult to interpret the findings from these two studies as comparisons were made with studies done elsewhere, by different workers and where many confounding variables were not controlled for. In a comparison study of 17 Korean-Americans and 17 Caucasians within the same treatment centre, Matsuda *et al* (1996) found a lower mean clozapine concentration in their Korean patients, which remained significant even after controlling for differences in daily clozapine doses. However, their study was limited by the small sample size and the failure to control for body weight. At present, there is only a suggestion of cross-ethnic differences in clozapine

metabolism between Asians and Caucasians and perhaps even among Asian subgroups. More comparative studies need to be done before this can be resolved. These studies would need to control for variables like body weight, dose per kilogram, gender, and those compounds listed by Taylor (1997). Such studies should also guard against lumping the different Asian groups (Matsuda *et al*, 1996). We wish to emphasise that ethnicity is a confounding variable in psychopharmacology research and an important consideration in clinical practice.

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Chong, S. A., Tan, C. H., Khoo, Y. H., et al (1997) Clinical evaluation and plasma clozapine concentrations in Chinese patients with schizophrenia. *Therapeutic Drug Monitoring*, **19**, 219–223.

Matsuda, K. T., Cho, M. C., Lin, K. M., et al (1996) Clozapine dosage, serum levels, efficacy, and side-effect profiles: A comparison of Korean-American and Caucasian patients. *Psychopharmacology Bulletin*, **32**, 253–257.

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One hundred years ago

County Armagh Asylum

At a meeting of the governors held on Jan. 10th the new superintendent, Mr. Lawless, in his report said that the time had now come when it became necessary to consider the appointment of an assistant medical

officer. He drew attention also to the fact that there was no supply of drinking water to the new hospital, the existing supply coming from the river—in his opinion a dangerous source. He suggested that they should apply to the town commissioners for a supply. The board decided that the matter

of the appointment of an assistant medical officer should be postponed for the present.

Lancet, 15 January 1898, 187.

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Erratum

Fenton, W. S., Blyler, C. R., Wyatt, R. J., *et al*, *BJP*, **171**, 265–268. In Table 1 (p. 266) the prevalence of dyskinesia among 94 patients

in the Fenton *et al* (1994) study should read 23% (not 28%). The authors apologise for any inconvenience caused by this error.