

- 24 Ridderinkhof KR, Ullsperger M, Crone EA, Nieuwenhuis S. The role of the medial frontal cortex in cognitive control. *Science* 2004; **306**: 443–7.
- 25 Rosenberg DR, Mirza Y, Russell A, Tang J, Smith JM, Banerjee SP, Bhandari R, Rose M, Ivey J, Boyd C, Moore GJ. Reduced anterior cingulate glutamatergic concentrations in childhood OCD and major depression versus healthy controls. *J Am Acad Child Adolesc Psychiatry* 2004; **43**: 1146–53.
- 26 Ursu S, Stenger VA, Shear MK, Jones MR, Carter CS. Overactive action monitoring in obsessive-compulsive disorder: evidence from functional magnetic resonance imaging. *Psychol Sci* 2003; **14**: 347–53.
- 27 Maltby N, Tolin DF, Worhunsky P, O’Keefe TM, Kiehl KA. Dysfunctional action monitoring hyperactivates frontal-striatal circuits in obsessive-compulsive disorder: an event-related fMRI study. *Neuroimage* 2005; **24**: 495–503.
- 28 Whiteside SP, Port JD, Abramowitz JS. A meta-analysis of functional neuroimaging in obsessive-compulsive disorder. *Psychiatry Res* 2004; **132**: 69–79.
- 29 Kim JJ, Lee MC, Kim J, Kim IY, Kim SI, Han MH, Chang KH, Kwon JS. Grey matter abnormalities in obsessive-compulsive disorder: statistical parametric mapping of segmented magnetic resonance images. *Br J Psychiatry* 2001; **179**: 330–4.
- 30 Rauch SL, Savage CR, Alpert NM, Dougherty D, Kendrick A, Curran T, Brown HD, Manzo P, Fischman AJ, Jenike MA. Probing striatal function in obsessive-compulsive disorder: a PET study of implicit sequence learning. *J Neuropsychiatry Clin Neurosci* 1997; **9**: 568–73.
- 31 Van den Heuvel OA, Veltman DJ, Groenewegen HJ, Cath DC, van Balkom AJ, van Hartkamp J, Barkhof F, van Dyck R. Frontal-striatal dysfunction during planning in obsessive-compulsive disorder. *Arch Gen Psychiatry* 2005; **62**: 301–9.
- 32 Gerdelat-Mas A, Loubinoux I, Tombari D, Rascol O, Chollet F, Simonetta-Moreau M. Chronic administration of selective serotonin reuptake inhibitor (SSRI) paroxetine modulates human motor cortex excitability in healthy subjects. *Neuroimage* 2005; **27**: 314–22.

Word pictures of depression: thoughts of death

Sharon McConville

As I descended more deeply into my depression, I became increasingly preoccupied with thoughts and images of death, to the extent that other subjects seemed meaningless. These thoughts often translated into vivid dreams . . .

‘Despair was my foremost emotion during the night which has just passed. I awoke at 3 am from a sleep plagued with unremembered nightmares, my muscles tensed for fight or flight, my mind preoccupied with poorly-developed but unquestionably negative thoughts. I felt like I was lying in the middle of a scene from a scary movie, one of those suspense thrillers where the colours of the shots are murky and the soundtrack is distorted so that it sounds like it is being heard through water, its chords bending and smouldering out, somehow making you suspect that an ominous, unseen presence is about to manifest itself: listening to it makes you want to look over your shoulder to check that no one is following you, but makes you afraid to do so in case someone – or something – surprises you from the front. I suppose this experiential phenomenon could be described as paranoia or possibly ‘free-floating anxiety’; whatever the terminology, it was unpleasant. I got up eventually and told [the night nurses] – who were both engrossed in reading material, [one] studying a psychology textbook, [the other] a celebrity magazine – how I was feeling. Somehow I needed to share my feelings to help me confirm that they were not real. They made me some herbal tea and I went back to bed much reassured. Then, just as I crawled under the heavy covers, images began to flood my brain. First there was a coffin, a funeral procession, my mother crying. Then there was a wake: faceless people surrounding a white-robed figure lying in an open casket. I recognised this figure. It did not physically resemble me but I knew that it represented me, just as I had earlier been dreaming about events which I knew were unfolding in Belfast even though the physical surroundings were more consistent with Edinburgh (the hill-top castle and shops of Princess Street were prominent in the background scenery). I could not escape this morbid preoccupation, no doubt related as much to the fact that Mum and Dad had been discussing my Great Aunt Ina’s funeral with me yesterday as much as my own thoughts about suicide. However, it was the risk of self-harm which concerned [the nurse] most when I visited her once again to de-escalate my feelings by sharing them with her. “You’ve had a traumatic week, Sharon. It’s not surprising that your sleep is disturbed with such thoughts floating around in your head. Please, please come back and speak to us at any time that you need to: that’s what we’re here for. You don’t need to cope with this on your own.” I still felt anxious when I returned again to bed but I managed to calm myself enough to fall eventually into an un-refreshing, tossing-and-turning slumber. I do not know if I dreamt again after that. I was glad though, when morning came.’

doi: 10.1192/bjp.192.1.31