

# THIS WEEK

## EDITORIALS

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## Mind how you go

*The protracted battle to find cures for psychiatric illnesses is changing course, but prejudice and stigma against those with poor mental health remain a problem.*

When *Nature* broke the news in December 2011 that Novartis was to close its brain research facility in Basel, Switzerland, the story noted that this move closely followed similar cuts by rival pharmaceutical firms. As a report from the European College of Neuropsychopharmacology had warned a few months earlier, the abandonment of research into new psychiatric drugs by AstraZeneca, GlaxoSmithKline and others meant that “withdrawal of research resources is a withdrawal of hope for patients and their families”.

That 2011 story did offer a glimmer of optimism. Novartis, we reported, was not deserting these patients and families completely. It planned to switch focus — away from conventional neuroscience-drug development based on chemistry and small molecules, and towards treatments based on the genetics of psychiatric and cognitive disorders.

As we report this week on page 153, the company has made good on its promise. It has reopened its neuroscience division, now at its global drug-discovery headquarters in Cambridge, Massachusetts, and has hired Ricardo Dolmetsch, a former senior director at the Allen Institute for Brain Science in Seattle, Washington, to head it.

In the time that Novartis has been out of the game, some things have changed in the field of psychiatric medicine, but some have not. Among the latter is the depressing ease with which mental illness is subject to stigma and misunderstanding. Just this month, two UK supermarkets — Asda and Tesco — were criticized for selling online ‘mental patient’ Halloween costumes, complete with bloody cleavers, and orange jump-suits stamped with the phrase ‘Psycho Ward’.

Both companies apologized, and removed the offending items from their digital shelves. If that was a clumsy mistake, and one that seemed to cash in on the Hollywood stereotype of the deranged killer rather than a deliberate move to offend, it is harder to find excuses for *The Sun* newspaper. On 7 October, the UK tabloid splashed on its front page that “mental patients” had killed 1,200 people in a decade (2001–10). Drawing on a sober report from the Centre for Mental Health and Risk at the University of Manchester, the newspaper mangled the results and managed to make the opposite point to that intended by the report’s authors about help for people with mental illnesses. Contrary to the newspaper’s claims, significant numbers of the 1,200 people highlighted were not receiving any treatment, and so were not “patients” and were under no supervision by the “broken” system. Of those who were being treated, many had alcohol and drug problems rather than severe delusional disorders. And, as the report made clear, homicides by patients with schizophrenia in the United Kingdom — the peg for the paper’s “exclusive investigation” was the manslaughter conviction last week of a man with schizophrenia — have fallen to an all-time low.

One heartening change seems to be that the prejudice written through *The Sun*’s story now seems out of step with the public mood — or at least with the mood of the public active on social media. Rapid Twitter campaigns saw the costume-selling supermarkets lambasted and, as *Nature* went to press, *The Sun* was facing similar online bombardment.

The science of mental health has changed too, as Novartis knows well. Earlier this year, when the American Psychiatric Association released the fifth edition of its *Diagnostic and Statistical Manual of Mental Disorders*, the official guide to mental illness, critics complained loudly about its listed categories, such as depression and bipolar disorder, and the way they are classified and diagnosed. Various books have poked holes in psychiatry and its relationship with the drug industry. And prominent researchers talk of the need to go back to the drawing board.

**“Millions of people are left exposed, vulnerable and ripe for tabloid demonization.”**

Some of this is down to the age-old antipathy of psychologists who prefer a holistic approach to mental illness and who dislike what they view as the reductionism of those who look to biochemistry for the fixes, if not always the causes. Some is down to deep distrust of big pharma, and staggering statistics that record the ever-growing diagnoses of mental disorders and prescriptions for drugs to combat them. But much is also down to sheer frustration that decades of research into psychiatric medicine have failed to find cures for these ailments, leaving millions of people exposed, vulnerable and ripe for tabloid demonization.

Novartis is not the only drug giant to adopt a new approach to this problem. Roche is taking a similar path, and others will surely follow, if only because of the size of the market if they get it right. That is far from certain. The science is immature and this approach looks more than a little like a leap of faith. But all who have a mental illness, and all who know someone affected (almost everybody), should wish them luck. ■

## Closed question

*The US shutdown is damaging science, and Congress must be called to account.*

On 1 October, lawmakers in Congress, bitterly divided along partisan lines, failed to agree on a new budget. The US government closed. Roughly 800,000 civil servants, including thousands of scientists, were ordered to stay at home. Even accessing their work e-mail would constitute a federal crime, they were told. Now entering its second week, the shutdown is showing few signs of abating.

Non-government scientists must be imagining that this nightmare will pass. This is just a Washington DC thing, right?

It is true that the effects are most pernicious in greater Washington, where commuter buses and trains have plenty of empty seats. At the National Science Foundation (NSF) in Arlington, Virginia, 98.5% of