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'I can't go on, I'll go on'



The title of this letter is from Samuel Beckett, and well summarizes the current state of psychiatric genetics. We are confronted by the fact that genetics makes a major contribution to psychiatric disorders but the identification of the responsible genes has so far been elusive. The lack of success is a result of the complex inheritance of the responsible loci, as well as their unknown interactions with the environment. This has been reflected by the confusing lack of replicability in the literature¹. Perhaps the one bright spot, so far, has been in the field of psychopharmacogenomics, which has recently yielded some interesting results relating to tardive dyskinesia² and the therapeutic responses to antidepressants3.

Looking to the future, there is increasing interest in high-density maps of single nucleotide polymorphisms (SNPs) for association studies in psychiatric disorders. These maps should also enable the creation of maps of linkage disequilibrium in the human genome4. In addition to providing interesting insights into population structure, this resource could simplify genetic studies by using a small number of SNPs to genotype large blocks of the

genome. However, there is a possible dark side to this enthusiasm. It could be possible to convincingly identify blocks of linkage disequilibrium that are responsible for psychiatric disorders, at the same time being unable to identify the genes within these blocks. This would be a major disappointment, as actual gene identification will be important for further understanding of psychiatric disorders, as well as designing novel therapies.

A major advance would be the discovery of large kindreds, where a psychiatric disorder segregates as a monogenic trait. For decades, it had been held that Parkinson's disease had no genetic contributions, until the discovery of rare families where the disorder clearly segregated as a single gene disorder5. The subsequent identification of the responsible genes provided new insights into the causation of this affliction. Similar families have yet to be identified for the psychiatric disorders, although an unusually strong linkage for schizophrenia was recently described in families of Celtic descent6. Overall, perhaps the most promising neuropsychiatric disorders for genetic analysis are those with very high heritability, such as autism. Other constructive approaches involve careful phenotypic characterization using endophenotypes rather than the

disorders themselves. One possible example would be the use of sensorimotor gating in schizophrenia.

Considering all of this, it might seem like the search for psychiatric genes will continue to be a black hole of wasted resources but this is not the time for pessimism. No other approach has quite the same promise for providing the insights that are essential for a molecular understanding of these disorders. I can't go on, I'll go on.

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The broader applications of neural and genetic modelling methods \(\neg\)

The recent article by Terfloth and Gasteiger¹ provides a brief but compelling review of the role of genetic