

Maltreatment in children with psychiatric disorders

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To the Editor,

Analyzing the publication “Managing intrafamilial maltreatment in psychiatric clinical care: Insights from an Italian adolescent cohort” (1), some confusing methodological and analytical elements are identified that limit inferences.

The presence of the specification of the term cohort in the title leads one to believe that it is a retrospective cohort design with groups separated by exposure to child maltreatment in order to verify the effects on the mental conditions of children. However, the retrospective data appear to be collected at the same time in a baseline, as there is no specification of temporality between exposure and behavioral outcomes. For example, it is not possible to know whether the maltreatment occurred before or after events of anxiety or depression. These variables were only measured at baseline, but it is not known whether the onset occurred before or after the maltreatment. The most appropriate for causality purposes is to observe the emergence of depression, anxiety, emotional dysregulation, and impulsivity among those exposed and not exposed to maltreatment. Therefore, this is a cross-sectional design based on the cohort baseline.

Another point worth highlighting is the estimation of the effect measure. In Table 5 of the study by Zaccaria et al. (1), the association between exposure to mistreatment and other social variables was estimated using the odds ratio (OR). This reinforces the thesis that this is a cross-sectional design because social

variable are independent variable. Furthermore, this effect measure is not suitable for both cross-sectional and retrospective cohort designs because it overestimates the effect of variables (2), as well as possible inaccuracies for mild risk/protective factors due to wide confidence intervals (2,3). The example is the case where the gender variable and its relationship with physical mistreatment (OR= 9.61; $p=0.067$). The ideal is to estimate the prevalence ratio (PR) using the Poisson or Cox distribution (2,3).

The absence of these aforementioned highlights may result in this study being included in synthesis studies such as systematic reviews with meta-analysis and make the effect measures inaccurate.

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RESPONSE

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Response to the Letter on “Managing Intrafamilial Maltreatment in Psychiatric Clinical Care: Insights from an Italian Adolescent Cohort”

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We appreciate the thoughtful comments regarding our recent publication “Managing intrafamilial maltreatment in psychiatric clinical care: Insights from an Italian adolescent cohort”, and we welcome the opportunity to clarify the methodological points that were raised.

First, regarding the classification of the study design, we recognize the importance of accurately distinguishing cross-sectional studies from cohort studies. While we referred to the study sample as a cohort throughout the paper, all the data were collected cross-sectionally, focusing on associations rather than causal inferences. We aimed to explore relationships within this dataset, but we acknowledge how further longitudinal studies would enhance the understanding of causality and allow for more robust analyses.

Regarding the choice of odds ratios (OR) as our measure of association, we acknowledge that prevalence ratios (PR) might offer a more direct interpretation of associations in cross-sectional analyses. However, limitations in data structure and sample characteristics influenced our choice of OR. We recognize the preference for PR in such analyses and will consider this measure in future studies where feasible.

We are grateful for their engagement and contributions to this important discussion. We hope that this exchange enhances understanding and encourages further research in managing maltreatment in psychiatric settings.