Translational Research in Child and Adolescent Psychiatry has a great potential in studying the dimensions of self-regulation in children with neuropsychiatric disorders and in typically developing children. We know that specific deficits, but also compensatory mechanisms contribute to elucidate the underlying biology and the development in children with neuropsychiatric disorders, such as in Tourette’s syndrome (TS)\(^1\), Attention-Deficit/Hyperactivity Disorder (ADHD)\(^2\) and obsessive-compulsive disorder (OCD)\(^3\).

The next important step is to apply this knowledge when investigating effects of clinical interventions in the same populations. Innovative, non-pharmacological interventions for children with neuropsychiatric disorders have fortunately become available during the last years. However, the dissemination of such interventions in clinical practice is still limited. Probable reasons are first, lack of sufficient evidence, second, higher expenses than for medication, and third, the absence of a strong lobby for non-pharmacological interventions. Such interventions often target the development of self-regulation, yet the specific neurobiological mechanisms for their effects have not sufficiently been studied in representative samples. Knowledge concerning these mechanisms will be a crucial contribution to individualised and high-quality medical treatment of children and adolescents\(^4\).

Another important aspect is the mapping of the underlying vulnerability (genetic and neurobiology) of children at risk for psychiatric disorders in a trans-diagnostic perspective\(^5\). Here, a longitudinal perspective, as well as the understanding of genetic and environmental factors\(^6\) is particularly relevant for the study of risk factors and resilience. Knowing more about the biological risk factors opens doors for preventive approaches, but poses in the mean time important ethical questions.
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