

whether PI (a) explains enhanced distress beyond negative automatic thoughts, and (b) moderates the negative thoughts-distress association in adults with cancer. In a cross-sectional survey, 381 adult patients (mean age = 50.5, SD = 9.61) recruited at Santa Chiara Hospital (Pisa, Italy) completed self-report measures of negative automatic thoughts, PI, anxiety and depression. Hierarchical regression models indicated that negative thoughts and PI were each associated with higher anxiety and depression. PI explained unique variance in both outcomes beyond negative thoughts, supporting incremental validity. PI also moderated the thoughts-distress association for both outcomes; moderation effects were modest, with a slight attenuation of the thoughts-distress association at higher PI. Overall, findings support PI as a clinically relevant vulnerability process beyond cognitive content, and suggest it may primarily elevate distress broadly while only subtly altering the impact of negative thoughts. Clinically, interventions targeting PI may reduce anxiety and depressive symptoms and may also influence how strongly negative thoughts translate into distress.

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doi:10.1016/j.jpsychores.2026.112826

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Trends and social inequalities in adolescent suicidal behaviors in Luxembourg: Evidence from HBSC Surveys (2006–2022)

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Aims

Suicide remains one of the leading causes of death among adolescents worldwide. This study examined long-term trends in suicidal behaviors among adolescents in Luxembourg and assessed social inequalities by gender, age, and socioeconomic status to inform population-level prevention strategies.

Methods

A representative sample of 24,528 adolescents aged 13–18 years participated in four waves of the Luxembourg Health Behaviour in School-aged Children (HBSC) surveys (2006, 2010, 2014, 2022) using a repeated cross-sectional design. Data were collected anonymously during school hours. Outcomes included prolonged sadness, suicidal ideation, suicide planning, and suicide attempts in the past 12 months. Trends and group differences were examined using descriptive statistics.

Results

Between 2006 and 2022, prevalence increased for prolonged sadness (26.9% to 37.7%), suicidal ideation (15.6% to 23.7%), suicide planning (11.2% to 20.9%), and suicide attempts (6.7% to 11.7%). Prolonged sadness increased with age, while suicide planning and attempts were more frequent in early adolescence. Girls consistently reported higher levels of suicidality than boys, with a widening gender gap over time. Adolescents perceiving their families as less well off reported the

highest levels of suicidal behaviors, whereas those from well-off families reported the lowest. Sadness and suicidality were consistently higher in general than in classical secondary education.

Discussion and conclusion

These increases align with broader evidence of declining adolescent mental health in Luxembourg and neighbouring countries, suggesting heightened distress and reporting among younger adolescents. Suicide prevention should adopt equity-oriented, multi-level strategies targeting vulnerable groups within schools, families, and communities.

doi:10.1016/j.jpsychores.2026.112827

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Prevention of psychosocial distress consequences in somatic hospital inpatients via a stepped and collaborative care model: Results from 'SomPsyNet', a stepped-wedge cluster randomised trial (NCT04269005)

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Background and aims

Psychosocial distress affects >1/3 of somatic hospital inpatients and is associated with reduced quality of life (QoL) and other adverse outcomes (1). Nevertheless, psychosocial needs are often insufficiently identified and addressed within routine care. “SomPsyNet” targets patients from SOMatic hospitals and aims to prevent PSYchosocial distress consequences by establishing a stepped and collaborative care model (SCCM) within a NETwork. This study evaluated the impact of the SCCM.

Method

To evaluate the effectiveness of SomPsyNet a stepped-wedge cluster randomised trial was conducted in three somatic hospitals in Basel-City/Switzerland between 06/2020–12/2022 (2) comparing outcomes among distressed patients with and without SCCM. Adult somatic inpatients were systematically screened for psychosocial distress operationalized using validated cut-offs of depressive symptoms (PHQ-8 \geq 10), anxiety symptoms (GAD-7 \geq 10) and/or somatic distress (SSD-12 \geq 23). The primary outcome was mental QoL (SF-36 Mental Component Summary MCS) at 6-month follow-up (1). Secondary outcomes included psychosocial distress (Distress Thermometer DT) as well as the screening measures. Analyses followed the intention-to-treat principle.

Results

A total of N = 1158 patients were examined; the primary impact analysis compared 589 distressed patients in the intervention phase with 569 in the control phase. Six months after baseline, subjects in the SCCM condition showed improved mental QoL (MCS: effect size \sim 0.337 [95%-CI 0.011-0.664]; $p < 0.05$) and reduced psychosocial distress (DT: effect size \sim -0.344 [95% CI -0.671 to -0.016]; $p < 0.05$).

Conclusion

An SCCM integrated into somatic hospital care is effective in improving mental QoL and reducing psychosocial distress. This approach aligns with proactive integrated consultation-liaison psychiatry (3).

Keywords

Somatic hospital inpatients, psychosocial distress, stepped and collaborative care model.

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doi:10.1016/j.jpsychores.2026.112828

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Lifestyle factors and cognitive function trajectories over a 9-year period: The Edad con Salud cohort study

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Background and aims

We aimed to examine the associations between tobacco use, alcohol consumption and physical activity (PA) with cognitive decline in the general population, and whether age and gender modified these associations.

Methods

We analysed data from 4,753 non-institutionalized adults followed across four waves between 2011 and 2022. Cognitive outcomes included immediate recall and verbal fluency. Independent variables were tobacco use (non-smokers, ex-smokers, current smokers), alcohol consumption (abstainers, occasional, moderate, heavy drinkers), and PA level (low, moderate, high). Adjusted linear mixed-effects models were conducted for the total sample and by age and gender. Ethical approval was obtained from the institutional review boards.

Results

Smokers and ex-smokers showed more favourable trajectories in immediate memory and verbal fluency compared to non-smokers, with effects varying by age and gender and being more evident in women. Occasional and moderate alcohol consumption was associated with better cognitive performance, particularly in middle-aged adults. An interaction between alcohol consumption and time was observed for immediate memory in this group, with abstainers showing poorer trajectories. Men appeared more vulnerable to the negative cognitive effects of alcohol. Low PA was consistently associated with poorer cognitive performance, whereas high PA was related to more favourable cognitive trajectories, especially from midlife onwards, similarly in women and men.

Discussion

Our results highlight the importance of promoting physically active lifestyles and considering age- and gender-specific approaches when addressing lifestyle factors in cognitive health. The beneficial effects of smoking or moderate alcohol consumption should be interpreted with cautious, as the observed associations may reflect short-term pharmacological effects, residual confounding, or selection biases.

doi:10.1016/j.jpsychores.2026.112829

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Evaluation of a mechanism-based psychological intervention for patients with ulcerative colitis or irritable bowel syndrome – A qualitative study within the SOMA.GUT-RCT

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