

Clinical experimental conduct

In all studies where 5-HIAA is measured in the cerebrospinal fluid, a lumbar puncture is performed. Informed consent is obtained from all patients prior to lumbar puncture. A washout period is necessary to cleanse the patients from any drugs that might have entered their system, and during this period the patients are also kept drug free with the exception of some milder benzodiazepines and barbiturates for sedation and relief of anxiety. In these studies, the patients were all put on a specific diet that did not allow alcoholic beverages. The CSF WAS collected early in the morning after at least 8 hours of fastening and strict bed rest since midnight. Lumbar puncture was performed at the standardized LIV-LV level, in the left lateral decubitus, between vertebrate 4 and 5. Because the puncture is done in the lower part of the spinal chord, the spinal nerves are not in danger, and thus there is no risk t of paralysation or nerve damage. Usually, 12 ml of CSF was retrieved, with the exception of the proceedings done by Mann & Malone (1997) where the sample was measured to be 15 ml. The samples were retrieved by a spinal needle 20 and 22 gauge. The fluids were stored in polypropylene tubes on ice. The samples were subjected to centrifugation and frozen at - 20 degree Celsius with the exception of Crementier et al (1999) AND Samuelsson et al (2006) who chose to store the samples at – 80 degrees Celsius, and Mann & Malone (1997b) who stored their samples at – 70 degrees Celsius. The samples were frozen until analyzed by mass fragmentography. The concentration of 5-HIAA was measured and expressed in nanomoles per litre, nmol/l, pmol/l as well as nanograms per millilitre ng/ml. As the clinical experimental conduct in measuring 5-HIAA levels in cerebrospinal fluid has been standard in all studies preformed on the subject, the result of these studies are directly comparable.