

Home » News » Work and Career News » Bipolar Disability Affected by Prior Episodes

Bipolar Disability Affected by Prior Episodes

By JESSICA WARD JONES, MD, MPH Associate News Editor Reviewed by John M. Grohol, Psy.D. on July 29, 2010

The frequency and types of prior episodes a bipolar individual has had may have a significant effect on their overall life function.

According to new research, bipolar patients who have had more episodes appear to have more overall disability. Those with more manic episodes have more problems with work and family, and those with more depression have more social difficulty.

"This study shows that disability affects an important proportion of bipolar disorder patients and that previous course-of-illness variables, particularly a high number of manic episodes, and current psychopathology – as indicated by the presence of nicotine dependence or depressive symptoms – may be indicators of disability," said Dr. Luis Gutiérrez-Rojas from the Institute of Neurosciences at the University of Granada in Spain, who led the research with his colleagues.

Bipolar disorder, also known by its older name "manic depression," is a mental disorder that is characterized by alternating moods, "highs" (what clinicians call mania) and "lows" (also known as depression). More than 5 million Americans suffer from bipolar disorder, according to the National Institute of Mental Health, and according to the World Health Organization, it is the sixth leading cause of disability worldwide.

Gutiérrez-Rojas and his colleagues reviewed the psychiatric histories of 108 patients diagnosed with bipolar disorder. The Sheehan Disability Scale was used to measure social and family life disability. Work disability was measured by whether or not the study participant was receiving a disability payment. Slightly more than half of the participants had some form of disability, and 37 percent had two types.

More than three previous manic episodes, current depression, nicotine dependence, and lower educational level were statistically associated with work disability.

Difficulty with social function increased with the number of hospitalizations, with multiple previous episodes of depression, in those who had lack of social support, and with current depression.

In addition, individuals with <u>bipolar disorder who were older</u>, who showed potential signs of alcohol abuse, who had been hospitalized more often, or who had had repeated manic episodes, had more difficulty with family life.

Previous research has shown that repeated episodes and repeated hospitalizations for bipolar disorder can worsen the course of the illness. Medication noncompliance can make symptoms more difficult to treat. These data should encourage physicians and patients to treat bipolar disorder more aggressively, as repeated episodes can also increase disability in several areas.

"Clinicians should make every effort to prevent relapses, to efficiently treat residual symptoms, and to enhance the social support of these patients," concludes Gutiérrez-Rojas.

The study is published in the July edition of the journal Psychiatry Research.

Source: Psychiatry Research

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2 de 2 03/08/10 11:39