A Trend of Medication Prescription Pattern for Outpatients with Bipolar Disorder in a University Hospital: Focusing On Atypical Antipsychotics

D. Jon¹, W. Bahk², Y. Kwon³, K. Lee⁴, M. Kim⁵, S. Lee⁶, B. Yoon⁷, W. Kim⁸, J. Seo⁹

¹Psychiatry, Sacred Heart Hospital College of Medicine Hallym University, Anyang, Korea ; ²Psychiatry, Yeouido St. Mary's Hospital, Seoul, Korea ; ³Psychiatry, College of Medicine Soonchunhuang University, Cheonan, Korea ; ⁴Psychiatry, College of Medicine Dongguk University, Gyeongju, Korea ; ⁵Psychiatry, Jeju National University Hospital, Jeju, Korea ; ⁶Psychiatry, Wonkwang University School of Medicine, Iksan, Korea ; ⁷Psychiatry, Naju National Hospital, Naju, Korea ; ⁸Psychiatry, Inje University Seoul Paik Hospital, Seoul, Korea ; ⁹Psychiatry, Konkuk University Chungju Hospital School of Medicine Konkuk University, Chungju, Korea

Aim: This study examined the prescribing patterns for medications to treat bipolar disorder in outpatient-based psychiatric practice focusing on atypical antipsychotics.

Methods: Retrospective chart review of patients admitted to a university hospital with a primary diagnosis of bipolar disorder in a period from January 2008 to December 2012 was conducted. We reviewed Diagnostic and Statistical Manual of Mental Disorders, fourth edition diagnosis and detailed clinical information at index episode. Psychotropic medications were grouped into six categories; atypical antipsychotics, typical antipsychotics, lithium, anticonvulsants, antidepressants, and minor tranquilizers. Severity, rapid cycling type, psychiatric comorbidity and disease duration were computed focusing on atypical antipsychotics.

Results: In 344 patients who were prescribed major psychotropic medications, atypical antipsychotics were prescribed in 70.9% of subjects, anticonvulsants in 73.3%, lithium in 36.9%, antidepressants in 41.9%, and typical antipsychotics in 0.9% of subjects. About 12.5% of subjects were treated with the monotherapy. Atypical antipsychotics prescription was favored in subjects with manic and mixed episodes or severe episode. Prescribing trend is independent of rapid cycling type. Prescription of antidepressants were more frequent in subjects who were recently diagnosed as bipolar disorder or prescribed new medications or existed psychiatric comorbidity.

Conclusions: The development of bipolar disorder’s psychopharmacology has been reflected in the prescription pattern of psychotropic medications in Korea. This study suggests that atypical antipsychotics have played major role in treatment of bipolar disorder.