The Clinical Assessment of Prognostic Factors in Bipolar Disorder- an Audit

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Introduction: Prognostic staging is one of the most important current psychiatrical challenges.

Objectives: Bipolar prognostic factors must be identified to assist in staging.

Aims: To assess prognostic factors, to describe any correlation with the disease outcome and to recommend that psychiatrists assess bipolar patients, determining their stage of disease in order to identify possible high-risk groups of patients.

Methods: We collected data from the clinical notes of 70 bipolar outpatients seen at the initial psychiatric assessment clinic about socio-demographic and clinical factors.

Results: The sample comprised 16 bipolar I (22.9%) and 54 bipolar II (77.1%) outpatients; 60.9% reported anxiety, 71.7 % mixed state features and 72.7% rapid cycling. A comparison between 12 prognostic factors found that only the correlations between current illicit drug use/previous illicit drug use, current alcohol use/previous alcohol use, and current illicit drug use/anxiety were statistically significant; the correlation between previous illicit drug use/previous alcohol use, previous alcohol use/family history and mixed state features/anxiety were almost significant.

17 patients were assigned to a care coordinator; we found no statistically significant differences between the patients with or without a care coordinator on the basis of the presence of 12 possible prognostic factors.

Conclusions: In our sample, some patients were found not to have information available so we suggest that a questionnaire to remind clinicians of potentially useful information would be helpful to aid in prognostication. Specific features of the disease (family history, age at onset, features of depressive episodes and mixed state, rapid cycling) may be highlighted.