

Oral presentation

Treatment of bipolar disorder part I: a critical review of treatment guidelines. Where do we stand?

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Background

Bipolar disorder is a common mental disorder. Type I and type II have a prevalence rate of up to 3.7% and both are disabling conditions. Their aims to the resolution of symptoms, restoration of psychosocial functioning and prevention of relapse. The development of treatment guidelines emerged as an important element so as to standardize treatment and to provide clinicians with algorithms, which would be able to carry research findings to the everyday clinical practice.

Materials and methods

The MEDLINE was searched with the combination of each one of the key words 'mania', 'manic', 'bipolar', 'manic-depression', 'manic-depressive' with 'treatment guidelines'.

Results

The search was updated until October 1st, 2003 and returned 204 articles. The review process based on the titles and abstracts selected 84 of them as relevant to include in the current study. Among them there were 26 papers concerning structured treatment algorithms proposed by official panels.

Discussion

The American Psychiatric Association and the Texas Consensus Conference Panel on Medication Treatment of Bipolar Disorder are the most up-to date guidelines. The core proposal of these guidelines is that all bipolar patients should receive continuous treatment with an antimanic agent with an intermittent use of antidepressants. At the first stage of the mania/hypomania algorithm, monotherapy with lithium, divalproex sodium or

olanzapine is recommended. At latter stages combination therapy is strongly recommended. It is clearly stated that in bipolar depression antidepressants should be used only in combination with antimanic agents in order to avoid switching of phases. During the maintenance phase all patients should receive antimanic agents, while some will need the addition of antidepressants.

Conclusion

The more recent guidelines point the value of atypical antipsychotics and particularly of olanzapine in the treatment of bipolar disorder as equal to that of mood stabilizers.