P-205 - MEDICAL CONDITIONS AND ASSOCIATED CLINICAL FEATURES IN BIPOLAR DISORDER: A CLINICAL STUDY

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Introduction: Several studies demonstrate that patients with Bipolar Disorder (BD) have worse physical health in comparison with the general population, reporting higher frequency of cardiovascular disease, diabetes, hepatitis, and respiratory disease (Kilbourne et al., 2004; Casey, 2005; Perron et al., 2009).

However, no studies have reported whether medical comorbidities correlate with clinical characteristics such as diagnosis, comorbidity, or other clinical variables.

Methods: We evaluated patients with BD diagnosed by SCID-I. Medical conditions were classified by ICD-10 and grouped according to the Cumulative Illness Rating Scales in: cardiac, vascular, hematopoietic, respiratory, ear/nose/throat, upper and lower gastrointestinal, hepatic, renal, genitourinary, musculoskeletal, neurologic, endocrine/metabolic.

The following variables were also collected: psychiatric comorbidity, age at onset, duration of illness, duration of untreated illness (DUI), lifetime suicide attempts.

Results: 309 patients with BD were recruited; the 68% had type II disorder. 195 (63%) were females. Age at onset was 50.7 years. 170 patients (55%) had at least one medical condition; the most frequent were endocrine/metabolic (23%), vascular (21%), musculoskeletal (11%). Medical comorbidity was related with age and DUI. Hepatic conditions were associated with Axis-II comorbidity.

Conclusions: Within medical conditions, endocrine/metabolic disease is the most frequently represented in patients with BD. DUI, which has been associated with worse outcome of BD (Suominen et al., 2007; Morken et al., 2009; Dell'Osso et al., 2010), is also associated with a higher medical burden also after controlling for age. This association might be mediated by the worse lifestyles and low levels of access to care in under-recognized patients.