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**Korean Medication Algorithm for Bipolar Disorder 2014**

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**Introduction:** There have been many changes in the treatment of bipolar disorder.

**Objective:** It is necessary to develop guidelines that can more aptly respond to cultural issues and specifics in different countries.

**Aims :** The Korean Medication Algorithm for Bipolar Disorder (KMAP-BP) was firstly published in 2002, with updates in 2006 and 2010. This third update reviewed the experts' consensus of opinion on the pharmacological treatments of bipolar disorder.

**Methods :** The newly revised questionnaire composed of 55 key questions about clinical situations including 223 sub-items was sent to the experts.

**Results :** Combination of mood stabilizer (MS) and atypical antipsychotic (AAP) was the first-line treatment option in acute mania. For the management of severe psychotic bipolar depression, combination of MS and AAP, combination of AAP and LTG, combination of MS, AAP and AD or LTG, combination of AAP and AD, and combination of AAP, AD and LTG was the first-line treatments. Combination of MS and AAP was the treatment of choice for management of mixed features. Combination of MS and AAP, MS or AAP monotherapy was the first-line options for management of maintenance phase after manic episode. For maintenance treatment after bipolar I depression, combination of MS and AAP, combination of MS and LTG, combination of AAP and LTG, MS or LTG monotherapy, and combination of MS, AAP and LTG were the first-line options.

**Conclusion :** Despite the limitations of expert consensus guideline, KMAP-BP 2014 may reflect the current patterns of clinical practice and recent researches.