Article: EPA-0749

Topic: EPW40 - Bipolar Disorders 2

## ASSESSMENT OF ATTENTION AND EXECUTIVE FUNCTION IN BIPOLAR AFFECTIVE DISORDER

V. Marinescu<sup>1</sup>, M. Vrabie<sup>1</sup>, A. Talasman<sup>1</sup>

<sup>1</sup>Psychiatry, Clinical Hospital of Psychiatry "Al. Obregia", Bucharest, Romania

Introduction: Cognitive impairment is often characterized as trait features of bipolar disorder.

Objective: To evaluate possible impairment of attention and executive function in bipolar patients.

Aim: Improving life quality of bipolar patients with cognitive deficits.

**Methods:** 75bipolar (depressive: Hamilton Depression Rating Scale score>=17, manic/hippomanic: Young Mania Rating Scale score >=12, euthymic:6month of remission, HAMDscore<=8, YMRSscore<=6) patients (DSMIVTR). All the patients were free of psychotic symptoms at the moment of neurocognitive evaluation. Comparison group consisted of 25 healthy subjects without history of neurological and/or psychiatric disorder. Cognitive battery included standardized test of IQ, attention, working memory, visual memory, verbal memory and executive functioning. Demographic data, data about family history, information about psychiatric history, past and current treatment, history of psychosis, duration of illness, age of onset were collected. We analyzed statistically these data and evaluate impairment of attention and executive dysfunction.

## Results:

Stable and lasting cognitive impairments involving attention and executive functioning (working memory, executive control, verbal fluency, mental manipulation and cognitive flexibility) are evident across all phases of illness. Longer durations of mood disturbance and higher number of hospitalization are negatively correlated with executive function.

Deterioration of executive functioning is related of hospitalization for mania. Attention and executive function are deteriorated by the recurrence of episodes. Sustained attention is impaired during mania, depression, euthymia. Selective attention deficits during acute episodes don't normalize during euthymia.

## Conclusion:

Bipolar patients exhibit widespread neurocognitive dysfunctions during their lives, and attention and executive function are important impaired domains regardless illness phases.