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EV182

Clinical and socio-demographic profile of bipolar I disorder patients

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Introduction The bipolar disorder (BD) is a chronic and severe disease which diagnosis and treatment are still raising the issues.

Aims To show a potential clinical and socio-demographic profile in BD patients.

Objective We hypothesized that BD patients have a particular clinical and socio-demographic characteristics.

Methods This was a descriptive and retrospective study which assesses 49 BD's outpatients. The diagnosis was accorded to DSM-IV criteria. The enrollment was conducted from January 2010 to August 2015. The socio-demographic and clinical data were collected by a preestablished railing.

Results The mean age was 39.7 years with a sex ratio of 1.33. Six patients (12.2%) lived in urban zones and 61% ($n=30$) patients have a lowly socioeconomic conditions. Celibacy was the prevailing civil status in 57.1% ($n=28$) among which 17 lived in family home. Thirty-four (69.4%) patients were unemployed.

A primary school level was found in 34.7% of the cases ($n=17$). Nineteen patients (38.8%) were schooled until the secondary level and 9 patients (18.4%) followed a university program.

Addiction to smoking was found at 26 patients (53%) whose half of them had moreover an alcoholic poisoning. The mean age at the diagnosis was 35.6 years with an inaugural manic episode in 63.4% ($n=31$) of the cases. The average number of relapse was 1.23 and the mean duration of follow-up was 3.2 years.

Conclusion The knowledge of the profile of the consultants, their socio-demographic and clinical characteristics would allow to adapt the offer of care to the request.

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Association between the 5-HTTLPR genotype and childhood impulsivity in subjects with bipolar II disorder

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Objective It has been suggested that the features of childhood ADHD are significantly associated with adult mood disorders. Some genetic factors may be common to both ADHD and mood disorders underlie the association between these two phenotypes. The present study aimed to determine whether a genetic role may be played by the serotonin transporter-linked polymorphic region (5-HTTLPR) in the childhood ADHD features of adult patients with mood disorders.

Methods The present study included 232 patients with MDD, 154 patients with BPD, and 1288 normal controls. Childhood ADHD features were assessed with the Korean version of the Wender Utah Rating Scale. The total score and the scores of three factors (impulsivity, inattention, mood instability) from the WURS-K were analyzed to determine whether they were associated with the 5-HTTLPR genotype.

Results In the BPD II group, the 5-HTTLPR genotype was significantly associated with the total score ($P=0.029$) and the impulsivity factor ($P=0.004$) on the WURS-K. However, the inattention and mood instability factors were not associated with the 5-HTTLPR genotype, and the MDD and normal control groups did not exhibit any significant associations between the WURS-K scores and the 5-HTTLPR genotype.

Conclusion The present findings suggest that the 5-HTTLPR genotype may play a role in the impulsivity component of childhood ADHD in patients with BPD II. Because of a small sample size and a single candidate gene, further studies investigating other candidate genes using a larger sample are warranted to more conclusively determine any common genetic links.

Keywords 5-HTTLPR; ADHD; Biopolar II disorder; Childhood; Impulsivity; WURS-K

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Thyroid dysfunction in inpatients with affective disorders

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Introduction Thyroid dysfunction has been linked to psychiatric disorders, particularly to affective disorders. Moreover, aging of the population receiving mental health care leads to an increased epidemiological risk of thyroid disease.

Objectives Assess the prevalence of abnormal thyroid function, and its correlations to clinical factors, in an acute psychiatric inpatients ward dedicated to affective disorders.

Aims Reflect on the clinical relevance of thyroid function screening on admission in mental health care.

Methods Retrospective, descriptive study, concerning inpatient episodes from a 12 month period (January to December 2015) in a ward dedicated to affective disorders, in a tertiary psychiatric hospital.

Results The prevalence of thyroid dysfunction across all psychiatric diagnostic groups was 11%. Preliminary data has shown higher prevalence in non-elderly women with personality disorder as a main diagnosis (30%, $P=0.017$). Only women were under thyroid replacement therapy, which was significantly more prevalent in those diagnosed with bipolar disorder.

Conclusion The relatively high prevalence of thyroid dysfunction underlines the relevance of its screening in mental health inpatients. Our results were consistent with the known epidemiology of thyroid disease. Correlations with bipolar and personality disorder were noted, which can contribute to improve the understanding of clinical-epidemiological relationships between thyroid disease and specific psychiatric disorders.

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EV185

Recognition and treatment of bipolar mixed states

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