# CORRELATES OF CANNABIS USE DISORDERS AMONG BIPOLAR OUTPATIENTS ENROLLED IN THE BIPOLAR EXPERT CENTERS FRENCH NETWORK

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**Introduction:** Bipolar disorder (BIPD) is a chronic and disabling illness with frequent comorbid addictive disorders (ADD). Little is known about the prevalence and correlates of cannabis use disorders (CUD) in that population.

**Objectives:** We sought to characterize clinical, sociodemographic, childhood trauma and psychological correlates associated with CUD in bipolar patients.

**Aims:** Our main hypothesis was that BIPD + CUD patients would be more impulsive and affectively unstable than those without.

**Methods:** Patients enrolled in a French national network underwent a thorough assessment including lifetime diagnoses using the SCID-IV questionnaire and measures of current symptomatology (Altman and MADRS), impulsivity (BIS-10), emotional instability (AIM and ALS), hostility (BDHI) and history of childhood trauma (CTQ). Univariate and multivariate analyses were used to identify specific associations between several correlates and CUD status.

**Results:** Among the 718 patients included, 414 (57.7%) were women, with a mean age of 43 years, and 546 (76.4%) were diagnosed with type I bipolar disorder and 190 (26.9%) had at least one lifetime substance use disorder. CUD were associated with lifetime history of suicidal behavior, psychotic symptoms during an affective episode, rapid cycling and CTQ sub-scores, clinical and psychological dimensions. Parts of these associations remained after controlling for comorbid alcohol use disorders.

**Conclusions:** These results suggest a high prevalence of CUD in BIPD, which was associated with a higher severity and worse outcomes of illness. Although the retrospective nature of this study prevents causal interpretations, our results suggest that at-risk traits among CUD+BIPD patients may induce these clinical features.