

Bipolar disorder and antipsychotic medication use in routine clinical practice - Results from the BIRD survey

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Objective: This retrospective survey aimed to explore the reason for switching antipsychotic medication in bipolar patients and the outcome of the medication change.

Design: A retrospective chart review conducted in 4 European countries, Greece, Netherlands, Norway and Sweden.

Methods: 420 patients with a diagnosis of bipolar disorder whose previous antipsychotic medication had been switched to an atypical antipsychotic within the last 12 months were analysed. Information was recorded 3 months prior to switch, at time of medication change and 3 months after medication change.

Results: Patient characteristics: 55% of patients were women and the mean age was 42.4 ± 13 years. The diagnosis of 80.2% of patients was bipolar disorder I followed by 17.4% of patients with bipolar II.

62.1% (N=261) of patients were switched from a conventional antipsychotic with haloperidol being the by far most frequently mentioned (N= 137) and 37.9% (N= 159) changed from one atypical to another atypical agent. 111 patients were switched from Olanzapine.

Risperidone was the most frequently chosen medication to switch patients to, 156 patients who previously received conventional medication and 104 patients with previous atypical medication were started on Risperidone.

In patients previously treated with a conventional antipsychotic the main reason for treatment change was side effects 62.2% (mainly EPS) followed by lack of efficacy (44.1%). When patients were switched from one atypical to another atypical again side effects with 66.7% (predominantly weight gain) were the main driver for treatment change, followed by lack of efficacy (45.9%). Outcome 3 months after switch: 84% (N=221) of patients were considered as globally clinically improved (much or very much improved) after switching from a conventional antipsychotic to an atypical antipsychotic. For patients switching from one atypical to another 88.1% (N=140) were rated on CGI as much or very much improved.

Conclusion: A considerable number of patients is still treated with a conventional antipsychotic. Bipolar patients benefit if the antipsychotic drug choice is adjusted to their needs.