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AT-RISK-STATES FOR BIPOLAR DISORDER

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Early intervention strategies have been developed over the past 20 years for psychotic disorders and recent studies have proven their efficacy. However, most of the attention has been drawn to schizophrenia, and affective psychoses have been neglected. In the recent past, new research has identified a similar need for earlier intervention in bipolar disorders, and prodrome to bipolar disorder has emerged as a key domain to investigate. Despite the complexity of this issue due to the lack of a clear consensus regarding definitions of the various stages of the disorder, some progress has been made in this domain.

Two recent retrospective studies have identified a prodromal phase to first episode mania lasting between 6 and 18 months, and have identified a range of symptoms that occur during this period. It is however likely that on the basis of symptomatic profile, identification of at risk patients would be difficult, considering their low specificity. Two complementary directions have been recently proposed in order to refine such an approach. The first strategy, based on at-risk profiles inspired by the Ultra High Risk concept developed for psychosis, has yielded some promising results on a small sample of patients. The second is based on the combination of identified risk symptoms with both risk factors and markers of vulnerability into a First Episode Mania Prodrome Inventory which is currently under validation.