Bipolar Disorder and Substance Use Disorder – Experience of a Portuguese Psychiatric Hospital

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BACKGROUND

Bipolar Disorder (BD) has the highest rates of comorbid Substance Use Disorders (SUDs). Approximately **60%** of the patients with BD have a lifetime diagnosis of SUD^{1,2}. This comorbidity affects both **clinical presentation** and **outcome**, impacts the **therapeutic approach**, and is associated with **lower adherence** to treatment, **higher use of health services** and greater **functional impairment**.³⁻⁵ Excluding tobacco, **alcohol** is the substance most often abused, followed by cannabis, amphetamines, and cocaine.⁶

OBJECTIVES and METHODS

To evaluate the relationship between BD diagnosis and SUD in a sample of Bipolar patients hospitalized in Hospital Magalhães Lemos during 2018. The study was conducted by consulting and analyzing clinical files about sociodemographic and multiple clinical dimensions.

RESULTS

In a total of **2890** hospitalizations, **138** were diagnosed with **BD** and **43** with **SUD**, about **31%**.

Age of current hospitalization (years)

	Non-users	Users
Mean	48*	54*
Mode	43 / 53	47 / 53
Median	48	55

*sig ($p<0,05$)

T-test for independent samples

Users are younger than non-users.

Age of the first hospitalization (years)

	Non-users	Users
Mean	44*	38*
Mode	37	20 / 44
Median	43	37

*sig ($p<0,05$)

T-test for independent samples

Users have earlier hospitalizations in life than non-users.

Gender

Chi-Square test for independence

Non-users are more likely to be females, while no association was found in Bipolar users.

Mood Stabilizer Treatment

Length of hospitalization (days)

	Non-users	Users
Mean	33,51*	45,07*
SD	26,09	48,65

*sig ($p<0,05$)

Two-way ANOVA

Users have longer hospitalizations than non-users, when controlling for current episode type.

Episode Type	Non-users	Users
Maniac	28,98 ^x	44,12
Depressive	43,73	42,5
Mixed	35,21	61

*marginal ($0.10>p>0,05$)

Two-way ANOVA

Non-users have shorter hospitalizations than users when hospitalized for manic episode ($p=0.065$).

Two-way ANOVA

Non-user males had longer hospitalizations than females but this reverses in the users' group.

Bipolar Disorder Subtype

Type of Substance Use

CONCLUSIONS

Given its prevalence and impact on public health, knowing particularities and interactions between BD and SUDs can improve prevention, treatment options and assessment and, therefore, prognosis. This study allowed a better understanding of the differences and similarities in some clinical dimensions, directly comparing both populations.

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