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Half the patients with bipolar disorder suffers work, social or family disabilities

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Such was the conclusion obtained in a study conducted at the University of Granada that was recently awarded a prize in the IV Spain-Portugal Meeting on Therapeutical Adherence held in Oporto (Portugal). This research study analyzed the factors associated to higher work, social and family disabilities in a sample of 108 patients suffering from bipolar disorder

According to the study, 50% of patients suffering from bipolar disorder suffers some type of work, social and family disability, and approximately 20% present some disorder at the three levels.

This was the conclusion drawn in a cientific article recently published in the prestigious journal Psychiatry Research, prepared by Dr. Luis Gutiérrez Rojas, a member of the Research Group of Psychiatry Research and Neuroscience of the University of Granada coordinated by professor Manuel Gurpegui Fernández de Legaria. This study analyzed the factors associated to serious work, social and family disabilities in a sample of 108 patients suffering from bipolar disorder.

This research revealed that work disability –that is, difficulty to perform normal job duties– in these patients was associated to high recurrence of maniac episodes, as well as to recurrent psychiatric hospitalization –high-intensity episodes–, depression and low educational levels. Furthermore, nicotinic dependency –strong addiction to tobacco– can be more disabling in patients with bipolar disorder than depression.

## Social Support

Gutiérrez Rojas states that social disability -difficulty to establish relations out of the family and to achieve social integration – in these patients is associated to higher hospitalization rates, episodes of depression and active depression symptoms. "Receiving social support is associated to lower social disability in these patients" –the author

Lastly, family disabilities –difficulty to have good relations with family members– was found to be associated to hospitalization, maniac episodes, symptoms of depression and to higher scores in the CAGE scale, which measures addiction to alcohol.

The University of Granada researcher adds that, to avoid disability in patients with bipolar disorder "recurrence of depressive and maniac episodes must be avoided, and physicians should treat these episodes promptly to avoid hospitalization".

Gutiérrez Rojas states that dependency to tobacco -appart from serious physical sequels- is associated to a worse bipolar disorder prognosis. Simultaneously, social support should be improved or sought for patients deprived of it. For instance, home assistance –instead of financial support– can be sought within the framework of the Spanish Law of Dependency. Patients can also be advised to attent patient meetings in search of information and support."

Alcoholism is specially conflictive at family level, and alcohol is the most abused substance in patients with bipolar disorder. "Detecting alcohol abuse in patients is specially important to improve family relations"

The results obtained in this study were recently presented in the IV Portugal-Spain Meeting for Therapeutical Adherence held in Oporto, Portugal, where it was awarded the third research prize.

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