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Foreword

Clinical management of bipolar disorder

Philip B Mitchell

This is a timely publication. There is rapidly growing interest in bipolar disorder both in the clinical community and general population. Bipolar disorder is a common and highly disabling condition affecting 1–2% of the community [1] and comprises one of the top 20 disabling conditions globally [2]. There has been growing academic interest in this condition over the last 20 years, prior to which it was considered a somewhat ‘Cinderella’ disorder, very much in the shadow of both depression and schizophrenia [3]. We are now seeing the early fruits of the subsequent focused research endeavor, with, for example, the recent discovery and replication of bipolar disorder susceptibility genes in a large international genome-wide association study [4].

This book brings together eminent clinical researchers from three continents. Their aim is to draw insights from recent research to assist clinicians, consumers and other interested parties who share the goal of improving the outcomes of sufferers from this severe and frequently devastating disorder. Moreover, the authors share optimism that application of current knowledge can substantially improve the lives of patients and that future research is critical to further improve responses.

Brietzke *et al.* discuss recent epidemiological and etiological research in bipolar disorder, reviewing the major national and international surveys. They address both biological and psychosocial factors in the etiology of this disorder, and focus on contemporary interest in possible abnormal neuroplasticity. Puras and Mitchell examine current diagnostic and nosological approaches for bipolar disorder, including standard systems such as the US Diagnostic and Statistical Manual (DSM) Fourth and Fifth Editions, as well as the more controversial concept of the soft bipolar disorder spectrum. They discuss concerns about both over- and under-diagnosis of bipolar disorder and the ramifications of these. Delmonte *et al.* review nonpharmacological treatments for bipolar disorder. While focusing on biological treatments such as chronotherapy and brain-stimulation techniques, such as transcranial magnetic stimulation, they also discuss structured psychological therapies, such as psychoeducation. Dell'Osso *et al.* provide a thoughtful and comprehensive review of pharmacological treatments for the various phases of bipolar disorder. Of particular interest, they focus on the controversial area of the management of bipolar depression, as well as treatment in specific populations, such as the elderly, children and during pregnancy. Grassi-Oliveira *et al.* examine the prognosis and long-term outcome of this condition, with a particular interest in functional decline. They use the theoretical approach of allostatic load to explain decline in this illness, that is, that decline in bipolar disorder may result from the physiological consequences of chronic stressors and other insults. Balanza-Martinez and Dias further explore neurocognitive changes in this illness. They argue for the centrality of neurocognition in truly understanding bipolar disorder, and provide guidance on approaches to clinical management of cognitive impairment. Finally, Pompili and colleagues examine the critical issue of suicide risk, reviewing the evidence for high suicide attempts and completed suicide rates for patients with bipolar disorder. They then outline very useful approaches to assessment and management.

This book provides a very rich and up-to-date menu on bipolar disorder. More so, in addition to providing high-quality critical and scholarly reviews of each topic, the authors provide useful clinical guidance to aid clinicians in their day-to-day practice.

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