

Letter to Editor

SUBSYNDROMAL SYMPTOMS IN BIPOLAR DISORDER : ROLE OF LITHIUM

Sir,

In a cross sectional study on a purposive sample, Kumar et al.(2001) assessed the relationship between psychosocial variables, subsyndromal affective psychopathology, and psychosocial functioning in 68 bipolar patients stabilized on prophylactic lithium. They found that higher daily hassles and life events scores were associated with higher depression ratings, while lower perceived social support scores were associated with higher general psychopathology ratings. The psychosocial measures, however, explained only 7-23% of the variance in psychopathology and global functioning.

In an earlier series of randomized, controlled, prospective studies on bipolar I patients, Gelenberg and his co-workers (Gelenberg et al., 1989; Keller et al.,1992; Solomon et al., 1996) showed that the risk of relapse, occurrence of subsyndromal symptoms, and impairments in psychosocial and occupational functioning were alike associated with lower (<0.6mEq/L) relative to higher (0.8-1.0 mEq/L) serum lithium levels.

In this context, it may be recalled that decades-old-research found that neuroleptic drug therapy partially protects against the risk of relapse in schizophrenic patients exposed to high levels of expressed emotions in their families (Vaugh and Leff, 1976; Vaughn et al., 1984). So, might high serum lithium levels in bipolar patients exposed to high levels of stress likewise be protective? The serum lithium levels in the patients studied by Kumar et al. (2001) ranged from 0.5 to 1.0 mEq/L. Assuming a reasonably normal distribution of values within this range, we suggest that Kumar and his colleagues enter serum lithium

levels along with the psychosocial variable scores in their regression equations which seek to predict psychopathology and global functioning. The results of the analysis would indicate whether higher levels of serum lithium offset the adverse effects of psychosocial stress.

The confirmation or refutation of the findings of Gelenberg and his colleagues can have an important impact on recommendations for lithium maintenance regimens. The findings, either positive or negative, would also provide an Indian slant on the subject; such a slant is necessary because there is no assurance that psychopharmacological recommendations valid for Caucasians are also valid for Asians and subgroups thereof.

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CHITTARANJAN ANDRADE, & S. KURINJI,
Department of Psychopharmacology, National
Institute of Mental Health and Neurosciences,
Bangalore 560 029