

PTSD AS RISK FACTOR IN RAPID CYCLING BIPOLAR DISORDER

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Abstract

Objective: PTSD is a common komorbidity of bipolar disorder. Excluding PTSD after being diagnosed as bipolar disorder I or II, prospectively tracking patients for three years assessing the impact of lifetime PTSD as a risk factor for rapid cycling. **Methodology:** 100 patients diagnosed at least two years with Çrregullim Bipolar I and II were assessed with the MINI (Mini neuropsychiatric interview) and ADE (affective çrregullimeve assessment) komorbidity with Çrregullime Anxiety, PTSD, and episodes of humor and were followed for a period of dynamic three vjeçare. Naturalistic study le treating doctor sets for the type of treatment. Data were collected from December 2009 to December 2012 in community mental health center 2 and Tirana psychiatry service. **Result:** In 39 men and 61 women included in the study, 16 of them in history PTSD. 31% of patients makes quick ciklim while attending three vjeçare (DSM IV TR criteria). 53% of patients with rapid ciklim have PTSD in history. The use of antidepressants in the treatment did not affect the rapid cycling. The presence of PTSD is associated with the emergence of depressive episodes with mixed features (Irritability, racing thowts, distraktibilitet). **Conclusion:** PTSD in life has an impact on the development of rapid cycling bipolar patients, pamvarësisisht of the use of antidepressants, as well as affects simptomatikën mixed depressive episodes.