Annals of General Psychiatry

Poster presentation

European mania in bipolar longitudinal evaluation of medication study (EMBLEM): clinical outcomes during the acute phase for the greek population

Vasiliki Psarra*[1], Vangelis Drossinos[1], Maria Mantellou[1], Dimitrios Massaras[1] and Catherine Reed[2]

Address: [1]Medical Department of Clinical Research, Pharmaserve-Lilly, Greece and [2]Eli Lilly and Company, Windlesham, UK
* Corresponding author

from International Society on Brain and Behaviour: 3rd International Congress on Brain and Behaviour
Thessaloniki, Greece. 28 November – 2 December 2007

Published: 17 April 2008

Annals of General Psychiatry 2008, **7**(Suppl 1):S180 doi:10.1186/1744-859X-7-S1-S180

This abstract is available from: http://www.annals-general-psychiatry.com/content/7/S1/S180

Background

Bipolar disorder is a life-long psychiatric illness found in 2-5% of the population [1]. The aim of the present study was to describe the 12-week (acute phase) clinical outcomes of Greek standard practice in the pharmacological treatment of acute mania.

Materials and methods

EMBLEM (European Mania in Bipolar Evaluation of Medication) was a 2-year prospective observational study on the outcomes of pharmacological treatment for acute mania. All treatments were at the discretion of the treating psychiatrist. The clinical status of the Greek patients was studied during the first 12 weeks of treatment in the acute phase of the illness, with the use of CGI-BP, YMRS and HAM-D-5.

Results

A total of 3684 patients were enrolled in 14 European countries, between December 2002 and June 2004. The Greek subpopulation consisted of 645 eligible individuals (18%). Greek patients experienced clinical improvement as shown by the decrease in mean CGI-BP overall and mania subscales, YMRS and 5 item HAM-D over 12 weeks of the acute phase. 72% of the Greek patients had improved (defined as the first decrease of a minimum of 2 points in CGI-BP overall at any time during acute phase) and 31% had recovered (defined as a score of 2 or less on CGI-BP overall in the last visit and the visit prior to last). Compliance also improved as the percentage of patients who almost always complied with medication increased from 44% at baseline to 82% at week 12. The majority of patients received atypical antipsychotics either as monotherapy or as combination therapy for the duration of treatment.

Conclusions

This large observational study showed that most patients experienced clinical improvement after 12 weeks of treatment and that atypical antipsychotics were the most commonly taken as combination therapy for acute mania.

Acknowledgements

The Hellenic EMBLEM study team: Alexopoulos S, Anagnostara C, Arapidis K, Arvaniti C, Aspradakis E, Bakaras P, Balla A, Baslis D, Chamogeorgakis T, Charalampous A, Chatzakis A, Chatziioannou G, Chatzopoulou P, Christodoulaki M, Daffas A, Deres S, Dimopoulos G, Diakogiannis I, Evangelinos T, Fortos A, Gatos K, Georgila P, Georgopoulou K, Giamoukis S, Giannopoulou K, Iliakis P, Kakkavas P, Kalogeropoulou K, Kanavakis M, Karagiannidis C, Karadedos A, Karvelas A, Kladouchos V, Kolostoumbis D, Konstantinou A, Kontis K, Koufidis V, Lazanakis M, Lennas D, Leotsakou C, Maggouta A, Mallis D, Markadakis C, Mavridakis A, Nikolakakis A, Panagopoulos F, Pappas E, Pastakas S, Potamitis D, Roubos V, Spyropoulou A, Syrmos I, Terzopoulos I, Theodoropoulou P, Valavanis P, Vartzopoulos D, Vasilakos G, Verveniotis S.

References

1. Huxley N., Baldessarini R.: **Disability and its treatment in bipolar disorder patients.** *Bipolar Disorders* 2007, **9:**183-196.