

MEETING ABSTRACT

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# Temperament and schema-focused diagnosis in soft bipolarity

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The current concept of Bipolar Spectrum is still evolving and much more interest is focused on the definition of Hypomania (BP-II Disorder) and especially Cyclothymic Disorder. In order to get the entire diagnosable range of bipolar conditions, the clinical approach must go beyond "polarity" of episodes: family history, age of onset, time course (circularity), level of recurrence, type of cyclicity (exogenous/endogenous), and especially affective temperaments. Clinical researches have been dedicated to explore affective temperaments and their role in psychopathology of mood disorders. Cyclothymia appears to be a likely precursor or a basic primary ingredient of the construct of soft bipolarity. The French studies directed by Hantouche and Akiskal showed that Cyclothymia is probably the most frequent expression of bipolar disorder, and represents a distinct entity with early onset, irritable ("dark") hypomania and high suicide risk. Despite these facts, there is a lot to learn about Cyclothymia. In the "psycho-education group therapy" model for Cyclothymia, elaborated in the CTAH, we recently addressed the following issues:

- Links between Cyclothymic Temperament and Hypomania, dimensionally explored by the HCL-32 (Angst)
  - Relationships between affective temperaments, especially Cyclothymic Temperament (assessed by TEMPS-A) and temperament (as measured by the Adult Temperament Questionnaire and the Affective Intensity Scale)
  - Role of Cyclothymia in the "schema-focused approach" (J. Young)
  - Expression of Cyclothymia through psychological vulnerabilities and interpersonal conflicts
- Preliminary data will be presented.

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