

P01-204

GYNAECOLOGICAL AND OBSTETRIC COMORBIDITIES IN PATIENTS WITH BIPOLAR DISORDER: A SYSTEMATIC REVIEW

J. Bobes¹, J.M. Montes², J. Mostaza³, F. Rico-Villademoros⁴, E. Vieta⁵, J. Saiz-Ruiz⁶

¹Department of Medicine, Universidad de Oviedo, CIBERSAM, Oviedo, ²Hospital del Sureste, Arganda del Rey, ³Department of Internal Medicine, Hospital Carlos III, ⁴Universidad de Alcalá de Henares, Madrid, ⁵Hospital Clinic, University of Barcelona, CIBERSAM, Barcelona, ⁶Department of Psychiatry, Hospital Ramón y Cajal, University of Alcalá, CIBERSAM, Madrid, Spain

Objective: To synthesize the available knowledge on gynaecological and obstetric comorbidities in patients with bipolar disorder (BD).

Methods: Relevant studies were identified by a MEDLINE search from 1966 to January 2008, and supplemented by a manual review of reference lists of the articles identified and previous review articles. We included studies with any design, in patients with BD as diagnosed by any criteria, with sample size ≥ 30 patients, and reporting any measure of frequency or association as regards the comorbidities. When available, priority was given to comparative studies.

Results: We identified 4 studies: 3 were comparative; 1 was cross-sectional and 3 were retrospective cohort studies; 1 was population-based study; and 4 used a convenience sample. A retrospective study reported an increased risk of pregnancy complications in patients with BD (OR 1.23, 95%CI 1.06-1.44) but not of labor/delivery or neonatal complications; as compared to controls, patients with BD had an increased risk of placenta previa (OR 2.04, 95% CI 1.11-3.73), antepartum hemorrhage (OR 1.66, 95%CI 1.15-2.39), and drug side-effects (OR 3.94, 95%CI 1.46-10.62). In another retrospective study, patients with BD had an increased risk of endometriosis (OR: 1.93, 95%CI 1.37-2.70), inflammatory disease of ovary (OR 2.17, 95%CI 1.84-2.57), and disorders of menstruation (OR 1.79, 95%CI 1.56-2.05). In a cross-sectional study, gynaecological disorders were more common in patients with BD than in patients with schizophrenia (4% vs 1.3%).

Conclusion: Although the information is scanty, available data suggest that patients with BD might have an increased risk of gynaecological and obstetric comorbidities/complications.