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Early Intervention for Adolescents At-Risk for Bipolar Disorder: A Pilot Randomized Trial of Interpersonal and Social Rhythm Therapy (IPSRT)

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## Highlights

- Interpersonal and Social Rhythm Therapy (IPSRT) is feasible and acceptable to deliver to youth at high risk for bipolar disorder by virtue of a first-degree family history of the illness.
- Few youth referred for community mental health services at intake initiated services over 6 month follow-up, highlighting the need for engagement efforts with this population.
- No youth developed new-onset mood disorder over follow-up. Self- and parent-reported mood and non-mood psychiatric symptoms did not distinguish youth receiving IPSRT + Data-Informed Referral (DIR) for any psychiatric disorders present at baseline versus DIR-alone. Per clinician ratings, 1 youth receiving IPSRT+DIR displayed subthreshold hypo/manic symptoms, versus 2 receiving DIR-alone over 6-months, possibly signaling less subthreshold hypo/manic symptoms, and for fewer weeks.
- Although no self-reported measure of sleep distinguished the groups, we found a small effect for youth in the IPSRT+DIR group to evidence more wake after sleep onset (WASO; an index of sleep continuity) via actigraphy over follow-up.

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