

Author's Accepted Manuscript

Predictors and outcomes of somatization in bipolar I disorder: A latent class mixture modeling approach

Juliet Beni Edgcomb, Berit Kerner



PII: S0165-0327(17)30750-4
DOI: <https://doi.org/10.1016/j.jad.2017.11.083>
Reference: JAD9397

To appear in: *Journal of Affective Disorders*

Received date: 27 April 2017
Revised date: 3 October 2017
Accepted date: 13 November 2017

Cite this article as: Juliet Beni Edgcomb and Berit Kerner, Predictors and outcomes of somatization in bipolar I disorder: A latent class mixture modeling approach, *Journal of Affective Disorders*, <https://doi.org/10.1016/j.jad.2017.11.083>

This is a PDF file of an unedited manuscript that has been accepted for publication. As a service to our customers we are providing this early version of the manuscript. The manuscript will undergo copyediting, typesetting, and review of the resulting galley proof before it is published in its final citable form. Please note that during the production process errors may be discovered which could affect the content, and all legal disclaimers that apply to the journal pertain.

Title: **Predictors and outcomes of somatization in bipolar I disorder: A latent class mixture modeling approach**

Juliet Beni Edgcomb, M.D., Ph.D.¹

Semel Institute for Neuroscience and Human Behavior, University of California, Los Angeles, CA, USA

Berit Kerner, M.D.

Semel Institute for Neuroscience and Human Behavior, University of California, Los Angeles, CA, USA

Witten/Herdecke University, Witten, Germany

Abstract

Background: Mood disorders are often associated with somatic symptoms. The role of somatic symptoms on disease progression in unipolar depression is substantially better characterized than that role in bipolar disorder. Moreover, the contribution of comorbid anxiety disorders and medical illness is not well understood.

Method: We investigated 527 patients with bipolar I disorder clustered within 102 families using a latent class approach. Predictors were added stepwise into the model. Anxiety and commonly associated medical illnesses were added as covariates.

Results: The rate of somatic symptoms in this sample was 73% (mean 1.7 symptoms), and 27.3% had a comorbid anxiety disorder. A two-class model, with a subgroup at high-risk for somatization, gave the best fit to the data. Multilevel mixture modeling accounted for family clusters. Somatic symptoms were independently associated with disease severity, defined as earlier age of first seeking psychiatric help ($x=21.7$ vs $x=24.7$, $p=0.005$) and first psychiatric hospitalization ($x=25.7$ vs $x=28.2$, $p=0.03$), greater probability of attempting suicide ($x=0.41$ vs $x=0.32$, $p=0.047$), and rapid-cycling disease course ($x=0.57$ vs $x=0.36$, $p<0.001$). Persons with few or no somatic symptoms were more likely to be hospitalized for severe mania ($x=0.63$ vs $x=0.51$; $p=0.013$), but did not significantly differ in hospitalization for severe depression.

Limitations: The study is correlational. Information on pharmacologic interventions and comorbid diseases was limited.

Conclusions: Somatic symptoms in bipolar disorder could be an independent indicator for disease severity, suicidality, and rapid-cycling disease course. In severe mental illness, somatic and psychological symptoms must be jointly addressed.

Keywords

bipolar disorder, somatic, somatization, medical, physical symptoms, anxiety

bipolar disorder, somatic, somatization, medical, physical symptoms, anxiety

¹ Corresponding author:

Juliet Beni Edgcomb, M.D., Ph.D.

UCLA Semel Institute for Neuroscience and Human Behavior

760 Westwood Plaza

Los Angeles, CA, 90024

jedgcomb@mednet.ucla.edu

Telephone: (310)-794-2053

Fax: (310)-825-0340

Download English Version:

<https://daneshyari.com/en/article/8815978>

Download Persian Version:

<https://daneshyari.com/article/8815978>

[Daneshyari.com](https://daneshyari.com)