Factors Associated with a Delay in the Diagnosis of Bipolar Disorder
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Introduction

- Bipolar Disorder (BD) is a chronic psychiatric condition characterized by recurrent episodes of depression and mania/hypomania.
- There is usually a significant delay between the onset of the illness and the accurate diagnosis of BD which can lead to inappropriate treatments, poor clinical outcomes and higher economic burden [1-2].
- In this study, we aimed to examine the clinical and demographic factors associated with delayed diagnosis of BD using data from a Canadian multicenter naturalistic study.

Methods

- The sample for this study included participants enrolled in the Health Outcomes and Patient Evaluations in Bipolar Disorder (HOPE-BD), a longitudinal study conducted by The Canadian Network for BD.
- Duration of undiagnosed bipolar disorder (DUBD) was defined as difference between the age at first mood episode and the age at the correct diagnosis of BD.
- We explore sociodemographic and clinical features associated with DUBD.
- We also used quantile regression to examine the early predictors of DUBD in bipolar I disorder (BD-I; N=192) and bipolar II disorder (BD-II; N=127).

Results

- The median DUBD was 5 years in BD-I and 11 years in BD-II (Fig 1).
- Depression as the first mood episode had a longer DUBD compared with mania or hypomania (p < 0.0001) and pediatric-onset BD was associated with a longer delay than adult-onset BD (p < 0.0001).
- Lifetime suicide attempts and comorbid anxiety disorders were associated with a longer delay, whereas lifetime psychotic symptoms and psychiatric hospitalizations were associated with a shorter delay.
- Quantile regression analyses showed depression as first episode, older age at first professional help and younger age of onset as predictors of increased delay in diagnosis of BD-I and BD-II. Depression as first episode was a predictor of longer delay in diagnosis of BD-I but not BD-II (Fig 2).

Fig 1: Key Clinical Milestones

<table>
<thead>
<tr>
<th>Milestone</th>
<th>BD-I Median (IQR)</th>
<th>BD-II Median (IQR)</th>
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</thead>
<tbody>
<tr>
<td>First mood episode</td>
<td>23.0 (17.0 – 31.0)</td>
<td>23.0 (18.0 – 32.0)</td>
</tr>
<tr>
<td>First professional help</td>
<td>27.0 (20.0 – 36.0)</td>
<td>27.0 (20.0 – 36.0)</td>
</tr>
<tr>
<td>Diagnosis of bipolar disorder</td>
<td>35.0 (27.0 – 44.0)</td>
<td>33.0 (25.7 – 42.0)</td>
</tr>
<tr>
<td>DUBD</td>
<td>8.0 (2.0 – 16.0)</td>
<td>5.0 (0.0 – 13.2)</td>
</tr>
</tbody>
</table>

Fig 2: Predictors of DUBD

- This is the first nationally representative study that examined delay in the diagnosis of BD in Canada. Our results showed a significant delay between the first mood episode and the accurate diagnosis of BD. DUBD was longer in BD-II (median =11 years) compared to BD-I (median =5 years) and was also longer in pediatric-onset compared to adult-onset BD.
- These findings highlight the need for implementation of strategies for early identification and interventions in BD.

Conclusion