

한국형 양극성 장애 약물치료 알고리즘의 적용 가능성(IV) : 삶의 질

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ABSTRACT

Feasibility of Korean Medication Algorithm for Bipolar Disorder(IV) : Quality of Life

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Objective : The Korean College of Neuropsychopharmacology and the Korean Academy of Schizophrenia developed the Korean Medication Algorithm Project for Bipolar Disorder (KMAP-BP) as a reference for clinical decisions. The purpose of this study was to investigate the effects of pharmacological treatments with the KMAP-BP on quality of life in patients with bipolar disorder. **Methods** : Brief Form of World Health Organization Quality of Life assessment (WHOQOL-BREF), at baseline and 4 months after treatment, was used to evaluate the quality of life in this study. Also Young Mania Rating Scale (YMRS), Hamilton Rating Scale for Depression (HAM-D), Global Assessment of Functioning (GAF), and two scales of Clinical Global Impression (CGI-S, CGI-I) were rated by clinicians. Data from 76 of 92 bipolar patients, treated according to the algorithm, were attained at baseline, 55 at 4 months after treatment, and 47 at both. **Results** : It was found that the treatments following the KMAP-BP for 4 months could not make improvement in all 4 domains of WHOQOL-BREF. There was no difference in change of QOL domains after treatment according to some variables such as sex, age, age of onset, age of first treatment, clinical feature of mania, and so on. Compared with mania, in which quality of life was aggravated a little

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after treatment, all domains of WHOQOL-BREF were improved in bipolar depressed patients. The improvement of YMRS score had a negative correlation with physical health domain. The decrease in HAM-D score was correlated positively with improvement in physical health and psychological domains. But there was no correlation between increase in quality of life and the improvement of GAF, CGI-S, and CGI-I scores. **Conclusion** : Quality of life was not improved in bipolar patients at 4 months after treatment, in which the KMAP-BP was applied. But it did not mean that the application of the algorithm to treat bipolar patients was not effective. Because their functions were not recovered yet, even though the symptoms were remitted. Long-term follow-up studies using various tools to estimate the quality of life are needed. (Korean J Psychopharmacol 2005;16(5):396-405)

KEY WORDS : Bipolar disorder · Korean medication algorithm · Feasibility · Quality of life · WHOQOL-BREF.

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결 과

1. 치료에 따른 WHOQOL-BREF의 변화

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Table 1. Comparison of WHOQOL-BREF raw scores between at baseline and after-treatment in bipolar patients (n=47, mean ± S.D.)

Domain (minimum-maximum)	Baseline	4 Month	p*
Physical health (7 - 35)	22.9 ± 6.2	23.1 ± 3.9	0.886
Psychological health (6 - 30)	20.0 ± 5.7	18.8 ± 4.0	0.135
Social relationships (3 - 15)	9.4 ± 2.4	9.7 ± 2.0	0.539
Environment (8 - 40)	25.1 ± 6.0	24.3 ± 4.6	0.319
Total Score (26 - 130)	84.5 ± 19.5	82.4 ± 13.7	0.447

* : paired t-test

(2).

2. 임상 변인에 따른 WHOQOL-BREF의 변화의 차이

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WHOQOL - BREF

Table 2. Comparison of WHOQOL-BREF raw scores between at baseline and after-treatment in each episodes of bipolar patient (mean ± S.D.)

Domain	Episode	Baseline	4 Month	p
Physical health	Mania, euphoric*	25.3 ± 4.4	23.6 ± 3.8	.152
	Mania, dysphoric/mixed [†]	20.8 ± 6.8	22.8 ± 3.6	.553
	Mania, psychotic [‡]	25.7 ± 4.7	24.7 ± 3.5	.514
	Depression [§]	12.4 ± 3.2	20.4 ± 4.8	.063
Psychological health	Mania, euphoric	22.4 ± 5.3	19.8 ± 4.3	.069
	Mania, dysphoric/mixed	18.6 ± 3.8	16.8 ± 3.5	.259
	Mania, psychotic	22.0 ± 5.3	20.6 ± 3.3	.357
	Depression	12.3 ± 3.9	17.1 ± 3.9	.018
Social relationships	Mania, euphoric	10.3 ± 2.3	9.7 ± 2.7	.478
	Mania, dysphoric/mixed	9.1 ± 2.7	10.0 ± 1.3	.399
	Mania, psychotic	10.2 ± 2.0	10.2 ± 1.2	1.000
	Depression	6.6 ± 1.3	9.0 ± 2.2	.043
Environment	Mania, euphoric	28.3 ± 6.3	25.1 ± 4.8	.062
	Mania, dysphoric/mixed	24.6 ± 5.4	22.4 ± 5.8	.234
	Mania, psychotic	26.0 ± 3.7	26.4 ± 3.7	.833
	Depression	18.7 ± 1.7	20.1 ± 2.5	.345
Total score	Mania, euphoric	94.1 ± 17.1	84.7 ± 15.3	.063
	Mania, dysphoric/mixed	83.8 ± 13.4	79.0 ± 12.4	.371
	Mania, psychotic	91.3 ± 14.6	89.1 ± 10.3	.678
	Depression	54.1 ± 5.6	72.1 ± 12.4	.007

* : N=18, † : N=9, ‡ : N=10, § : N=7, : Wilcoxon signed rank test

Table 3. Sex difference in change of WHOQOL-BREF raw scores after treatment in bipolar patients (mean ± S.D.)

Domain	Sex	Baseline	4 Month	Mean changes	p*
Physical health	M	24.9 ± 5.1	23.0 ± 4.6	-1.9 ± 4.6	0.080
	F	21.8 ± 6.6	6.5 ± 1.5	1.3 ± 6.4	
Psychological health	M	20.3 ± 5.8	18.4 ± 4.5	-1.9 ± 6.1	0.513
	F	19.8 ± 5.7	19.0 ± 3.7	-0.8 ± 5.0	
Social relationships	M	9.6 ± 2.1	8.9 ± 2.2	-0.8 ± 3.6	0.097
	F	9.2 ± 2.6	10.2 ± 1.8	0.9 ± 3.0	
Environment	M	25.4 ± 5.3	24.1 ± 4.5	-1.3 ± 7.0	0.718
	F	25.0 ± 6.5	24.4 ± 4.8	-0.6 ± 5.4	
Total score	M	87.5 ± 17.6	81.0 ± 15.6	-6.5 ± 21.1	0.228
	F	82.8 ± 20.5	83.2 ± 12.7	-0.4 ± 16.9	

M : male (N=17), F : female (N=30), * : Independent t-test

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WHOQOL - BREF

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3. 기타 임상 변인들과 WHOQOL-BREF의 변화 사이의 상관관계

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4. 임상 증상의 변화와 WHOQOL-BREF의 변화 사이의 상관관계

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Table 4. Difference in change of WHOQOL-BREF raw scores after treatment in bipolar patients according to the type of episode (mean ± S.D.)

Domain	Mania (n=40)	Depression (n=7)	p*
Physical health	-1.2 ± 4.5	8.0 ± 7.5	0.004
Psychological health	-2.3 ± 5.0	4.9 ± 2.3	0.001
Social relationships	-0.1 ± 3.3	2.4 ± 2.4	0.049
Environment	-1.3 ± 6.2	1.4 ± 3.6	0.274
Total score	-5.6 ± 17.4	18.0 ± 11.8	0.001

* : Mann-Whitney U test

Table 5. Difference in change of WHOQOL-BREF raw scores after treatment in bipolar patients according to the type of mania (mean ± S.D.)

Domain	Euphoric (n=18)	Dysphoric/ Mixed (n=9)	Psychotic (n=10)	p*
Physical health	-1.7 ± 4.9	2.0 ± 7.3	-1.0 ± 4.0	0.524
Psychological health	-2.7 ± 5.8	-1.7 ± 5.1	-1.4 ± 4.8	0.768
Social relationships	-0.7 ± 3.9	0.9 ± 3.1	0.0 ± 2.8	0.534
Environment	-3.3 ± 7.0	-2.1 ± 4.2	0.4 ± 5.6	0.342
Total score	-9.4 ± 20.0	-1.4 ± 16.5	-2.2 ± 6.7	0.556

* : Kruskal-Wallis test

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Table 6. Correlations between change of WHOQOL-BREF raw scores after treatment and demographic/clinical characteristics in bipolar patients*

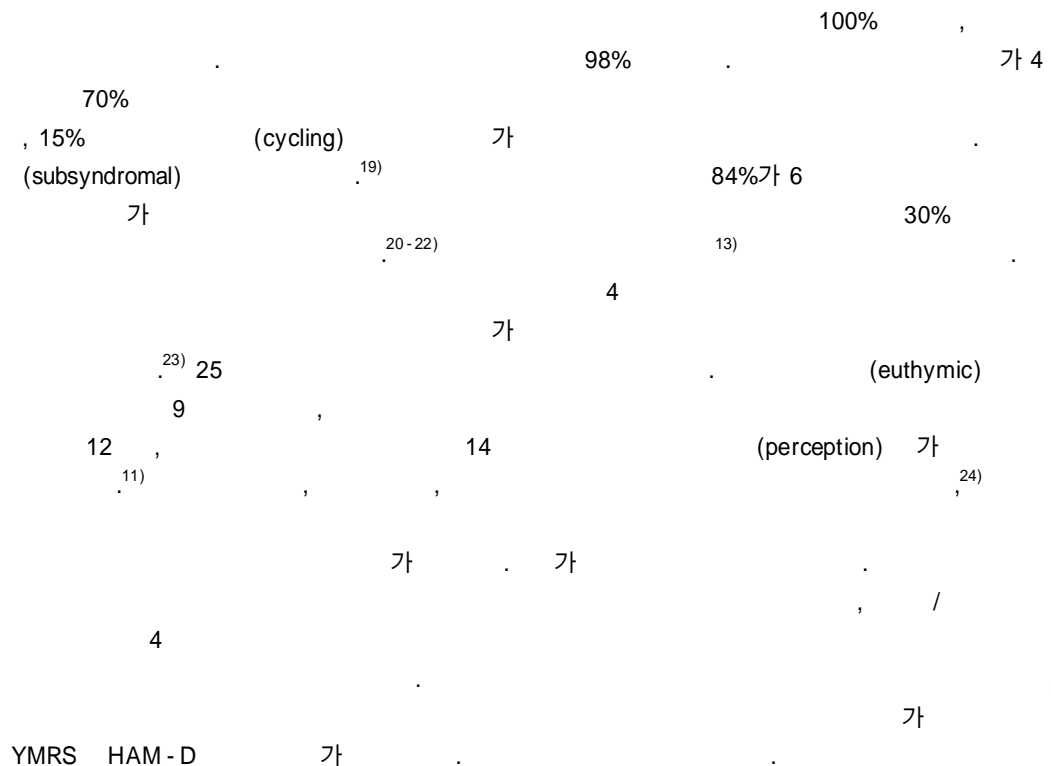
	Physical health	Psychological health	Health	Social relationships	Environment	Total score
Age (n=47)		-0.068	-0.010	-0.029	0.188	0.029
Education (year)(n=44)		0.046	0.088	-0.088	0.273	0.121
Number of admission (n=40)		0.090	0.202	0.048	-0.096	0.061
Age of first treatment (n=43)		-0.100	-0.024	0.022	0.166	0.017
Age of onset (n=46)		-0.015	-0.021	-0.247	0.009	-0.061

* : Pearson correlation

Table 7. Correlations between change of WHOQOL-BREF raw scores and symptom improvements after treatment in bipolar patients*

	Physical health	Psychological health	Social relationships	Environment	Total score
YMRS (n=43)	-0.347 [†]	-0.273	-0.087	-0.172	-0.262
HAM-D (n=26)	0.527 [‡]	0.401 [†]	0.219	0.089	0.366
GAF (n=47)	0.121	0.148	0.028	-0.167	0.046
CGI-S (n=45)	-0.111	0.010	-0.097	-0.159	-0.102
CGI-I (n=45)	-0.076	0.066	0.090	-0.087	-0.021

YMRS : Young Mania Rating Scale, HAM-D : Hamilton Depression Rating Scale, GAF : Global Assessment of Function, CGI-S : Clinical Global Impression-Severity Scale, CGI-I : Clinical Global Impression-Improvement Scale. * : Pearson correlation. † : p<0.05, ‡ : p<0.01



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한국형 양극성 장애 약물치료 알고리즘 적용 가능성 연구
 그룹(가나다순) : (), (),
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