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RECOVERY OF COGNITIVE FUNCTIONING IN PATIENTS WITH CO-OCCURRING BIPOLAR DISORDER AND ALCOHOL DEPENDENCE DURING EARLY REMISSION FROM AN ACUTE MOOD EPISODE

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Introduction: Preliminary data suggest that patients who suffer from both bipolar disorder (BD) and alcohol dependence (AD) may be more vulnerable to cognitive dysfunction than patients with a single diagnosis, especially during periods that are clinically unstable.

Objective: The purpose of this study was to examine the cognitive recovery of dually-diagnosed patients during remission from an acute mood disturbance.

Aim: The study aimed to replicate our previous comparison of cognitive functioning between BD patients with and without AD, while on the inpatient unit, and to extend this investigation in a longitudinal design post-discharge.

Method: Fifty-five adult inpatients with bipolar I disorder completed a neuropsychological battery, mood measures and substance abuse measures upon discharge from the hospital and at a 3 month follow up. Analyses provided group comparisons on these measures between patients who presented with co-occurrence of AD (n=21) in the year prior to hospital admission and patients without a Substance Use Disorder (SUD; n=34).

Results: Compared to patients without SUD, dually-diagnosed patients scored significantly more poorly on measures of visual memory, verbal memory and executive functioning both at hospital discharge and follow-up. They also exhibited more limited recovery of these functions over the course of this period. Mood symptoms decreased in both groups from discharge to follow up.

Conclusions: Patients with co-occurring BD and AD may suffer from more severe cognitive dysfunction and less favorable recovery of cognitive deficits than BD patients without SUD over the course of remission from a mood episode.