

Oral presentation

Cyclothymia: from nosological validation to patient caring

Elie Hantouche*, Vincent Trybou and Caline Majdalani

Address: Anxiety and Mood Disorders Center, Paris, France

* Corresponding author

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Most groups of psycho-education are currently based and orientated toward the classical clinical picture of bipolarity, "Bipolar-I Disorder", which includes intense to severe (hypo)mania phases (often leading to hospitalization). However, the reality of clinical practice shows another evidence: soft bipolar spectrum is probably the most frequent expression of this disorder. More than 40% of major depressions and 2/3 of recurrent or resistant depressions are part of this spectrum, which seems to be highly but neglected in pharmacological and especially in psychological treatment processes.

The French multi-center national EPIDEP study showed that cases classified as BP-II 1/2 (Major Depression plus Cyclothymia) represent the most frequent disorder (33% of all included depressives). Systematic inter-group comparison among the soft spectrum showed the heterogeneity of the soft bipolar spectrum, with special characteristics for "BP-II 1/2". Repeated brief swings with high mood instability and rapid switching seemed to be a distinct entity with early onset, irritable ("dark") hypomania and high suicide risk. This condition emerged as the most prevalent and severe expression of the bipolar spectrum.

Cyclothymia is a psychobiological disorder, with brain and body disturbances. It can disturb all life aspects, even daily routines, with important consequences such as failures, isolation, job loss and severe interpersonal conflicts. When untreated cyclothymia can put subject life in danger. Most clinicians still of focus on depression, comorbid anxiety or personality disorders, and usually stay blind to cyclothymia.

Initiated by E.G.Hantouche, a psycho-education group model has been elaborated with the help of V. Trybou and

C. Majdalani. The model was build on the conception of Cyclothymia as a basic predisposition and not as a minor form of bipolarity. The format is weekly based on six sessions of 2 hours each. To be included, patient must present a bipolar II 1/2 disorder: persistent and significant cyclothymic trait (score 10 or more on questionnaire TEMPS-A). The group therapy offers to patients the opportunity to get information on soft bipolar spectrum by sharing life experiences with other patients, and getting support from them and from psychologists. The major key points of psycho-education group are listed below:

- Learning about cyclothymia: clinical aspects, specificity, co-morbidity, causes, medication, symptoms
- Monitoring and self assessment of Cyclothymia and warning signs, coping with early relapses, and planning of daily activities and rhythms
- Getting familiar with psychological vulnerabilities: sensitivity to rejection, obsessive need to please, testing limits, hyper-control, compulsive behaviors, emotional dependency
- Getting access to the cognitive processes linked to emotional disturbances
- Dealing with daily interpersonal conflicts
- Nurturing positive aspects of cyclothymia and own creativity

During the presentation, open data concerning six consecutive groups therapy will be presented and future orientations will be emphasized.