

Florida Best Practice Medication Guidelines for the Treatment of Bipolar Disorder Acute Mania

Level 0

Comprehensive Assessment

- Careful differential diagnostic evaluation
- Suicidality and aggression
- Psychiatric, substance abuse and physical co-morbidities
- Measurement-based care
- Collaborative treatment decision-making
- Integration with primary care providers

Level 1A

If not treatment resistant and not very severe:

- Monotherapy with aripiprazole, lithium, olanzapine, quetiapine, risperidone, valproate, or ziprasidone.

Level 1B

If severe and/or treatment resistant:

- Lithium, valproate plus a second generation antipsychotic (SGA) except asenapine, clozapine, haloperidol, paliperidone or ziprasidone

Level 2

If Level 1 is not effective

- Two-drug combination of lithium + valproate
- Lithium or valproate plus non-clozapine second generation antipsychotic (SGA)
- Carbamazepine monotherapy
- Lithium plus carbamazepine

Level 3

*If Levels 1 and 2 ineffective or not tolerated**

- Clozapine monotherapy
- Clozapine plus lithium or valproate
- Valproate + carbamazepine
- Electroconvulsive Therapy (ECT)

Level 4

*If levels 1, 2,3, ineffective or not tolerated**

- A three-drug combination of level 1, 2, and 3. Drugs may include first generation antipsychotic (FSA) BUT NOT 2 antipsychotics
Example: lithium + (valproate, carbamazepine or oxcarbamazepine) + antipsychotic

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Measurement-based care

- Treatment targets need to be precisely defined
- Use of rating scales recommended
- Effectiveness and safety/tolerability of medication treatment must be systematically assessed

Recommended scales for bipolar disorder Acute Mania:

- Young Mania Rating Scale for Bipolar Disorder (YMRS)
- Hamilton Rating Scale for Depression (HRSD)

Reference

1. Canadian Network for Mood and Anxiety Treatments (CANMAT) and International Society for Bipolar Disorders (ISBD) collaborative update of CANMAT guidelines for the management of patients with bipolar disorder: update 2009. *Bipolar Disorders* 2009;11:225-255
2. Canadian Network for Mood and Anxiety Treatments (CANMAT) guidelines for the management of patients with bipolar disorder: consensus and controversies. *Bipolar Disorders* 2005;7(Suppl.3):5-69
3. Geddes JR, Calabrese JR, Goodwin GM. Lamotrigine for treatment of bipolar depression: independent meta-analysis and meta-regression of individual patient data from five randomised trials. *Br J Psychiatry* 2009;194:4-9
4. Thase ME, Jonas A, Khan A, et al. Aripiprazole monotherapy in nonpsychotic bipolar I depression: results of 2 randomized, placebo-controlled studies. *J Clin Psychopharmacol* 2008; 28:13-20
5. Suppes T, Liu S, Brecher M, Paulsson B, et al: Maintenance treatment for patients with bipolar I disorder: Results from North American Study of quetiapine in combination with lithium or divalproex. *Am J Psychiatry*, 2009 Apr;166(4): 476-88

**Number of iterations at each level and adjunctive treatment(s) to be determined by clinician judgment/patient needs*