



Federal Fluminense University

AURORA DE AFONSO COSTA
NURSING SCHOOL



The profile of bipolar disorder types I and II: an epidemiological study

Patricia Maria da Silva Rodrigues¹, Maria Cicera dos Santos de Albuquerque¹,
Sabrina Joany Felizardo Neves¹, Flaviane Maria Pereira Belo¹,
Gabriella de Araújo Gama¹, Valfrido Leão de Melo Neto¹

¹ Federal University of Alagoas

ABSTRACT

Problem: Bipolar disorder affects about 60 million people worldwide, making it an important health problem.

Aim: to determine the prevalence of bipolar disorder I and II and to correlate it with sociodemographic factors, mental disorders, suicide risk, and quality of life. **Method:** This is an observational, descriptive, cross-sectional and epidemiological study to be carried out in the Benedito Bentes neighborhood, Maceió, Alagoas, Brazil. The probabilistic sample, randomized by clusters, was composed of 894 people. Primary data were obtained through face-to-face interviews. A descriptive analysis was performed and Pearson's Chi-square association and Student's T tests were applied. The research was approved by the Research Ethics Committee of the Federal University of Alagoas (Opinion number 608.613). **Expected results:** the knowledge of the prevalence of bipolar disorder I and II, its comorbidities and influence on quality of life in the sample investigated.

Descriptors: Bipolar disorder; Epidemiology; Mental Disorders; Nursing.

INTRODUCTION

Bipolar disorder (BD) affects about 60 million people worldwide, becoming a major global health problem leading to significant morbidity and mortality rates⁽¹⁻²⁾.

According to the Diagnostic and Statistical Manual of Mental Disorders (DSM - 5), the diagnosis of type I BD requires the presence of, at least, one manic episode, preceded or followed by hypomanic episodes or major depressive episodes. For type II BD, it is necessary to meet the criteria for at least one hypomanic episode of at least four days, with one or more major depressive episodes, lasting, at least, two weeks and no manic episodes⁽³⁾.

Given the importance of information on mental disorders in the population to contribute to health care, it is confirmed the relevance of this study, which aims to answer the following research question: What is the prevalence and factors associated with type I and type II bipolar disorder in one of the most populated neighborhoods in the capital city of Alagoas?

This study will use the database of the research "The epidemiology of mental disorders and the use of alcohol and other drugs in Maceió/Alagoas". This is an initiative of the Ministry of Health, funded by the Research Program for the Unified Health System (*Sistema Único de Saúde* – SUS) – PPSUS FAPEAL 02/2013 – MS/CNPq/FAPEAL/SESAU-AL.

OBJECTIVES

(i) To determine the prevalence of type I and II bipolar disorder; (ii) to relate sociodemographic factors to type I and type II bipolar disorder; (iii) to correlate type I and type II bipolar disorder with other mental disorders; (iv) to correlate type I and type II bipolar disorder with the risk of

suicide; (v) to correlate type I and type II bipolar disorder with quality of life.

METHOD

This is an observational, descriptive, cross-sectional epidemiological study. The study site will be the neighborhood Benedito Bentes, located in the city of Maceió, capital of the state of Alagoas, Northeast Brazil. It is considered one of the most populous neighborhoods and the largest territorial base in Maceió. The probabilistic and random sample by clusters was composed of 894 residents in the neighborhood surveyed and proportionally distributed among the 93 census tracts in the neighborhood. Inclusion criteria: residing in the Benedito Bentes neighborhood; aged over 15 years. Exclusion criteria: presenting disorientation and/or aggression. Data collection occurred from January 26 to March 2, 2015, from Monday to Friday, in the morning and afternoon shifts. The team had 49 people properly trained, capacitated and calibrated for data collection.

Data were primary, collected through face-to-face interviews with the ODK Collect (Open Data Kit) digital application, available on the Android system, in Tablets. The initial point of investigation of each census sector was defined before going to the field for data collection, systematically. Based on data from the research, the investigation on BD I and II will be carried out from August 2016 to February 2017. The following instruments were used for data collection: a Socio-demographic Data Questionnaire, prepared for the research; Classification of Socioeconomic Stratum by the Brazil Economic Classification Criteria; WHO Quality of Life-BREF; MINI International Neuropsychiatric Interview (MINI), Brazilian Version 5.0.0; and Beck's Suicidal Ideation Scale. The dependent variables of this

study will be bipolar disorder type I and II. The independent variables were: sex, age, marital status, ethnicity, number of children, occupation, income, maximum grade of study, years studied, social stratum, comorbidities, quality of life, mental disorders identified in the MINI and suicide risk. In order to evaluate the association between the qualitative variables, the Pearson's Chi-square test will be used, associating type I and type II bipolar disorder with the independent variables (dichotomous, ordinal and nominal). Kolmogorov-Smirnov normality test will be applied for the association analysis between dichotomous and continuous variables. If the continuous variable is normal/symmetric, the T Test will be used; if it is abnormal/asymmetric, the Wilcoxon Test will be used. The study was approved by the Research Ethics Committee of the Federal University of Alagoas, with a Consubstantiated Opinion of Authorization under No. 608613, considering the ethical aspects established in Resolution No. 466/2012 of the Ministry of Health.

EXPECTED RESULTS

The results are expected to provide knowledge in terms of the prevalence of types I and II bipolar disorder, of associated psychiatric comorbidities, as well as the measurement of quality of life and the risk of suicide in the population of the largest neighborhood in the capital of Alagoas. It is hoped, above all, that this study may contribute to the qualification of health care, supporting the expansion of the Psychosocial Attention Network in face of the knowledge of the mental health demands of this population.

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All authors participated in the phases of this publication in one or more of the following steps, in according to the recommendations of the International Committee of Medical Journal Editors (ICMJE, 2013): (a) substantial involvement in the planning or preparation of the manuscript or in the collection, analysis or interpretation of data; (b) preparation of the manuscript or conducting critical revision of intellectual content; (c) approval of the version submitted of this manuscript. All authors declare for the appropriate purposes that the responsibilities related to all aspects of the manuscript submitted to OBJN are yours. They ensure that issues related to the accuracy or integrity of any part of the article were properly investigated and resolved. Therefore, they exempt the OBJN of any participation whatsoever in any imbrogios concerning the content under consideration. All authors declare that they have no conflict of interest of financial or personal nature concerning this manuscript which may influence the writing and/or interpretation of the findings. This statement has been digitally signed by all authors as recommended by the ICMJE, whose model is available in http://www.objnursing.uff.br/normas/DUDE_eng_13-06-2013.pdf

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