Conclusion: There are very similar risks and rates of suicidal acts among bipolar I and bipolar II disorder patients. There is slightly more suicidal ideation and a somewhat higher proportion of potentially lethal acts among bipolar II disorder patients. Bipolar II disorder is not a milder or attenuated variant of bipolar I disorder.

Title of Paper: “Suicidal Risk Factors in Bipolar I and II Disorder Patients.”

The Study Objectives: The authors did a prospective study monitoring 290 adult patients evaluated and treated clinically at the Bipolar Disorder Program of the Hospital Clinic of the University of Barcelona.

Results: Findings included:
1. Bipolar disorder can be a severe, disabling and potentially lethal illness.
2. Lifetime prevalence of bipolar I and II disorders can be as high as 5%.
3. Suicide rates in patients with bipolar disorder were 20 times higher than the general population.
4. Suicide accounts for 15-20% of deaths in bipolar disorder patients.
5. Suicide risk was remarkably similar in types I and II bipolar disorder patients.
6. Manic-depressive mixed state recurrences were especially strongly associated with suicidal risk.
7. Suicidal risk also was associated with melancholic depression and more trials of antidepressants.

Discussion: Currently, treatments for bipolar depression and optimal management of mixed states remain far from satisfactory. For bipolar disorder, evidence suggests that lithium is associated with reduced rates of suicides and attempts, possibly more so than anticonvulsants with mood stabilizing properties.

Questions for further consideration:
1. How does one differentiate a “mixed state” in bipolar disorder from “rapid cycling”?
2. What role does psychotherapy play in lowering the suicide risk in bipolar disorder?