

PW01-264 - HOW WOULD EUROPEAN TRAINEES TREAT BIPOLAR DISORDER FOR THEIR PATIENTS AND THEMSELVES, AND WHAT INFLUENCES DECISION-MAKING?

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Objectives: Guidelines produced for management of Bipolar Disorder illustrate change in evidence-base for treatment of acute and maintenance phases of illness. Our Pan-European Research Group assessed clinical practice and desired treatments amongst amongst Psychiatry trainees.

Methods: A semi-structured survey was piloted, and homogenous sample size (at least 50) agreed upon from each country, with 50% minimum response rate. It was distributed via web-link, questioning preference of mood stabiliser for patients, trainees themselves and factors influencing choice.

Results: Tables 1 summarise choices.

Number (n)	Percentage	Drug(s)
263/224	40.8/34.8	Lithium
121/101	18.8/15.7	Semisodium Valproate
133/85	20.7/13.2	Sodium Valproate
21/50	3.3/7.8	Lamotrigine
27/18	4.2/2.8	Lithium and Sodium Valproate
10/15	1.6/2.3	Carbamezapine
24/12	3.7/1.9	2nd Generation Atypical antipsychotics
8/4	1.2/0.7	Various combinations
34/134	5.3/21	Left blank

[Choice of mood stabiliser for patient/themselves]

Factors influencing decision-making mapped onto cost, efficacy and side-effect profile (less than 4% other reasons). 66% (n=538) of respondents felt efficacy most important, 25% (n=202) felt side-effect profile most important and 3% (n=24) considered cost of most importance.

Conclusions: No clear difference exists in choice of mood stabiliser for European trainees and their patients, and decisions based on perceived efficacy are generally in keeping with established guidelines.