

## P01-82 - HETEROGENEITY OF DSM-IV MAJOR DEPRESSIVE DISORDER AS A CONSEQUENCE OF SUBTHRESHOLD BIPOLARITY

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**Context:** There is growing evidence that major depressive disorder (MDD) might be overdiagnosed at the expense of bipolar disorders (BPD).

**Aim:** To identify a subgroup of subthreshold BPD among DSM-IV MDD, which is distinct from pure MDD regarding validators of bipolarity.

**Method:** Data come from the ten-year prospective-longitudinal EDSP-Study, a community survey from Munich, and were assessed with the DSM-IV/M-CIDI. Subthreshold BPD was defined as fulfilling criteria for MDD plus presence of manic symptoms, but never having met criteria for hypomania.

**Results:** Among 488 respondents with MDD, about 60% had pure MDD and 40% subthreshold BPD. Compared to pure MDD, the subthreshold BPD group was found to have

- (a) an increased family history of mania,
- (b) considerably higher rates of nicotine dependence and alcohol use disorders,
- (c) twice as high rates of panic disorder, and
- (d) a tendency towards higher rates of criminal acts.
- (e) In prospective analyses, subthreshold BPD converted more often into BPD during follow-up with the criterion D (symptoms are observable by others) being of critical predictive relevance.

**Conclusion:** Data suggest that MDD is a heterogeneous concept including a large group of subthreshold BPD, which is clinically significant and shares similarities with BPD. Findings might support the need for a broader concept and a more comprehensive screening of bipolarity.