Functional Remediation for Bipolar Disorder
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Collaborators in the creation of the functional remediation program

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Preface

In the 1990s, the concept that manic-depressive illness was merely a cycling condition with a virtual absence of any cognitive impairment was challenged, and since then a huge body of scientific evidence has shown that neurocognitive deficits can be detected not only during acute episodes but beyond. Many, though not all, patients with bipolar disorder have difficulties in paying attention, remembering, concentrating, learning, planning, setting priorities, and adjusting to a competitive environment. Most patients, despite being in clinical remission, report feeling vulnerable to stress and having occupational difficulties. In our clinical practice, where most of our research questions come from, we have been faced with complaints from our patients concerning their functional capacities, which have little correlation with their clinical situation. There was a clear mismatch between our perception (my job is done, the patient is well) and our patients’ perception (how can I be well if I am unable to hold down a job?).

In the Bipolar Disorders Program at Barcelona we have been involved in the clinical development of most, if not all, of the currently available compounds for the treatment of bipolar disorder, seeking better treatment options for patients. We also pioneered the implementation of evidence-based psychoeducation aimed at improving awareness, treatment adherence, and patient empowerment. Those pharmacological and psychological interventions that proved useful were implemented in our clinical care program, and we could see many of the benefits that came across from those, but we remained helpless in the face of the occupational and social challenges that our patients were still reporting, and which appeared unrelated to the illness. Now we know that cognitive dysfunction is a core feature of bipolar disorder, and that, along with subclinical depressive symptoms, it is a major driver of functional impairment.

This manual represents a scientific effort to build an intervention aimed at solving the functional problems of patients with bipolar disorder. We developed this particular intervention on the basis of the cognitive deficits that we identified in several studies from a number of research groups over the world, and from our own experience with patients. The structure of the program, based on group intervention, is inspired by our psychoeducation package, which has been extremely successful and is now a crucial ingredient in the treatment of patients with bipolar illness in all international treatment guidelines. We tried to avoid “another cognitive remediation” proposal, like the many that are available for patients with schizophrenia, from which we learned that the main problem is to transfer the new neurocognitive skills to daily life. For this reason, we developed particular exercises that had a strong ecological component, with a lot of homework and practical applications. That is the foundation of functional remediation, as opposed to cognitive remediation. Ours is, indeed, a neurobehavioral approach.

These would be empty words if functional remediation had not been tested in the context of a randomized, blinded clinical trial, which is the highest standard to test any treatment. The trial (code NCT 01370668) was a multicenter study that required the training of dozens of psychologists for over a year, and tested the efficacy of functional remediation against psychoeducation and against treatment as usual, which mostly meant psychopharmacological treatment alone. The three groups received medication but different psychosocial packages, or none. The results, published in the American Journal of Psychiatry, showed that functional remediation made patients function better, especially in the interpersonal and occupational domains, than those who received medication only. Psychoeducation, an intervention aimed at helping patients to remain well and prevent relapse, but not specifically designed to improve their psychosocial adjustment, was neither superior to treatment as usual nor inferior to functional remediation, meaning that it had some weak effects on functioning. These findings have led us to add...
functional remediation therapy to the traditional “medication plus psychoeducation” approach that we provide in our specialized clinic.

This manual is divided into four chapters. The first summarizes current knowledge on cognition and functioning in bipolar disorder and provides the background for the intervention. Chapter 2 explains the potential of cognitive remediation in psychiatric disorders and the results of previous studies, mostly in the field of schizophrenia, while Chapter 3 focuses specifically on bipolar disorder and the results of the validation study. Chapter 4 explains the different modules and sessions of functional remediation, with specific guidance on how to deliver the therapy.

Every session is organized according to objectives, procedures, and homework, and finally some materials are given to the patient for further learning and practice. The book also includes two appendices, giving details of the Functioning Assessment Short Test (FAST) with which functional status and progress can be tracked, and the neuropsychological battery that we use.

The tools for functional remediation are available online at www.cambridge.org/9781107663329. Those tools include PowerPoint slides for use in the group sessions, and reading materials. The intervention has been designed to be delivered in group format, but it can be used as individual therapy, with minor modifications.

We hope that this manual and the associated online tools will help healthcare professionals to be more aware of the neurocognitive and real-life problems of patients with bipolar disorder, and to try to ameliorate those problems through evidence-based functional remediation techniques. This new approach, which is at the cutting edge of psychotherapy innovation, can actually have a significant impact on patients’ lives and the costs to society. The material covered in this manual is by no means intended as a theoretical textbook of neuropsychology; it is a pragmatic tool aiming to provide a foundation that can be tailored to individual requirements.
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