#NAMICon16

Bipolar Research Studies: Impact and Future State

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- Gloria Harrington None
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Background





 Vision: To *personalize treatment* of bipolar disorder and *prevent recurrences* to enable those with bipolar to lead healthy and productive lives.



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Bipolar Disorder

- Profound shifts in mood & energy
- Genes and environment interact
- Devastating effects on:
 - Social life
 - Vocation
 - Personal economics







Denver. July 6-9, 2016

Bipolar Disorder Facts

- 2 3% Prevalence (~6 million US adults)¹
- Average age of onset: 25
- At least 25 to 50% attempt suicide once¹
- Nearly 1 in 5 complete suicide²
- U.S. economic burden: \$45 billion annually³
- Personal economic burden: \$12,000 \$650,000⁴

1. Jamison, K.R., (2000). Suicide and bipolar disorder. J Clin Psychiatry. 61(9), 47-51.

2. Goodwin , F.K., Jamison, K.R., (2007). Manic depressive illness: bipolar disorders and recurrent depression, vol. 1, Oxford University Press.

4. Begley, C.E., et al., The lifetime cost of bipolar disorder in the US: an estimate for new cases in 1998.



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Emerging Bipolar Research Areas

- Induced Pluripotent Stem Cells cell models
- Microbiome to understand role of the gut flora
- Mobile Technology to predict mood episodes



• Made possible through *longitudinal engagement*



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Landmark Longitudinal Studies

• <u>Cardiovascular</u>

Framingham Study – cardiovascular disease

- Est. 1948; now in 3rd generation
- 1,200+ publications; prevention & risk identification
- Multiple cardiovascular longitudinal studies with thousands enrolled
- Mental Health

STEP-BD: Systematic Treatment Enhancement Program for Bipolar Disorder

- Est. 1998; follow-up every 3-6 months over 5 years
- 53+ publications; 4361 patients over 22 sites; primarily a treatment and treatment outcome study

Mental health longitudinal studies – in general have small sample sizes with limited number of follow-up years



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Need for Longitudinal Studies

- 1. Applicable to study-defined populations
- 2. Provide estimates of distributions and prevalence rates
- Used to assess risk factor trends over time
 To observe relationships of various factors that impact outcomes¹

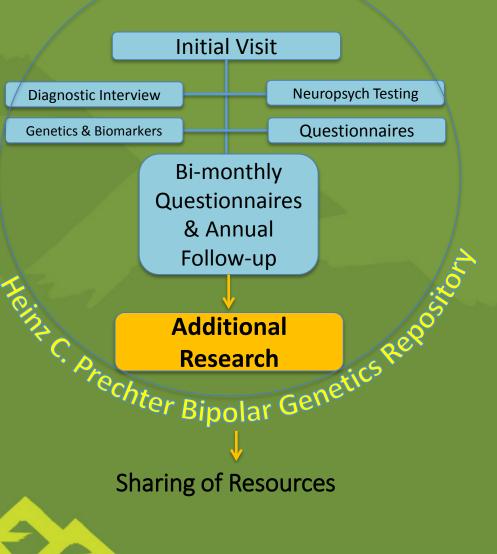
1. Szklo, M. (1998). Population-based cohort studies . Epidemiologic Review 20(1): 81-90.



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Prechter Longitudinal Study of Bipolar Disorder

- Understand illness patterns in bipolar disorder:
 - through genetics
 - continued observation
 - additional research participation
- Over 1,200 enrolled
- 75% participants remain actively engaged
- Now in Year 10



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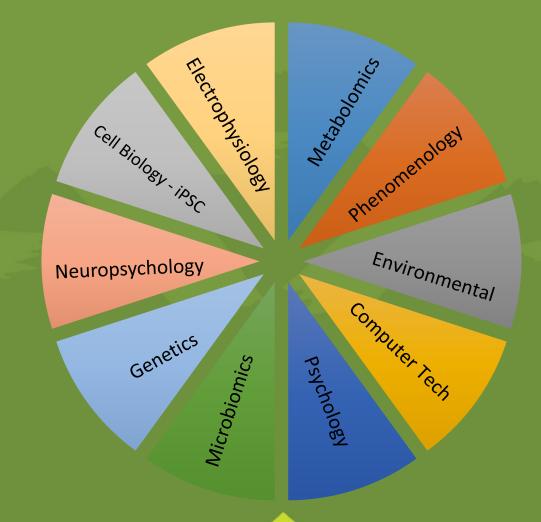
Integrated Solutions for Bipolar Disorder



Biology – Genetics – iPSC (Stem Cells) Microbiome – Biomarkers



Key Multi-disciplinary Collaborations



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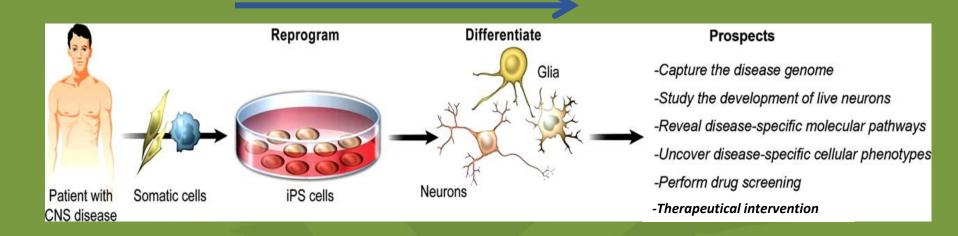
Induced Pluripotent Stem Cells

- Ideal method to study neurodevelopmental disorders
- Adult cells coaxed back to early stage of development (pluripotent) (not embryonic)
- Grown forward to cell type of interest (brain cells)
- Modeling of neural growth and development
- Evolution of pathophysiological development of disease states

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(Melvin G. McInnis, MD)

iPSC Reprogramming Stages



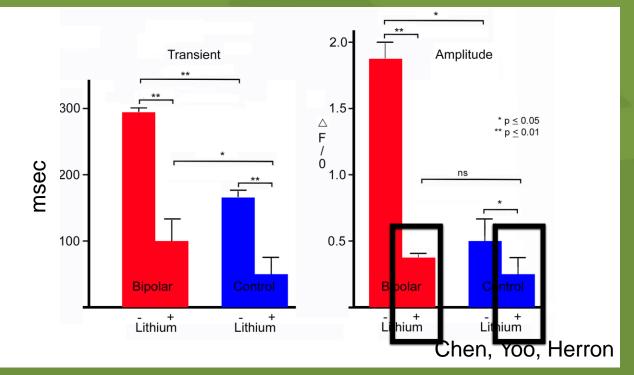
- Powerful model to study cell function
- Discovery of new molecules to help create and test new medications
- Leads to understanding of how individuals react to different treatments
 - Personalized medicine

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What We've Learned from iPSCs

- Developmental Pattern Difference in Bipolar Cells
- Lithium pretreatment normalizes bipolar neuron calcium dynamics





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Next Steps for iPSC Research

Lithium mechanisms – can novel interventions be developed?

 Mechanisms of other bipolar medications will be studied to advance research in therapeutics

 Developmental patterning research involves the study of the developing brain that is at risk for bipolar disorder

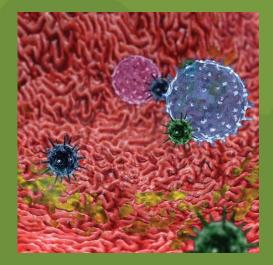


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Microbiome: Gut-Brain Interaction

- Gut microbiome: influence on brain development, function, and behavior
- The microbiome responds to stress, diet, and medications
 - impact sleep, anxiety, mania, and depression
- Longitudinal study:
 - Leverage historical data to inform microbiome analysis







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What We've Learned from the Microbiome

 The bacterial gut community is different in individuals with bipolar disorder.

 Specific gut bacteria associate with sleep quality, anxiety, and depression in bipolar disorder.

 Specific gut bacteria associate with intake of specific dietary nutrients.



Next Steps for the Microbiome Studies

 Can specific diets improve the bacterial complement of the gut microbiome?

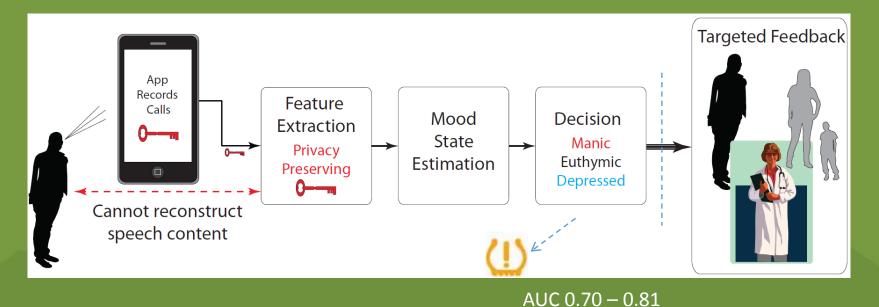
• Do dietary-induced changes in the microbiome extend to improved clinical outcomes over time?

- Better sleep
- Lower anxiety
- Reduced depression and mania



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PRIORI: Predicting Individual Outcomes for Rapid Intervention



- n = 50
- 6 12 months
- 45,000 calls

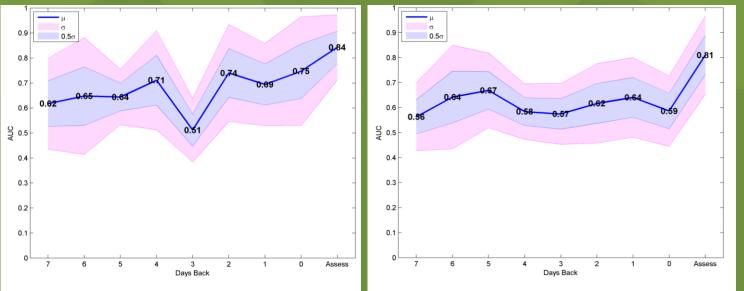


(Emily Provost, PhD) Computer Science & Engineering

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What We've Learned from PRIORI

- Mood can be detected using speech characteristics
- Quality of data varies by phone models
- Area under curve (AUC) for participants from assessment to 7 days prior:



Hypomanic vs. Euthymic

Depressed vs. Euthymic (Emily Provost, PhD)

Computer Science & Engineering

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Other Mobile Technology Apps



Next Steps for Mobile Technology Studies

• Need larger sample sizes

Need for clinical trial

- Can we measure or redefine core features, such as psychomotor activity, using technology?
- Can we predict changes and alter the course of bipolar disorder using PRIORI and other mobile applications?

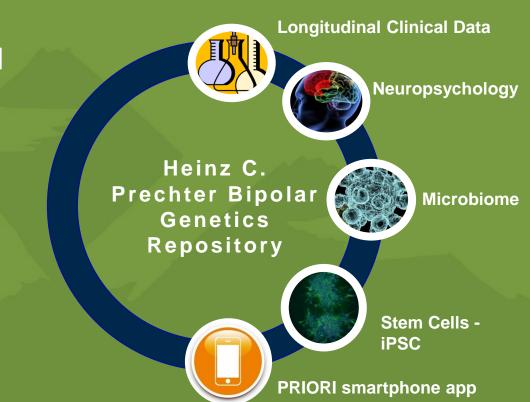
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Heinz C. Prechter Bipolar Genetics Repository

- Clinical data and biological samples
 - Bipolar disorder
 - Healthy controls

Integrated solutions





Longitudinal Studies: Engagement

1. Maintain good relationships with longitudinal members

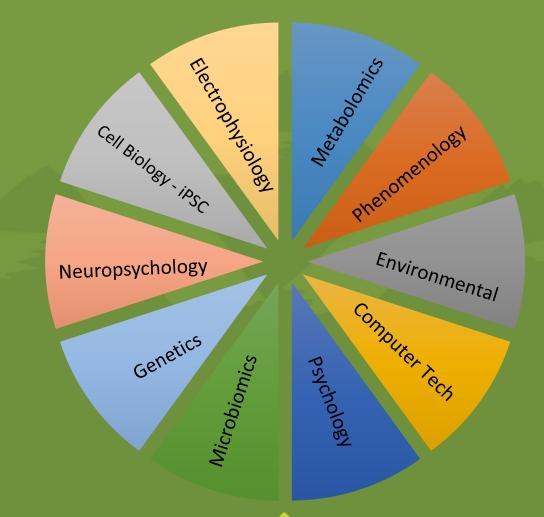
- 2. Securing health-care provider support for cohort with key health issues¹
- 3. Creating an Executive Committee (community) to assist with¹:
 - Program planning
 - Translate study findings to community
 - Active participation in organizational aspects of the study
- 4. Overall, our participants report doing better by being involved in research
 - Clinicians do check-ins when there are safety concerns
 - Depression and mania scores are showing improvement over time

1. Szklo, M. (1998). Population-based cohort studies . Epidemiologic Review 20(1): 81-90.



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Key Multi-disciplinary Collaborations



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Conclusion

• Living a healthy life with bipolar disorder is possible.

Strategies to consider:



- Regular exercise
- Get enough sleep
- Eat a healthy diet

• For more information, visit us at Booth #219

DepressionToolkit.org

ontact us | search & site

<u>www.prechterfund.org</u>

- Collaborate with your care providers (& your research team!)
- Engage support of friends and family

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