

## STABLE Performance Measure

<p><b>Measure:</b> Bipolar Disorder: Use of antimanic agent in BD I with mania/hypomania, mixed, or cycling</p>	
<p><b>Summary:</b> This measure assesses the percentage of patients with BD I with mania/hypomania, mixed or cycling symptoms and behaviors who have evidence of use of a pharmacotherapy agent with antimanic properties during the first 12 weeks of treatment.</p>	
<p><b>Clinical Rationale:</b></p> <p><b>Goals of Acute Treatment: Mania or Mixed Episodes</b></p> <ul style="list-style-type: none"> <li>▪ If present, a rapid response to agitation, aggression and impulsivity is desired<sup>(1)</sup></li> <li>▪ Remission of symptoms with a return to usual levels of psychosocial functioning<sup>(1)</sup></li> </ul> <p><b>Initial Treatment Considerations</b></p> <ul style="list-style-type: none"> <li>▪ Treatment selection is dependent on illness severity, associated clinical features such as rapid cycling or psychosis, and patient preference<sup>(1)</sup></li> <li>▪ Treatment choice should also consider patient history, potential side effects and individual therapeutic response to specific pharmacotherapy agents<sup>(2)</sup></li> </ul> <p><b>Initial Treatment Recommendations</b></p> <ul style="list-style-type: none"> <li>▪ Refer to published guidelines for 1<sup>st</sup> stage, 2<sup>nd</sup> stage, etc. detailed recommendations</li> <li>▪ Guidelines suggest lithium or valproate (divalproex/divalproex sodium/valproate sodium/valproic acid) alone or in combination with an antipsychotic; Alternatives to lithium or valproate may include carbamazepine<sup>(1,2,3)</sup></li> <li>▪ It is noted that typical antipsychotics are associated with significant acute neurologic side effect risks (extrapyramidal) and long-term risk of tardive dyskinesia<sup>(1,2,3)</sup></li> <li>▪ Clozapine has been noted as an effective antimanic therapy in treatment-resistant bipolar disorder; however, it is recommended with caution due to monitoring and safety concerns<sup>(2)</sup></li> </ul>	
<p><b>Denominator Population:</b></p> <p>Patients with Bipolar I Disorder episodes with</p> <ul style="list-style-type: none"> <li>▪ Manic/hypomanic symptoms or behaviors</li> <li>▪ Mixed symptoms or behaviors</li> <li>▪ Cycling symptoms or behaviors</li> </ul> <p><b>Data Sources:</b></p> <ul style="list-style-type: none"> <li>▪ Administrative data</li> <li>▪ Medical Record</li> </ul>	<p><b>Numerator Population:</b></p> <p>Patients with evidence of use of an antimanic agent during the first 12 weeks of pharmacotherapy treatment</p> <p><b>Data Sources:</b></p> <ul style="list-style-type: none"> <li>▪ Medical Record</li> <li>▪ If available, administrative data that indicates specific pharmacotherapy</li> </ul>
<p><b>Initial Case-finding Guidance:</b> Patients with diagnosis of Bipolar I Disorder; manic/hypomanic, mixed or cycling ICD9CM or DSM IV TR : 296.0x; 296.1x; 296.4x; 296.6x</p>	
<p><b>Specialty-specific Measure:</b> This measure is recommended by the STABLE National Coordinating Council as a specialty-specific measure for psychiatry as the denominator requires specific documentation of diagnostic information indicating Bipolar I Disorder and the symptoms, behaviors, or episodes that are being addressed.</p>	
<p><b>References:</b></p> <ol style="list-style-type: none"> <li>1. Practice Guideline for the Treatment of Patients with Bipolar Disorder (2002 Revision); American Psychiatric Association; Am J Psychiatry 159:4, April 2002 Supplement; Also, Guideline Watch (2006) Update to the above guidelines, Hirschfeld R, American Psychiatric Association, 2006</li> <li>2. Suppes T, Dennehy E, Hirschfeld R, Altshuler L, Bowden D, Calabrese J, Ketter T, Sachs G, Swann A, The Texas Implementation of Medication Algorithms: Update to the Algorithms for Treatment of Bipolar I Disorder, J Clin Psychiatry 2005; 66:870-886</li> <li>3. Keck PE, Perlis R, Otto M; Carpenter D, Ross R, Docherty J, Treatment of Bipolar Disorder 2004; The Expert Consensus Guideline Series, Postgraduate Medicine – A Special Report, December 2004</li> </ol>	

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<p><b>Measure:</b></p> <p style="text-align: center;">Bipolar Disorder: Use of antimanic agent in BD I with mania/hypomania, mixed, or cycling</p>				
<p><b>Measure Specifications:</b></p> <p><b>Denominator:</b></p> <p>Patients 18 years of age or older with an initial diagnosis or new presentation/episode of bipolar disorder</p> <p>AND</p> <p>Documentation of Bipolar I Disorder with manic/hypomanic; mixed; or cycling symptoms or behaviors; to include at least one of the following:</p> <ul style="list-style-type: none"> <li>▪ Codes 296.0x; 296.1x; 296.4x; 296.6x documented in body of chart, such as a pre-printed form completed by a clinician and/or codes documented in chart notes/forms</li> <li>▪ Diagnosis or impression documented in chart indicating Bipolar I Disorder with current symptoms or behaviors of mania/hypomania; mixed state symptoms or behaviors; or indications of cycling.</li> </ul> <p><b>Denominator Exclusion:</b></p> <p>Exclude case from denominator population if numerator-required pharmacotherapy is not prescribed and the reason(s) for not prescribing is documented in chart, such as: not clinically indicated; not prescribed for related medical reasons (allergy, drug interaction); or not prescribed for patient reasons (patient refusal), etc.</p> <p><b>Numerator:</b></p> <p>Documented treatment with at least on pharmacotherapy agent with antimanic properties (See data dictionary reference below)</p> <p>AND</p> <p>Timeframe:</p> <p>Documentation of the bipolar disorder pharmacotherapy must be within the first 12 weeks of treatment</p>				
<p><b>Data Dictionary Reference:</b></p> <p>The table provided below does not indicate preferred treatment but rather is inclusive of those agents that are construed to be reasonably appropriate in accordance with available pharmacotherapy and current guidelines as of January 2007.</p>				
<b>Lithium Agents</b>	<b>Anticonvulsant Agents / Mania or Hypomania or Mixed</b>	<b>Antipsychotic Agents</b>		
lithium carbonate	carbamazepine	<b>Atypical</b>	<b>Typical</b>	
lithium citrate	divalproex	aripiprazole	chlorpromazine	thioridazine
	divalproex sodium	clozapine	fluphenazine	thiothixene
	valproate acid	olanzapine	haloperidol	trifluoperazine
	valproic sodium	quetiapine	loxapine HCL	
		risperidone	mesoridazine	
		ziprasidone	molindone HCL	
		<b>Atypical Combination:</b> olanzapine-fluoxetine		