

## STABLE Performance Measure

<p><b>Measure:</b> Bipolar Disorder: Monitoring for hyperlipidemia when atypical antipsychotic agent prescribed</p>	
<p><b>Summary:</b> This measure assesses the percentage of patients diagnosed with bipolar disorder and treated with an atypical antipsychotic agent who received at least one assessment for hyperlipidemia within the initial 16 week period of treatment.</p>	
<p><b>Clinical Rationale:</b>  <b>Dyslipidemia &amp; Antipsychotic Medications</b> <ul style="list-style-type: none"> <li>▪ Body fat (BMI, but more specifically, visceral abdominal fat as evidenced in waist circumference) is a strong predictor of cardiovascular disease<sup>(1)</sup></li> <li>▪ Increased adiposity is associated with decreased insulin sensitivity and the initiation of insulin resistance syndrome<sup>(1,2)</sup></li> <li>▪ Insulin resistance syndrome encompasses disturbances in lipid metabolism with a characteristic dyslipidemia that includes increases in fasting plasma triglyceride, and atherogenic changes in low-density lipoproteins<sup>(1)</sup></li> <li>▪ Patients on antipsychotic treatment have been associated with increased risk for weight gain and metabolic dyslipidemia with elevations of triglyceride<sup>(2)</sup></li> </ul> <b>Monitoring of Lipid Regulation<sup>(3)</sup></b> <ul style="list-style-type: none"> <li>▪ Six sets of metabolic monitoring guidelines for persons taking antipsychotic medications are currently recognized (Mount Sinai; Australia; American Diabetes Association-American Psychiatric Association; Belgium; United Kingdom)</li> <li>▪ Five groups unanimously recommend measuring fasting lipids with the United Kingdom group being silent on the issue</li> <li>▪ Adequate fasting is necessary to obtain a valid LDL and triglyceride levels.</li> <li>▪ Although baseline monitoring is indicated as soon as feasible, when it is possible, monitoring prior to antipsychotic treatment initiation is preferable as the results may influence antipsychotic choice, especially when elevated risk factors are identified</li> </ul> </p>	
<p><b>Denominator Population:</b> Patients diagnosed with bipolar disorder and treated with an atypical antipsychotic agent</p> <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> Patients who are assessed for hyperlipidemia within 16 weeks after initiating treatment with an atypical antipsychotic agent</p> <p><b>Data Source:</b></p> <ul style="list-style-type: none"> <li>▪ Medical Record</li> </ul>
<p><b>Initial Case-finding Guidance:</b> Patients with a diagnosis involving bipolar disorder ICD9CM or DSM IV TR: 296.0x; 296.1x; 296.4x; 296.5x; 296.6x; 296.7; 296.80-82; 296.89; or 301.13</p>	
<p><b>STABLE Resource Toolkit:</b> The STABLE National Coordinating Council has recommended metabolic monitoring when treating with antipsychotic agents. The following documentation tool is available in the <a href="#">STABLE Resource Toolkit</a>.</p> <ul style="list-style-type: none"> <li>▪ Metabolic Monitoring Flow Sheet: Brief documentation tool for office-based practice</li> </ul>	
<p><b>References:</b></p> <ol style="list-style-type: none"> <li>1. Newcomer, JW, Medical Risk in Patients with Bipolar Disorder and Schizophrenia, J Clin Psychiatry 2006; 67 (suppl 9) 25-30</li> <li>2. Newcomer JW, Metabolic risk during antipsychotic treatment, Clin Ther. 2004 Dec; 26(12): 1936-46</li> <li>3. Cohn T, Sernyak M, Metabolic Monitoring for Patients Treated with Antipsychotic Medications, Can J Psychiatry, Vol 51, No 8, July 2006, 492-501</li> </ol>	

## STABLE Performance Measure

**Measure:**

Bipolar Disorder: Monitoring for hyperlipidemia when atypical antipsychotic agent prescribed

**Measure Specifications:**

**Denominator:**

Patients 18 years of age or older with an initial diagnosis or new episode/presentation of bipolar disorder

AND

Documentation of a diagnosis of bipolar disorder; to include at least one of the following:

- Codes 296.0x; 296.1x; 296.4x; 296.5x; 296.6x; 296.7; 296.80; 296.81; 296.82; 296.89; 301.13 documented in body of chart, such as a pre-printed form completed by a clinician and/or codes documented in chart notes/forms
- Diagnosis or impression documented in chart indicating bipolar disorder
- Use of a screening/assessment tool for bipolar disorder with a score or conclusion that patient has bipolar disorder and indication that this information is used to establish or substantiate the diagnosis

AND

Documentation of treatment with an atypical antipsychotic agent. (See data dictionary reference below)

**Denominator Exclusion:**

Exclude case from denominator population if clinician requests patient to obtain screening test for hyperlipidemia but then subsequently documents that the patient failed to comply with clinician request.

**Numerator:**

Assessment for hyperlipidemia\_must include documentation of one of the following:

- Reference in chart lab that a lipid profile was ordered or requested and results or information about results was obtained
- Lab results filed in chart or available in patient's electronic medical record

AND

**Timeframe:**

Test results documented or recorded within 16 weeks after the initiation of a second generation atypical antipsychotic medication

**Data Dictionary Reference:**

Atypical antipsychotic agents available as of January 2007

aripiprazole	quetiapine
clozapine	risperidone
olanzapine	ziprasidone
Combination: olanzapine-fluoxetine	