

Psychosocial Impairment Associated with an Arrest History Among People with Bipolar Disorder

Joseph Calabrese,¹ MD; Robert Hirschfeld,² MD; Mark A. Frye,³ MD; Michael Reed,⁴ PhD;

¹Cleveland, OH; ²Galveston, TX; ³Los Angeles, CA; ⁴Chapel Hill, NC

ABSTRACT

Objective: To assess psychosocial impairment associated with a prior arrest or incarceration among people with bipolar disorder in the United States.

Methods: 3059 subjects from a general population epidemiologic study of bipolar disorder were mailed a follow-up survey containing the Mood Disorders Questionnaire (MDQ), the Social Adjustment Scale (SAS), and questions regarding work and arrest history.

Results: There was an 80% response rate to the survey, and 1167 screened positive for BPD using the MDQ. MDQ+ subjects with a prior arrest were more likely to be male ($p<.0001$) and have lower income ($p<.01$). Demographics were controlled for in the analysis. 1141 provided information on arrest history; 222 reported "prior history of arrest or jail other than drunk driving." Compared with respondents with no arrest history, those with a prior arrest were more likely ($p<.01$) to endorse MDQ items "excessive, foolish or risky behavior" and "feeling good/hyper;" to score as having poor social function on the SAS ($p<.001$); to report prior job loss ($p<.001$); and to report problems with alcohol/drug use ($p<.001$). Incidence of bipolar diagnosis was roughly the same for both groups, but those with a history of arrest were more likely to use mood stabilizers ($p<.01$).

Conclusions: Arrest history among those with BPD is associated with significantly greater psychosocial impairment.

INTRODUCTION

- Patients with bipolar disorder are more likely than those without a psychiatric disorder to exhibit violent behavior and to commit crimes.
- The psychosocial and behavioral characteristics of bipolar sufferers who commit crimes relative to those who do not have not been systematically studied.

OBJECTIVE

This US population-based study was conducted in 2002 to assess psychosocial impairment associated with a history of arrest or incarceration among people with bipolar disorder.

METHODS

- A sample of 3059 respondents who had previously participated in a US population-based epidemiologic survey was administered a second survey comprising the Mood Disorders Questionnaire (MDQ), the Social Adjustment Scale-Self-Report (SAS), and other questions regarding work and prior arrest history.
 - The MDQ is a bipolar disorder screening tool that has been validated in both the psychiatric outpatient setting and the general US population.
 - The SAS is composed of questions assessing the respondent's ability to adapt to and derive satisfaction from social roles. The Social Adjustment Scale - Self-Report includes items on work, social, and leisure activities; relationships with family members and extended family members; and perception of economic functioning. Respondents rate each item on a 5-point scale on which higher scores indicate poorer functioning. Total scores for each role area are calculated by averaging the score for all answered items within that area.
- Differences between MDQ+ respondents with and without an arrest history were compared by using chi-square tests, analysis of variance (ANOVA), and odds ratios and 95% confidence intervals as appropriate. Because the subgroups with and without an arrest history differed in gender distribution and household income, all analyses were controlled for these variables.

RESULTS

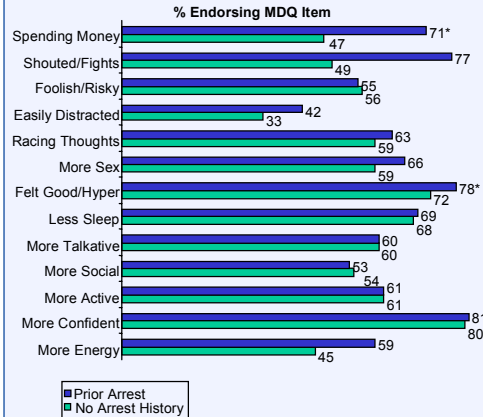
- The response rate was 80%. Of the 1167 MDQ+ respondents, 1141 provided information on arrest history.
- Of 1141 respondents, 222 had a history of being arrested or jailed.

RESPONDENTS WITH AN ARREST HISTORY WERE MORE LIKELY TO BE MALE AND TO HAVE A LOWER HOUSEHOLD INCOME.

Variable	Prior Arrest (n=222)	No Arrest History (n=919)
% Male*	77	47
Ethnicity		
White	85	86
Black	6	6
Other/Unknown	9	8
Years of Age, %		
18 to 24	41	32
25 to 34	21	24
35 to 44	23	22
45 to 54	11	13
55 or older	3	9
Household Income,* %		
Under \$20,000	32	29
\$20,000-\$34,999	33	18
\$35,000-\$54,999	14	23
\$55,000-\$84,999	15	17
\$85,000 and over	6	14

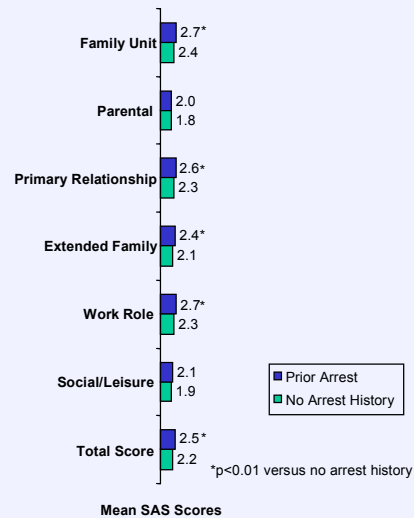
* $p<.05$ prior arrest versus no arrest history

ON THE MDQ, RESPONDENTS WITH AN ARREST HISTORY WERE MORE LIKELY TO SCORE AS FEELING GOOD/HYPER AND SPENDING MONEY.



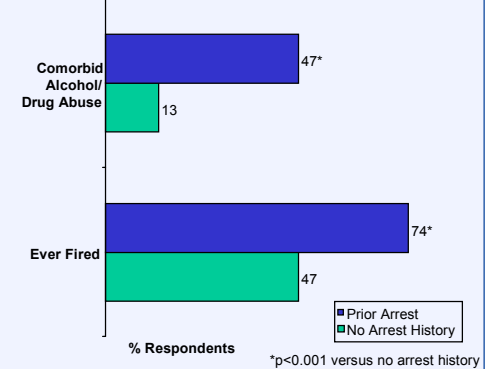
* $p<.01$ versus no arrest history

ON THE SAS, RESPONDENTS WITH AN ARREST HISTORY WERE MORE LIKELY TO SCORE AS HAVING PSYCHOSOCIAL IMPAIRMENT.



* $p<.01$ versus no arrest history

RESPONDENTS WITH AN ARREST HISTORY WERE MORE LIKELY TO HAVE COMORBID SUBSTANCE ABUSE AND TO HAVE BEEN FIRED FROM A JOB.



* $p<.001$ versus no arrest history

RESPONDENTS WITH PRIOR ARREST WERE MORE LIKELY TO HAVE USED MOOD STABILIZERS IN PAST 12 MONTHS.

	Prior Arrest	No Arrest History
% Diagnosed With Bipolar Disorder	22	16
% Using Medication In Past 12 Months		
Mood Stabilizer*	20	8
Antidepressant	33	29
Antipsychotic	9	5
Anxiolytic/Hypnotic	11	11

* $p<.01$ versus no arrest history

CONCLUSIONS

Among those screening positive for bipolar disorder, those with history of arrest were more likely than those with no arrest history to exhibit psychosocial impairment on the MDQ and the SAS and to have comorbid drug abuse.

CONTACT INFORMATION

Joseph R. Calabrese, MD
Case Western Reserve University
Department of Psychiatry
11400 Euclid Avenue, Suite 200
Cleveland, OH 44106