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Bipolar treatment efficacy - maintenance matches acute episode

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Miura and colleagues report a timely and significant systematic review and network meta-analysis of maintenance treatments for bipolar disorder.¹ They usefully differentiate the effects of medications on manic/mixed episodes and depressive episodes.

What seems quite striking is how well these differences in maintenance efficacy match those described for the same agents in the treatment of acute episodes, whether manic or depressive. Simply plotting the best estimates of effect versus placebo on relapse prevention against response rates for acute episodes reported in other network meta-analyses^{2,3} (Figure) reveals very substantial correlation for manic/mixed episodes ($r = .91, p = .01$) and a similar trend for depressive episodes ($r = .79, p = .06$).

This concordance between acute and maintenance efficacy provides further support for the case that these analyses reveal true differences between agents rather than being driven by methodological artifact, and may have implications for the design of future mechanistic studies.

Figure. Relative efficacy of active treatments versus placebo for bipolar disorder. Response rates for acute episodes versus relative risk of relapse with 95% Confidence Intervals for manic/mixed episodes (upper panel) and depressive episodes (lower panel). Best fit linear regression indicated with dotted line.

Conflict of interest statement

Dr Taylor reports personal fees from BMS and Otsuka, outside the submitted work, and a family member is an employee of GlaxoSmithKline.

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