



I have organized the following section in alphabetical order by topic, with some annotation in italics for readers interested in pursuing the data and opinions on which I based the material in this handbook. This is not a definitive bibliography but rather reflects my view of the best current literature. Some studies or books assuredly have been omitted by mistake. I have especially incorporated the key CATIE, STAR-D, and STEP-BD papers. I have emphasized papers published since the first edition in 2003 but kept those earlier papers that I felt contain currently useful material.

By far the most comprehensive single reference is Goodwin FK, Jamison KR. *Manic Depressive Illness*, 2nd ed. (New York: Oxford University Press, 2007). Suffice it to say that in the mood disorders world, this book is referred to as "The Book." An excellent overall clinical psychopharmacology handbook is Pies RW, Rogers DP. *Essential Psychopharmacology* (Washington, DC: American Psychiatric Press, 2005). The best single book for families and patients is John McManamy, *Living Well with Depression and Bipolar Disorder* (New York: McGraw-Hill, 2006). For readers interested in a deeper reading into my views on psychiatric diagnosis and treatment, please see Ghaemi SN. *The Concepts of Psychiatry: A Pluralistic Approach to the Mind and Mental Illness* (Baltimore: Johns Hopkins University Press, 2007).

ANTICONVULSANTS

- Bowden C, et al. A placebo-controlled 18-month trial of lamotrigine and lithium maintenance treatment in recently manic or hypomanic patients with bipolar I disorder. *Arch Gen Psychiatry*. 2003;60:392-400.
- Bowden C, et al. A randomized, placebo-controlled 12-month trial of divalproex and lithium in treatment of outpatients with bipolar I disorder. *Arch Gen Psychiatry*. 2000;57:481-489.
- Bowden C, et al. Efficacy of divalproex vs lithium and placebo in the treatment of mania. *JAMA*. 1994;271:918-924. *The best proof of more benefit with divalproex in mixed episodes.*

- Calabrese JR, Shelton MD, Rapport DJ, Kimmel SE. Bipolar disorders and the effectiveness of novel anticonvulsants. *J Clin Psychiatry*. 2002;63:5-9.
- Calabrese JR, et al. A double-blind, placebo-controlled, prophylaxis study of lamotrigine in rapid-cycling bipolar disorder. Lamictal 614 Study Group. *J Clin Psychiatry*. 2000;61(11):841-850. *Emphasized a positive secondary outcome in type II bipolar disorder, but the main result is negative.*
- Calabrese JR. A placebo-controlled study of topiramate in acute mania. European College of Neuropsychopharmacology annual meeting, Munich, Germany, 2000. *This was a public presentation of one negative study of topiramate in acute mania, which as yet remains unpublished. Four other negative studies in acute mania exist.*
- Davis LL, Bartolucci A, Petty F. Divalproex in the treatment of bipolar depression: A placebo-controlled study. *J Affect Disord*. 2005;85(3):259-266.
- Ghaemi SN, et al. Divalproex for the treatment of acute bipolar depression: A double-blind, randomized, placebo-controlled trial. *J Clin Psychiatry*. (in press).
- Ghaemi SN, et al. Oxcarbazepine treatment of bipolar disorder. *J Clin Psychiatry*. 2003;64(8):943-945.
- Ghaemi SN, Goodwin F. Gabapentin treatment of the non-refractory bipolar spectrum: An open case series. *J Affect Disord*. 2001;65:167-171.
- Goodwin GM, et al. A pooled analysis of 2 placebo-controlled 18-month trials of lamotrigine and lithium maintenance in bipolar I disorder. *J Clin Psychiatry*. 2004;65(3):432-441.
- Gyulai L, et al. Maintenance efficacy of divalproex in the prevention of bipolar depression. *Neuropsychopharmacology*. 2003;28(7):1374-1382. *This secondary analysis showed that though not proven definitively effective in maintenance treatment in one randomized, controlled trial (RCT; Bowden, et al., 2001), divalproex showed benefit for prevention of depression more so than mania. Recent small RCTs also find benefit for acute bipolar depression (Davis, et al., 2005, and Ghaemi, et al., in press).*
- Pande AC, et al. Gabapentin in bipolar disorder: A placebo-controlled trial of adjunctive therapy. Gabapentin Bipolar Disorder Study Group. *Bipolar Disord*. 2000;2(3 pt 2):249-255.
- Pande AC, et al. Treatment of social phobia with gabapentin: A placebo-controlled study. *J Clin Psychopharmacol*, 1999;19(4):341-348.
- Pande AC, et al. Placebo-controlled study of gabapentin treatment of panic disorder. *J Clin Psychopharmacol*. 2000;20(4):467-471. *These studies show that gabapentin is not effective in acute mania but has benefit for anxiety disorders. Gabapentin may be effective for bipolar depression type II (see Ghaemi, et al., 2001).*
- Wagner KD, et al. A double-blind, randomized, placebo-controlled trial of oxcarbazepine in the treatment of bipolar disorder in children and adolescents. *Am J Psychiatry*. 2006;163(7):1179-1186. *Oxcarbazepine is not better than placebo in pediatric bipolar disorder, but it too may have some adjunctive utility in type I or type II bipolar disorder (see Ghaemi, et al., 2003).*
- See www.gsk.com website for unpublished negative studies of lamotrigine in acute mania, acute unipolar depression, acute bipolar depression, and rapid-cycling bipolar disorder.

ANTIDEPRESSANTS

- Amsterdam JD, Chopra M. Monoamine oxidase inhibitors revisited. *Psychiatric Ann*. 2001;31:361-370.
- Gibbons RD, et al. The relationship between antidepressant medication use and rate of suicide. *Arch Gen Psychiatry*. 2005;62(2):165-172. *Some of the conflicting data on this issue.*
- Hammad TA, Laughren T, Racoosin J. Suicidality in pediatric patients treated with antidepressant drugs. *Arch Gen Psychiatry*. 2006;63(3):332-339. *The key FDA analysis of risk of suicide with antidepressants in children.*
- Insel TR. Beyond efficacy: The STAR-D trial. *Am J Psychiatry*. 2006;163(1):5-7. *The NIMH director's perspective on this important study.*
- Khan A, et al. Suicide rates in clinical trials of SSRIs, other antidepressants, and placebo: Analysis of FDA reports. *Am J Psychiatry*. 2003;160(4):790-792.
- March J, Silva S, Vitiello B. The Treatment for Adolescents with Depression Study (TADS): Methods and message at 12 weeks. *J Am Acad Child Adolesc Psychiatry*. 2006;45(12):1393-1403. *The largest single randomized study of childhood depression and suicidality with antidepressants, supporting the association.*
- Rihmer Z, Akiskal H. Do antidepressants t(h)reat(en) depressives? Toward a clinically judicious formulation of the antidepressant-suicidality FDA advisory in light of declining

- national suicide statistics from many countries. *J Affect Disord.* 2006;94(1-3):3-13. A clinically informed speculation about the possible role of misdiagnosed bipolar disorder in children who develop suicidality on antidepressants.
- Nelson JC. The STAR-D study: A four-course meal that leaves us wanting more. *Am J Psychiatry.* 2006;163(11):1864-1866. An excellent commentary that warns against rosy scenarios in interpreting the STAR-D results.
- Rush AJ. STAR-D: What have we learned? *Am J Psychiatry.* 2007;164(2):201-204.
- Rush AJ, et al. Bupropion-SR, sertraline, or venlafaxine-XR after failure of SSRIs for depression. *New Engl J Med.* 2006;354(12):1231-1242.
- Rush AJ, et al. Acute and longer-term outcomes in depressed outpatients requiring one or several treatment steps: A STAR-D report. *Am J Psychiatry.* 2006;163(11):1905-1917. The key study that shows poor long-term remission rates.
- Thase ME, et al. Cognitive therapy versus medication in augmentation and switch strategies as second-step treatments: A STAR-D report. *Am J Psychiatry* 2007;164(5):739-752.
- Trivedi MH, et al. Evaluation of outcomes with citalopram for depression using measurement-based care in STAR-D: Implications for clinical practice. *Am J Psychiatry.* 2006;163(1):28-40. The preceding three studies are the classic STAR-D studies.

ANTIDEPRESSANTS IN BIPOLAR DISORDER

- Altshuler L, et al. Impact of antidepressant discontinuation after acute bipolar depression remission on rates of depressive relapse at 1-year follow-up. *Am J Psychiatry.* 2003;160(7):1252-1262. An observational study from the Stanley Network reporting more depressive relapse after antidepressant discontinuation, contradicted by my randomized study below.
- Amsterdam JD, Brunswick DJ. Antidepressant monotherapy for bipolar type II major depression. *Bipolar Disord.* 2003;5(6):388-395.
- Coryell W, et al. The long-term course of rapid-cycling bipolar disorder. *Arch Gen Psychiatry.* 2003;60(9):914-920. An observational prospective study reporting no relation between antidepressants and rapid cycling, contradicted by the only randomized study (Wehr, et al., 1988).
- Ghaemi SN, et al. Antidepressants in bipolar disorder: The case for caution. *Bipolar Disord.* 2003;5(6):421-433. A response to Moller, et al. (2005) below.

- Ghaemi SN, et al. Antidepressant treatment in bipolar versus unipolar depression. *Am J Psychiatry.* 2004;161(1): 163-165. The first demonstration of high tolerance rates with antidepressant use in bipolar disorder.
- Ghaemi SN, et al. Diagnosing bipolar disorder and the effect of antidepressants: A naturalistic study. *J Clin Psychiatry.* 2000;61:804-808. Observational data supporting antidepressant-related rapid cycling.
- Ghaemi SN. Maintenance efficacy of antidepressants in bipolar disorder: A STEP-BD open randomized antidepressant discontinuation study. New Clinical Drug Evaluation Unit (NCDEU) meeting, Boca Raton, FL, June 11-14, 2007. The only randomized modern antidepressant discontinuation study in maintenance treatment of bipolar depression.
- Gijnsman HJ, et al. Antidepressants for bipolar depression: A systematic review of randomized, controlled trials. *Am J Psychiatry.* 2004;161(9):1537-1547. A meta-analysis of acute depression treatment trials that concludes benefit with antidepressants. Excluded the only prior negative study on technical grounds and now definitively superseded by the STEP-BD study (Sachs, et al., 2007).
- Goldberg JF, Perlis RH, Ghaemi SN, et al. Adjunctive antidepressant use and symptomatic recovery among bipolar depressed patients with concomitant manic symptoms: Findings from STEP-BD. *Am J Psychiatry.* 2007 Sep; 164 (9):1348-55.
- Goldberg JF, et al. Antidepressants increase manic symptoms and do not improve depressive symptoms in bipolar depressive mixed states. *Am J Psychiatry* (in press).
- Kukopulos A, Reginaldi P, Laddomada G, et al. Course of the manic-depressive cycle and changes caused by treatments. *Pharmakopsychiatri.* 1980;13:156-167. One of the first papers to show an association between antidepressants and rapid cycling.
- Leverich GS, et al. Risk of switch in mood polarity to hypomania or mania in patients with bipolar depression during acute and continuation trials of venlafaxine, sertraline, and bupropion as adjuncts to mood stabilizers. *Am J Psychiatry.* 2006;163(2):232-239.
- Parker G, et al. SSRIs as mood stabilizers for bipolar II disorder? A proof of concept study. *J Affect Disord.* 2006;92(2-3):205-214. A small crossover trial showing some benefit with SRIs for depressive symptoms in 3-month treatment trials.
- Moller HJ, Grunze H. Have some guidelines for the treatment of acute bipolar depression gone too far in the restriction of antidepressants? *Eur Arch Psychiatry Clin Neurosci.*

- 2000;250(2):57–68. *Strong attack on APA guidelines moving antidepressants off first-line treatment choice for acute bipolar depression.*
- Moller HJ, Grunze H, Broich K. Do recent efficacy data on the drug treatment of acute bipolar depression support the position that drugs other than antidepressants are the treatment of choice? A conceptual review. *Eur Arch Psychiatry Clin Neurosci*, 2005.
- Post RM, et al. A re-evaluation of the role of antidepressants in the treatment of bipolar depression: Data from the Stanley Foundation Bipolar Network. *Bipolar Disord*. 2003;5(6):396–406. *The Stanley Network randomized studies above (see also Leverich, et al., 2006) show that only about 15% of bipolar depressed patients have sustained remission in 1 year of antidepressant treatment and that venlafaxine has higher manic switch risk than other agents.*
- Post RM, et al. Mood switch in bipolar depression: Comparison of adjunctive venlafaxine, bupropion and sertraline. *Br J Psychiatry*. 2006;189:124–131.
- Sachs GS, et al. Effectiveness of adjunctive antidepressant treatment for bipolar depression. *New Engl J Med*. 2007;356(17):1711–1722. *The key large STEP-BD study that shows that antidepressants are not effective for acute bipolar depression.*
- Wehr TA, et al. Rapid cycling affective disorder: Contributing factors and treatment responses in 51 patients. *Am J Psychiatry*. 1988;145(2):179–184. *The only randomized study of antidepressants and induction of rapid cycling, supporting the association.*
- Wehr TA, Goodwin FK. Can antidepressants cause mania and worsen the course of affective illness? *Am J Psychiatry*. 1987;144:1403–1411. *A good review of the early literature on this topic.*

ANTIPSYCHOTICS

- Calabrese JR, et al. A randomized, double-blind, placebo-controlled trial of quetiapine in the treatment of bipolar I or II depression. *Am J Psychiatry*. 2005;162(7):1351–1360.
- Casey DE. Implications of the CATIE trial on treatment: extrapyramidal symptoms. *CNS Spectr*. 2006;11(7 suppl 7):25–31.
- Ghaemi SN, Pardo TB, Hsu DJ. Strategies for preventing the recurrence of bipolar disorder. *J Clin Psychiatry*. 2004;65(suppl 10):16–23. *The case for viewing antipsychotics as not having maintenance efficacy as mood stabilizers.*

- Glazer WM. Review of incidence studies of tardive dyskinesia associated with typical antipsychotics. *J Clin Psychiatry*. 2000;61:15–20. *A review of high rates of tardive dyskinesia with traditional neuroleptic agents.*
- Lieberman JA, et al. Effectiveness of antipsychotic drugs in patients with chronic schizophrenia. *New Engl J Med*. 2005;353(12):1209–1223. *The key CATIE study paper.*
- Morgenstern H, Glazer W. Identifying risk factors for tardive dyskinesia among long-term outpatients maintained with neuroleptic medications. *Arch Gen Psychiatry*. 1993;50:723–733. *The key prospective study showing high rates of tardive dyskinesia with traditional neuroleptic agents.*
- Perlis RH, et al. Atypical antipsychotics in the treatment of mania: A meta-analysis of randomized, placebo-controlled trials. *J Clin Psychiatry*. 2006;67(4):509–516.
- Tohen M, et al. Efficacy of olanzapine and olanzapine-fluoxetine combination in the treatment of bipolar I depression. *Arch Gen Psychiatry*. 2003;60(11):1079–1088.
- Vieta E, et al. Quetiapine monotherapy in the treatment of patients with bipolar I or II depression and a rapid-cycling disease course: A randomized, double-blind, placebo-controlled study. *Bipolar Disord*. 2007;9(4):413–425.

CHILDHOOD BIPOLAR DISORDER

- Geller B, Zimmerman B, Williams M, et al. Diagnostic characteristics of 93 cases of a prepubertal and early adolescent bipolar disorder phenotype by gender, puberty and comorbid attention deficit hyperactivity disorder. *J Child Adolesc Psychopharmacol*. 2000;10:157–164. *The case for a narrow diagnosis of childhood bipolar disorder.*
- Geller B, Zimmerman B, Williams M, et al. Bipolar disorder at prospective follow-up of adults who had prepubertal major depressive disorder. *Am J Psychiatry*. 2001;158:125–127. *Key study that shows that up to 50% of children with “unipolar” depression develop mania or hypomania in about 10-year follow-up.*
- Ghaemi SN, Martin A. Defining the boundaries of childhood bipolar disorder. *Am J Psychiatry*. 2007;164(2):185–188. *A commentary that seeks to strike a balance between narrow and broad definitions of childhood bipolar disorder.*
- Jensen PS, et al. Consensus report on impulsive aggression as a symptom across diagnostic categories in child psychiatry: Implications for medication studies. *J Am Acad Child Adolesc Psychiatry*. 2007;46(3):309–322.

- Kowatch RA, et al. Review and meta-analysis of the phenomenology and clinical characteristics of mania in children and adolescents. *Bipolar Disord.* 2005;7(6):483-496. *An excellent review.*
- Post RM, et al. Prepubertal bipolar I disorder and bipolar disorder NOS are separable from ADHD. *J Clin Psychiatry.* 2004;65(7):898-902.
- Wozniak J, et al. How cardinal are cardinal symptoms in pediatric bipolar disorder? An examination of clinical correlates. *Biol Psychiatry.* 2005;58(7):583-588. *A presentation of the case for a broad diagnosis for childhood bipolar disorder.*
- Youngstrom E, et al. Diagnostic and measurement issues in the assessment of pediatric bipolar disorder: Implications for understanding mood disorder across the life cycle. *Dev Psychopathol.* 2006;18(4):989-1021.

GENETICS AND ENVIRONMENT

- Duffy A, Grof P, Robertson C, et al. The implications of genetics studies of major mood disorders for clinical practice. *J Clin Psychiatry.* 2000;61(9):630-637. *The best single paper I use with patients to quantify genetic risks when planning children.*
- Kendler KS, Neale MC, Kessler RC, et al. Childhood parental loss and adult psychopathology in women: A twin study perspective. *Arch Gen Psychiatry.* 1992;49(2):109-116.
- Kendler KS, Thornton LM, Gardner CO. Genetic risk, number of previous depressive episodes, and stressful life events in predicting onset of major depression. *Am J Psychiatry.* 2001;158:582-586.
- Kendler KS, Karkowski LM, Prescott CA. Causal relationship between stressful life events and the onset of major depression. *Am J Psychiatry.* 1999;156(6):837-841. *The scientific basis for psychosocial etiologies in timing or triggering of mood episodes.*
- Post RM. The transduction of psychosocial stress into the neurobiology of recurrent affective illness. *Am J Psychiatry.* 1992;149:999-1010. *A highly regarded biological basis for the kindling model.*
- Sullivan PF, Neale MC, Kendler KS. Genetic epidemiology of major depression: Review and meta-analysis. *Am J Psychiatry.* 2000;157(10):1552-1562.

HIPPOCRATIC PSYCHOPHARMACOLOGY

- Ghaemi SN. Hippocratic psychopharmacology for bipolar disorder. *Psychiatry MMC.* 2006;3:30-39.
- Ghaemi SN. Hippocrates and Prozac. *Primary Psychiatry.* 2006;13:51-58. *These two articles lay out my perspective on the Hippocratic approach to psychopharmacology. The first one is followed by commentaries by Mauricio Tohen and Alan Swann.*
- Joauanna J. *Hippocrates.* Baltimore: Johns Hopkins University Press; 2001.
- McHugh PR. *The Mind Has Mountains: Reflections on Psychiatry and Society.* Baltimore: Johns Hopkins University Press; 2005. *The chapter "Hippocrates a la mode" was the first modern article on applying Hippocratic ideas to psychiatry.*
- Stahl SM, Muntner N. *Essential Psychopharmacology.* Cambridge, UK: Cambridge University Press; 2006. *This approach to psychopharmacology is the opposite of the Hippocratic approach; it might be called Galenic, based entirely on speculations about neurotransmitter systems, with little to no contact with clinical research. Symptom-oriented, as opposed to disease-oriented, aggressive treatment is strongly and explicitly advocated. This perspective assumes that treatment should happen and then speculates about treatment approaches; it does not critique this assumption on ethical and disease-based grounds, as in the Hippocratic tradition.*

LITHIUM

- Baldessarini RJ, Tondo L. Does lithium treatment still work? Evidence of stable responses over three decades. *Arch Gen Psychiatry.* 2000;57:187-190. *A good antidote to excessive skepticism about lithium often found among contemporary practitioners.*
- Goodwin FK, et al. Suicide risk in bipolar disorder during treatment with lithium and divalproex. *JAMA.* 2003; 290(11):1467-1473. *Lithium's antisuicide benefits may be unique to it.*
- Hetmar O, Bolwig T, Brun C, et al. Lithium: Long-term effects on the kidney: I. Renal function in retrospect. *Acta Psychiatr Scand.* 1986;73:574-581.
- Hetmar O, Povlsen UJ, Ladefoged J, et al. Lithium: Long-term effects on the kidney. A prospective follow-up study 10 years after kidney biopsy. *Br J Psychiatry.* 1991;158:53-58. *The preceding two references are among the few prospective studies*

of lithium's renal effects and show less risk than is commonly assumed.

- Sproule BA, Hardy BG, Shulman KI. Differential pharmacokinetics of lithium in elderly patients. *Drugs Aging*. 2000;16:165-177. *The limitations of lithium in the elderly.*
- Tondo L, Hennen J, Baldessarini RJ. Lower suicide risk with long-term lithium treatment in major affective illness: A meta-analysis. *Acta Psychiatr Scand*. 2001;104:163-172. *Lithium saves lives, which has not been proven yet for any other psychotropic agent.*

MISDIAGNOSIS OF BIPOLAR DISORDER

- Das AK, et al. Screening for bipolar disorder in a primary care practice. *JAMA*. 2005;293(8):956-963. *Applies the Mood Disorders Questionnaire to the medical practice setting, finding high rates of misdiagnosis of bipolar disorder.*
- Ghaemi SN, Boiman EE, Goodwin FK. Diagnosing bipolar disorder and the effect of antidepressants: A naturalistic study. *J Clin Psychiatry*. 2000;61:804-808. *Describes clinically evaluated 40% misdiagnosis rate as unipolar depression.*
- Hirschfeld RM, et al. Screening for bipolar disorder in the community. *J Clin Psychiatry*. 2003;64(1):53-59. *Applies the Mood Disorders Questionnaire to the community setting, finding high rates of misdiagnosis of bipolar disorder.*
- Hirschfeld RM, et al. Screening for bipolar disorder in patients treated for depression in a family medicine clinic. *J Am Board Fam Pract*. 2005;18(4):233-239.
- Phelps JR, Ghaemi SN. Improving the diagnosis of bipolar disorder: Predictive value of screening tests. *J Affect Disord*. 2006;92(2-3):141-148.
- Zimmerman M, et al. Using questionnaires to screen for psychiatric disorders: A comment on a study of screening for bipolar disorder in the community. *J Clin Psychiatry*. 2004;65(5):605-610;discussion 721. *The preceding two references warn against identifying Mood Disorder Questionnaire scores with equivalence to a diagnosis of bipolar disorder.*

MIXED STATES

- Benazzi F, Akiskal H. Irritable-hostile depression: Further validation as a bipolar depressive mixed state. *J Affect Disord*. 2005;84(2-3):197-207.

- Benazzi F. Bipolar disorder: Focus on bipolar II disorder and mixed depression. *Lancet*. 2007;369(9565):935-945.
- Koukopoulos A, et al. [Mixed depressive syndrome.] *Encephale*. 1992;18(spec no 1):19-21.
- Koukopoulos A, Koukopoulos A. Agitated depression as a mixed state and the problem of melancholia. *Psychiatr Clin North Am*. 1999;22(3):547-564. *Koukopoulos first developed the depressive mixed-state concept in modern times, and Benazzi and others have validated it empirically.*

NEUROBIOLOGY

- Ghaemi SN, Boiman EE, Goodwin FK. Kindling and second messengers: An approach to the neurobiology of recurrence in bipolar disorder. *Biol Psychiatry*. 1998;45:137-144.
- Manji HK, Moore GJ, Chen G. Lithium at 50: Have the neuroprotective effects of this unique cation been overlooked? *Biol Psychiatry*. 1999;46:929-940.
- Manji HK, Potter WZ, Lenox RH. Signal transduction pathways: Molecular targets for lithium's actions. *Arch Gen Psychiatry*. 1995;52:531-543. *The preceding papers highlight the importance of second-messenger pathways and neuroplasticity in the neurobiology of bipolar disorder and depression.*

NOSOLOGY

- Crow TJ. Nature of the genetic contribution to psychotic illness: A continuum viewpoint. *Acta Psychiatr Scand*. 1990;81:401-408. *The key proponent of the one psychosis perspective on the schizophrenia/mood disorder dichotomy.*
- Kendell RE. The concept of disease and its implications for psychiatry. *Br J Psychiatry*. 1975;127:305-315.
- Kendell RE. Clinical validity. *Psychol Med*. 1989;19(1):45-55.
- Kendell RE, et al. Diagnostic criteria of American and British psychiatrists. *Arch Gen Psychiatry*. 1971;25(2):123-130. *How Americans overdiagnosed schizophrenia.*
- Kendler KS, Karkowski LM, Walsh D. The structure of psychosis. *Arch Gen Psychiatry*. 1998;55:492-499. *A key empirically based review of the nosologic literature that mostly supports the Kraepelinian dichotomy of schizophrenia and mood disorders.*

- Kendler KS, Toward a scientific psychiatric nosology. *Arch Gen Psychiatry*. 1990;47:969-973. A thoughtful discussion of the role of values in diagnosis.
- Robins E, Guze SB. Establishment of diagnostic validity in psychiatric illness: Its application to schizophrenia. *Am J Psychiatry*. 1970;126:983-987. The classic diagnostic validators in psychiatry.
- Surtees PG, Kendell RE. The hierarchy model of psychiatric symptomatology: An investigation based on present state examination ratings. *Br J Psychiatry*. 1979;135:438-443. The best description of the concept of the diagnostic hierarchy.

POLYPHARMACY

- Denicoff K, Smith-Jackson E, Disney E, et al. Comparative prophylactic efficacy of lithium, carbamazepine, and the combination in bipolar disorder. *J Clin Psychiatry*. 1997;58:470-478. One of the few recent randomized polypharmacy maintenance studies.
- Frye MA, et al. The increasing use of polypharmacotherapy for refractory mood disorders: 22 years of study. *J Clin Psychiatry*. 2000;61(1):9-15.
- Ghaemi SN, ed. *Polypharmacy in Psychiatry*. New York: Marcel Dekker; 2002. The only book on this topic.

PSYCHOTHERAPIES

- Beck AT, Rush AJ, Shaw BF, et al. *Cognitive Therapy of Depression*. New York: Guilford Press; 1979. The classic text on cognitive behavioral therapy.
- Colom F, et al. A randomized trial on the efficacy of group psychoeducation in the prophylaxis of recurrences in bipolar patients whose disease is in remission. *Arch Gen Psychiatry*. 2003;60(4):402-407.
- Elkin I, Shea MT, Watkins JT, et al. National Institute of Mental Health Treatment of Depression Collaborative Research Program: General effectiveness of treatments. *Arch Gen Psychiatry*. 1989;46:971-982. Classic study that shows that cognitive behavioral therapy is as effective as tricyclic antidepressants in acute treatment of unipolar depression in a mostly nonrecurrent sample.
- Frank E, Kupfer DJ, Perel JM, et al. Three-year outcomes for maintenance therapies in recurrent depression. *Arch Gen*

- Psychiatry*. 1990;47:1093-1099. Classic study that shows that interpersonal psychotherapy is less effective than tricyclic antidepressants in maintenance treatment of unipolar depression in a mostly recurrent sample.
- Havens LL. *Making Contact: Uses of Language in Psychotherapy*. Cambridge, MA: Harvard University Press; 1986. A wonderful book on how to do existential psychotherapy.
- Klerman G, Weissman M, Rounsaville B, et al. *Interpersonal Psychotherapy of Depression*. New York: Basic Books; 1984.
- Miklowitz DJ, et al. A randomized study of family-focused psychoeducation and pharmacotherapy in the outpatient management of bipolar disorder. *Arch Gen Psychiatry*. 2003;60(9):904-912.
- Miklowitz DJ, et al. Psychosocial treatments for bipolar depression: A 1-year randomized trial from the Systematic Treatment Enhancement Program. *Arch Gen Psychiatry*. 2007;64(4):419-426. The key STEP-BD psychotherapy study, finding benefit.
- Scott J, Colom F, Vieta E. A meta-analysis of relapse rates with adjunctive psychological therapies compared to usual psychiatric treatment for bipolar disorders. *Int J Neuropsychopharmacol*. 2007;10(1):123-129. The best current review of this topic.
- Thase ME, Friedman ES, Fasiczka AL, et al. Treatment of men with major depression: A comparison of sequential cohorts treated with either cognitive behavioral therapy or newer generation antidepressants. *J Clin Psychiatry*. 2000;61(7):466-472. In acute refractory depression, combined CBT and an antidepressant was more effective than either alone.

RAPID CYCLING

- Calabrese JR, et al. A 20-month, double-blind, maintenance trial of lithium versus divalproex in rapid-cycling bipolar disorder. *Am J Psychiatry*. 2005;162(11):2152-2161. The only randomized, controlled trial comparing an anticonvulsant and lithium. They were similar, although with some possible enhanced benefit with divalproex for depressive episodes.
- Wehr TA, et al. Rapid-cycling affective disorder: Contributing factors and treatment responses in 51 patients. *Am J Psychiatry*. 1988;145(2):179-184. The only proven randomized intervention that improves rapid cycling: stopping antidepressants.

See www.gsk.com for unpublished negative studies of lamotrigine in rapid-cycling bipolar disorder.

SCHIZOAFFECTIVE DISORDER

- Kendler KS, Gallagher TJ, Abelson JM, et al. Lifetime prevalence, demographic risk factors, and diagnostic validity of nonaffective psychosis as assessed in a US community sample: The national comorbidity survey. *Arch Gen Psychiatry*. 1996;53:1022-1031. *Demonstrates very low prevalence of schizoaffective disorder in the community, suggesting that clinical samples are perhaps overdiagnosed.*
- Kendler KS, McGuire M, Gruenberg AM. The Roscommon family study I. *Arch Gen Psychiatry*. 1993;50:527-540. *Demonstrates that schizoaffective disorder is not a separate illness and may be a comorbidity of schizophrenia and mood disorder.*
- Tsuang MT, Simpson JC. Schizoaffective disorder: Concept and reality. *Schizophr Bull*. 1984;10(1):14-25. *An excellent conceptual summing up.*

SPECTRUM CONCEPTS

- Akiskal HS, Pinto O. The evolving bipolar spectrum: Prototypes I, II, III, and IV. *Psychiatr Clin North Am*. 1999;22:517-534. *This is a classic summary chapter by the modern founder of this model.*
- Akiskal HS, et al. Re-evaluating the prevalence of and diagnostic composition within the broad clinical spectrum of bipolar disorders. *J Affect Disord*. 2000;59(suppl 1):S5-30.
- Angst J. The bipolar spectrum. *Br J Psychiatry*. 2007;190:189-191. *The best recent summary of the topic by one of the founders of the unipolar/bipolar dichotomy.*
- Angst J, Gamma A. A new bipolar spectrum concept: A brief review. *Bipolar Disord*. 2002;4(suppl 1):11-14.
- Baldessarini RJ. A plea for the integrity of the bipolar concept. *Bipolar Disord*. 2000;2:3-7. *A good statement of the weaknesses of the spectrum concept.*
- Cassano GB, et al. The mood spectrum in unipolar and bipolar disorder: Arguments for a unitary approach. *Am J Psychiatry*. 2004;161(7):1264-1269.
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