

# **FAMILY PSYCHOEDUCATION AND OUTCOME OF MOOD DISORDER: AN EGYPTIAN STUDY**

*Thesis*

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بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ

”وَقُلْ رَبِّ زِدْنِي عِلْمًا”

سورة طه (١١٤)

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*Dedicated to My Wife*

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## **Abbreviations**

- A.D.:** Anno Domini.  
**AL:** Allostatic Load.  
**APA:** American Psychiatric Association.  
**ARI:** Aripiprazole.  
**BAD:** Bipolar Affective Disorder.  
**BD:** Bipolar Disorder.  
**BDNF:** Brain Derived Neurotrophic Factor.  
**BFPEP:** Behavioral Family Psychoeducation Program.  
**BMD:** Bipolar Mood Disorder.  
**BPG:** Based Psychoeducational Group.  
**BP-I:** Bipolar I Disorder.  
**BP-II:** Bipolar II Disorder.  
**BPRS:** Brief Psychiatric Rating Scale.  
**BRMS:** Bech-Rafaelson Mania Scale.  
**CAE:** Customized Adherence Enhancement.  
**CANMAT:** Canadian Network for Mood and Anxiety treatments.  
**CBT:** Cognitive Behavioral Therapy.  
**CC:** Collaborative Care.  
**CET:** Communication Enhancement Training  
**CFF-CBT:** Child- And Family-Focused Cognitive- Behavioral  
Therapy.  
**CGAS:** Children's Global Assessment Scale.  
**CGI-BP:** Clinical Global Impression Scales For Bipolar  
Disorder.  
**CI:** Confidence Interval.  
**CM:** Crisis Management.  
**CMHT:** Community Mental Health Teams.  
**CMNF:** Crisis Management With Naturalistic Follow-Up.  
**CTOP:** Colorado Treatment-Outcome Project.  
**DAI:** Drug Attitude Inventory.

**DBT:** Dialectical Behavior Therapy.  
**DSM-IV:** Diagnostic And Statistical Manual Of Mental Disorders-IV.  
**DSM-IV-TR:** Diagnostic And Statistical Manual Of Mental Disorders- IV Text Revision.  
**DSPs:** Disorder-Specific Psychotherapies.  
**EC:** Enhanced Care.  
**ECT:** Electroconvulsive Therapy.  
**EE:** Expressed Emotion.  
**EG:** Experimental Group.  
**FDA:** Food And Drug Administration.  
**FFT:** Family-Focused Therapy.  
**FFT-HPI:** Family-Focused Treatment-Health Promoting Intervention.  
**FGAs:** First-Generation Antipsychotics.  
**FGDA:** First-Generation Depot Antipsychotics.  
**FPE:** Family Psychoeducation.  
**GAF:** Global Assessment of Functioning.  
**GAS:** Global Assessment Scale.  
**Group I:** Subjects received Behavioral Family Psychoeducation Program plus TAU  
**Group II:** Subjects received TAU plus supportive psychotherapy.  
**GWAS:** Genome-Wide Association Studies.  
**HAM-D:** Hamilton Rating Scale For Depression.  
**HE:** Health Education.  
**HR:** Hazard Ratio.  
**HRQOL:** Health-Related Quality of Life.  
**HRQOL:** Health-Related Quality Of Life.  
**IBSRC:** Isfahan Behavioral Sciences Research Center.  
**ICD:** International Classification of Diseases.  
**IFIT:** Integrated Family Individual Therapy.  
**IFT:** Individual Family Therapy.

**IPSRT:** Interpersonal And Social Rhythm Therapy.  
**IQ:** Intelligence Quotient.  
**IT:** Interpersonal Therapy.  
**LGP:** Life Goals Program.  
**LIFE-RIFT:** Longitudinal Interval Follow-Up Evaluation-  
Range Of Impaired Functioning Tool.  
**LTG:** Lamotrigine.  
**MDD:** Major Depressive Disorder.  
**MFGP:** Multifamily Group Psychoeducation.  
**MFPGS:** Multifamily Psychoeducational Group Therapy.  
**MFT:** Multiple Family Therapy.  
**MOS-SF-36:** Medical Outcomes Survey 36-Item Short-Form  
Health Survey.  
**mRNA:** Messenger RNA.  
**MSES:** Mindfulness-Based Self-Efficacy Scale.  
**MSs:** Mood Stabilizers.  
**NICE:** The National Institute For Health And Clinical  
Excellence.  
**PBO:** Placebo.  
**PE:** Psychoeducation.  
**PORT:** Patient Outcomes Research Team.  
**Q-LES-Q:** Quality Of Life Enjoyment And Satisfaction  
Questionnaire.  
**Qol:** Quality Of Life.  
**RCT:** Randomized Controlled Trials.  
**SADS:** Schedule For Affective Disorders And Schizophrenia.  
**SADS-C:** The Schedule For Affective Disorders &  
Schizophrenia Change Version.  
**SAS:** Social Adjustment Scale.  
**SBAS:** Social Behavior Assessment Schedule For Family  
Burden.  
**SD:** Standard Deviation.

**SFGP:** Solution Focused Group Psychoeducation.  
**SFGT:** Solution Focused Group Therapy.  
**SFQ:** Social Functioning Questionnaire.  
**SGAs:** Second-Generation Antipsychotics.  
**SGDA:** Second-Generation Depot Antipsychotics.  
**SIMSEP:** Systematic Illness Management Skills Enhancement Program.  
**SRTAB:** Self-Reported Treatment Adherence Behaviors.  
**STEP-BD:** Systematic Treatment Enhancement Program For Bipolar Disorder.  
**SUD:** Disorder Substance Use Disorder.  
**T0:** Baseline Assessment in Our Study.  
**T1:** Assessment At 3 Months in Our Study.  
**T2:** Assessment At 6 Months in Our Study.  
**T3:** Assessment At 9 Months in Our Study.  
**T4:** Assessment At 12 Months in Our Study.  
**TAU:** Treatment-As-Usual in Our Study.  
**UCLA:** University Of California, Los Angeles.  
**UK:** United Kingdom.  
**USA:** United States of America.  
**WHO:** World Health Organization.  
**WQL-I:** Wisconsin Quality Of Life-Index Client Questionnaire.  
**YMRS:** Young Mania Rating Scale.

## ***Introduction***

For nearly 2500 years mood disorders have been described as the most common diseases of mankind, but only recently have they commanded major public health interest. Based on the results of different studies, this disorder stands at the 6<sup>th</sup> or 7<sup>th</sup> place among other debilitating disorders worldwide (Calabrese, et al. 2003; Chisholm, et al. 2005; Simon et al., 2006). According to World Health Organization (WHO), mood disorders are one of the most important worldwide health issues of the 21<sup>st</sup> century (Boyd, 2007).

Bipolar disorder is underdiagnosed, misdiagnosed and undertreated. The emphasis now is on the bipolar spectrum and its management is under continuous revision, for example, the controversial use of antidepressants. The recent change in the conceptualization of bipolar disorder has changed the lifetime prevalence, the difficulty in diagnosis, the syndromal and functional outcome. The bipolar spectrum encompasses many psychiatric disorders that requires a change in its diagnosis and management. There has been a shift in pharmacological and psychotherapeutic management in bipolar disorder (Okasha, 2011).

Moreover, the classification of bipolar disorder in mental hospitals indicate a considerable misclassification of bipolar