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Higher discharge rate for BPD in children and adolescents in the US compared to UK

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A study published in the June 2014 issue of the *Journal of the American Academy of Child and Adolescent Psychiatry* found a very much higher discharge rate for pediatric bipolar (PBD) in children and adolescents aged 1-19 years in the US compared to England between the years 2000-2010.

Using the English NHS Hospital Episode Statistics (HES) dataset and the US National Hospital Discharge Survey (NHDS) to compare US and English discharge rates for PBD over the period 2000-2010, the authors found a 72.1-fold higher discharge rate for pediatric bipolar in youth in the US compared to England. After controlling for cross-national differences in length of stay, discharge rates for PBD remained 12.5 times higher in the US than in England, and for all other child psychiatric diagnoses the discharge rate was 3.9 higher, and for adults with BD 7.2 fold higher, in the US than in England.

Dr. Anthony James, with the University of Oxford, and lead author of the paper, said of the study, "The finding that the disparity between US and English discharge rates for PBD is markedly greater than the disparity for child psychiatric discharge rates overall, and for adult rates for bipolar disorder, is potentially important. However, the study design does not allow us to answer the question whether US clinicians are too liberal in assigning the diagnosis of bipolar disorder to youth or, alternatively, whether English clinicians fail to recognize or diagnose these illnesses. It is clear that the reasons for the disparity in the case of PBD warrant further study."

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More information: The article "A Comparison of American and English Hospital Discharge Rates for Pediatric Bipolar Disorder, 2000-2010" by Anthony James, M.D., Uy Hoang, M.D., Valerie Seagroatt, M.Sc., Joe Clacey, M.D., Michael Goldacre, M.D., Ellen Leibenluft, M.D., appears in the *Journal of the American Academy of Child and Adolescent Psychiatry*, Volume 53, Issue 6 (June 2014). dx.doi.org/10.1016/j.jaac.2014.02.008

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