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MOBILE APPS REDUCE COSTS AND IMPROVE OUTCOMES OF BIPOLAR DISORDER: ILLUSION OR REALITY?

Bipolar disorder (BD) is a mental illness which affects 2.7 % of population worldwide and can have devastating effects on individual health including alcoholism, drug abuse and suicide.

Treatment adherence is a frequent problem in BD (60 % of bipolar is not adherent to medications), causing poor quality of life, high morbidity and mortality. This aspect is consistently predictive of a number of negative outcomes in bipolar samples, and the discontinuation of mood stabilizers places these patients at high risk for relapse. With continued increases in smartphone ownership (4.4 billion in 2017), researchers and clinicians are investigating the use of this technology to enhance the management of chronic illnesses such as (BD). Smartphones can be used to deliver interventions and psychoeducation supplement treatment, and enhance therapeutic reach in BD, as apps are cost-effective, accessible, anonymous, and convenient. While the evidence-based development of BD apps is in its infancy, there has been an explosion of publicly available apps. However, the opportunity for mHealth to assist in the self-management of BD is only feasible if apps are of appropriate quality. In its Mental Health Action Plan 2013–2020, the WHO recommended “the promotion of self-care, for instance, through the use of electronic and mobile health technologies.” And the UK National Health Service (NHS) website NHS Choices carries a short list of online mental-health resources, including a few apps, that it has formally endorsed. The evidence supporting the use of such apps is building. A 2013 review identified more than 1,500 depression-related apps in commercial app stores but just 32 published research papers on the subject. Other shadow on app use in BD regards data protection and accurate scientific information often neglected. Recently a smartphone app that monitors subtle qualities of a person's voice during everyday phone conversations shows promise for detecting early signs of mood changes in people with bipolar disorder, a University of Michigan team reports. Another intriguing study was more recently performed by Prof. Vieta at Barcelona University with the aim to develop and validate a smartphone application to monitor symptoms and signs and empower the self-management of bipolar disorder, offering customized embedded psychoeducation contents, in order to identify early symptoms and prevent relapses and hospitalizations.

Biography

Giuseppe Borgherini graduated in Medicine and Surgery in 1986, he specialized in Psychiatry at the University of Padua in 1990 and holds a Ph.D. in Psychiatric Sciences at the University of Verona, 1994. He also won the European Erasmus Certificate in anxiety disorders attending internships at the University of Maastricht and Oxford in 1991 and the same year he received a research grant from Martino Arrigoni Foundation for a study on the psychological aspects of heart transplantation in childhood during 1991. From 1994 to 2011 he held a number of positions as a Professor in the graduate schools in psychiatry, internal medicine, clinical psychology, sports psychology, as well as in the residential school psychodynamic psychotherapies, University of Padua. In the same years he managed the inter-university research collaborations, in particular with the London Maudsley Hospital and the Department of Psychiatry University of Geneva, in addition to having led health research projects aimed for the Veneto Region. He is currently a member of the Mental Health Commission of the Veneto Region and the National Commission for psychiatry of Italian Association of Private Hospitals (AIOP), which is also the regional manager for the Veneto. Among the authors of the Italian Treaty of Psychiatry, he has to his credit about 170 publications in national and international journals.

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