

## “G.T. Mixed States Rating Scales”, or “G.T. MSRS”

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### *Self-administered rating scale -*

**Has there ever been a period of time during last three months when you frequently were and/or presented/felt ...**

	<b>Yes</b>	<b>Not</b>
1) Hyperactivity (euphoria) quickly alternating with periods of psychomotor retardation (apathy)?	.....	....
If Yes, for how many days/weeks?	.....	
2) Depressed mood together with irritability and/or internal tenseness?	.....	....
If Yes, for how many days/weeks?	.....	
3) Substance abuse (alcohol and/ or drugs)?	.....	....
If Yes, for how many days/weeks?	.....	
4) Disorders of appetite?	.....	....
If Yes, for how many days/weeks?	.....	
5) A sense of despair and suicidal ideation?	.....	....
6) Anhedonia and widespread apathy?	.....	.....
7) Delusions and hallucinations?	.....	....
8) Hyper or hypo-sexual activity?	.....	....
If Yes, for how many days/weeks?	.....	
9) Insomnia (or sleep fragmentation) or hypersomnia?	.....	.....
If Yes, for how many days/weeks?	.....	
10) Reduced ability to concentrate and mental overactivity?	.....	.....
If Yes, for how many days/weeks?	.....	

Yes

Not

11) Gastrointestinal disorders (colitis, gastritis), headaches, and various somatic symptoms (muscular tenseness; tachicardia)? ..... ..

If Yes, for how many days/weeks, and what of those symptoms? .....

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Additional points -

Could it be considered that, at the age of about 18-20 years (if you are more than 20 years old; if you are younger, please consider the answer as “during actual last years”), you were:

*(choose only one of these three following answers)*

- a person of very lively character-hyperactive and extremely cheerful ?   
or

- a person who always tended to be tense and irritable ?or

- a person always tended to be taciturn, solitary and melancholy, and also

with anxiety symptoms (panic, phobia between persons, claustrophobia) ?

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**“G.T. Mixed States Rating Scales” - Scores**

- The “Additional Points” help to focus about the Temperaments of the patient (hyperthymic temperament for the first point; cyclothymic temperament for the second point; depressiveanxious temperament for the third point).

**There is a Mixed states diagnosis** if *at least* two YES answers are present ;

- Give *Double scores* in the points 1-2-3-4-8-9-10-11 if at least 50% of the month is involved;

- Level: Medium-light level of mixed state: from 2 to 6 scores; - Level: Medium level of mixed state: from 7 to 12 scores; - Level: High level of mixed state: from 13 to 19 scores.

The positive result following to “G.T. MSRS” will conduct to do a generic diagnosis for mixed states sub-types of bipolar spectrum disorders, following Akiskal’s scheme (The evolving bipolar spectrum: Prototypes I, II, III, IV. Psychiatr Clin North Am. 1999) or Tavormina’s scheme (The management of bipolar spectrum disorder”. SEPT 2013) for bipolar disorders.

The clinician will need of special care to do the correct sub-diagnosis of sub-group of mixed state.

# Akiskal's schema of bipolar spectrum

**Bipolar ½** : schizobipolar disorder

**Bipolar I** : core manic-depressive illness

**Bipolar I½** : depression with protracted hypomania

**Bipolar II** : depression with discrete spontaneous hypomanic episodes

(*Bipolar II, "sunny" bipolars* - hypomanic periods (2-3 days) characterized by cheerfulness and jocularity, people-seeking, increased sexual drive and behavior, talkativeness and eloquence, confidence and optimism, disinhibition and carefree attitudes, reduced sleep need, eutonia and vitality, and over-involvement in new projects)

**Bipolar II½** : depression superimposed on cyclothymic temperament

(*Bipolar II½: Unstable, "darker" BP II* : dysphoric, irritable hypomania superimposed upon an inter-episodic cyclothymic temperament ("roller-coaster" course often misinterpreted or misdiagnosed as borderline personality disorder). Often comorbid with panic disorder and social phobia, as well as, bulimia and borderline personality disorder)

**Bipolar III** : depression with induced hypomania (i.e., hypomania occurring solely in association with antidepressant or other somatic treatment)

**Bipolar III½** : prominent mood swings occurring in the context of substance or alcohol use or abuse

**Bipolar IV** : depression superimposed on a hyperthymic temperament

(*Bipolar IV : VERY DANGEROUS condition* - Depression superimposed on a stable hyperthymic temperament: exuberant, articulate and jocular, overoptimistic and carefree, overconfident and boastful, high energy level, full of plans and activities,... with broad interests, over involved, uninhibited and risk-taking, and an habitual short sleeper. And suddenly slip into deep (often ) treatment-resistant depression. This is an extremely DANGEROUS condition because hyperthymic individuals are intolerant of any degree of depression, and certainly poorly tolerate the affective dysfunction associated with a depressive mixed state. Many mysteries about suicide, and suicides that one reads about in the newspaper [ie, "an extremely successful and happy person, who had everything, put the gun in his mouth"] may well belong to this category) .

Akiskal HS, Pinto O: The evolving bipolar spectrum: Prototypes I, II, III, IV. *Psychiatr Clin North Am.* 1999; 22:517-534

## Bipolar Spectrum Disorders sub-types – Tavormina's schema

### Acute mania

- 1 - Bipolar I (→ dysphoric mania)
- 2 - Bipolar II (→ rapid cycling bipolarity, mixed dysphoria)
- 3 - Cyclothymia (→ rapid cycling bipolarity)
- 4 - Irritable Cyclothymia (rapid cycling bipolarity)
- 5 - Mixed Dysphoria (depressive mixed state)
- 6 - Agitated Depression (→ depressive mixed state)
- 7 - *Cyclothymic temperament* (→ Mixed Dysphoria, depressive mixed state, rapid cycling bipolarity, agitated depression, bipolar I-II)
- 8 - *Hyperthymic temperament* (→ Agitated Depression, Irritable Cyclothymia, bipolar II)
- 9 - *Depressive temperament* (→ brief rec. depr, agitated depression)
- 10 - Brief recurrent depression (→ dysthymia, major depressive episode, agitated depression)

### Unipolar Depression

Tavormina G : "The management of bipolar spectrum disorder", 2013