BACKGROUND: Several rating scales have been previously developed that aim to capture the mania phenotype, however they have limited potential as screening instruments in non-clinical populations. The goal of this study was to investigate the psychometric properties as well specificity and sensitivity rates of a new mania CBCL subscale developed using the same methodology as the originally defined for DSM-oriented subscale development by Achenbach et al. (2003).

METHODS: An expert panel identified 19 items from the CBCL 6-18 that map onto the DSM-IV criteria for Mania. We then tested the validity and reliability of this subscale, the CBCL-Mania Scale (CBCL-MS), on data from TRAILS (TRacking Adolescents’ Individual Lives Survey). TRAILS is a prospective epidemiological study of a cohort of 1240 Dutch adolescents who were assessed with the full CBCL at age 16 and were administered the Composite International Diagnostic Interview (CIDI) at age 18. Thirty-nine cases meeting criteria for mania were identified using CIDI.

RESULTS: The CBCL-Mania Scale (CBCL-MS) items had high internal consistency (Cronbach’s alpha=.80). Principal Component Analyses identified four stable and interpretable factors, corresponding to Distractibility/Disinhibition, Psychosis, Increased Libido and Disrupted Sleep (Figure 1). The CBCL-MS age 16 was robustly associated with diagnosis of mania by age 18 ($\chi^2=18.93$, $p<0.0001$). Receiver operating characteristics tests showed sensitivity and specificity rates of 26% and 96% respectively, The CBCL-MS could also discriminate between cases with mania, Major Depressive Disorder (MDD) and General Anxiety Disorder (GAD), $F(4,1169)=27.94$, $p<0.001$ (Figure 2).

CONCLUSION: We have developed, validated and established a new CBCL-Mania Scale for the assessment of manic symptomatology in non-clinical settings.

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