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| Table 1  Trials | Design | Number of subjects | Treatment with medicine | Discontinuation of medicine | Relapse during  pregnancy | Relapse postpartum |
| Newport, 2008  Bipolar I+II | Prospective observational study | A. 16 initially euthymic women  B. 10 Initially euthymic women | Lamotrigin (No. 5),  Lithium (No. 6),  Divalproex (No. 5)  Lamotrigine | A. Stopped during 1-13 days (No. 14)  Unplanned pregnancy  (81.3%)  B. Continued lamotrigine  Unplanned pregnancy (20%). | A. 100%  B. 30% |  |
| Viguera, 2000  Bipolar I+II | Retrospective  study | A. 42 pregnant  B. 59 non-pregnant | Lithium | A. Stopped within 6 weeks after conception  B. Stopped after euthymia (75%) or adverse effects (25%) | A. 52.4% (No. 22)  B. During the same period: 57.6% (No. 34) | The euthymic after 40 weeks of discontinuation:  A. relapse 70% (No. 14)  B. relapse 24% (No. 6) |
| Grof, 2000  Bipolar I | Retrospective  study | A. 28 pregnant prior to lithium treatment  B. 33 Childless  Lithium responders | Lithium | No medication at start of pregnancy | 17.9% (No.5) started with lithium during pregnancy | 25% (No.7) relapsed postpartum |
| Rosso, 2016  Bipolar I | Non-randomized prospective follow-up study | 17 lithium responsive women. Euthymic for 24 months | Lithium treatment during pregnancy | 24 to 48 hours before delivery | 11.2 % (No. 2) | 27.8% (No. 5) |
| Abdel-Hay, 2011  Bipolar I | Prospective observational study | 83  Euthymic for at least 8 weeks before last menstrual episode | No information is given concerning when and how fast medication was discontinued | A. 63 % (No.52) discontinued medication during pregnancy  B. 37% (No. 31) continued medication during pregnancy | In total;  33.7% (No. 28)  A. 76.9% (No.40) relapsed during pregnancy and postpartum | In total:  31.3% (No. 26)  B.45.2% (No. 14) relapsed during pregnancy and postpartum |
| Bergink, 2012  Bipolar I+II | Prospective open label follow-up study | 70 women at high risk of postpartum psychosis.  A. 29 without mood episodes and B. 41 with mood episodes | A. No medication  B. Lithium monotherapy  (No. 27) | A. No medication (No. 29)  B. - lithium (No. 10)  + lithium (No. 31) | A. 0%  B. - lithium: 40.0%  + lithium 19.4% | A. 13.8 % (No.4) relapsed  No. 20 started lithium postpartum: (no relapse)  B. lithium postpartum  - lithium: 20% relapse  + lithium: 7.7% relapse |
| Viguera, 2007  Bipolar I+II | Prospective observational study | 89 euthymic women.  The study excluded women who discontinued mood stabilizers 6 month before conception | Mood stabilizers  Lithium (No.55)  Anticonvulsants (No.32)  Atypical antipsychotics (No. 2).  Antidepressants (AD) (No. 46) | A. 27 continued mood stabilizers and 18.5% continued with AD.  B. 62 discontinued  mood stabilizers proximate to conception  and 66.1% continued with AD | In total: 71%  A. 37%  B. 85.5% |  |
| Sharma, 2013  Bipolar II | Prospective observational study  from week 24-32 | 37  16 excluded (no data) | Monotherapy 35% (No. 13)  Combination 10.8% (No. 4) | A. 54% discontinued  (No. 20)  B. 46% continued (No. 17) | In total: 51% relapse  A. 40% (No. 8)  B. 64.7% (No. 11) | In total: 70% relapse  A. 90% (No. 18)  B. 47% (No. 8) |