

Thyroid Augmentation in Bipolar Disorder	
<b>When to Use</b>	Treatment-resistant bipolar depression or rapid cycling.
<b>Dosing</b>	Start T3 (liothyronine, Cytomel) 25 mcg QD x 1 week then 50 mcg QD x 1 week. If no response at 50 mcg, raise by 25 mcg every week to max of 150 mcg QD.
<b>Monitoring</b>	Lower dose if resting pulse > 100 bpm or symptoms of hyperthyroidism appear (see side effects). Check baseline thyroid panel to verify patient is not hypothyroid. Expect a low TSH on follow-up labs, but dosing should be guided by symptoms, not labs.
<b>Duration</b>	Continue for at least six months after recovery (many patients need longer to prevent depression).
<b>Side Effects</b>	At high doses: Anxiety, tachycardia, hot sweats, headache, tremor, restlessness.
<b>Risks</b>	Hyperthyroidism can cause decreased bone mineral density and cardiac arrhythmias, but these risks have not been found with thyroid augmentation.

From the Article:  
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