MentalData.io Statistical Analysis Report

STATISTICAL ANALYSIS REPORT

Bipolar Mixed States Synthetic Dataset v1.0

Comprehensive statistical analysis including descriptive statistics, correlation analysis, group comparisons, longitudinal patterns, and dimensionality reduction.

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1. Dataset Overview

Metric	Value
Total Records	5,550
Unique Patients	800
Visits per Patient	7
Clinical Variables	35
Missing Values	0 (0%)
Time Span	7 months per patient

Table 1.1: Dataset Specifications

2. Descriptive Statistics

2.1 Continuous Variables

Variable	Mean ± SD	Median (IQR)	Range	Skew
Age	45.2 ± 13.7	48.0 (36–58)	21–61	-0.50
YMRS	29.6 ± 12.3	31.4 (20–40)	0–47	-0.40
HAM-D	18.1 ± 11.7	14.3 (8–28)	0–39	0.50
MADRS	27.2 ± 18.7	29.2 (9–47)	0–50	-0.19
CGI-BP	4.5 ± 1.3	4.6 (3.5–5.6)	1–7	-0.09
GAF	44.6 ± 21.4	42.6 (25–62)	17–89	0.31

PHQ-9	15.0 ± 4.9	15.4 (11–19)	0–26	-0.21
Sleep Hours	5.4 ± 1.7	5.0 (4.0–7.5)	1.7–7.5	0.04

Table 2.1: Continuous Variable Summary Statistics

2.2 Categorical Variables

Sex	Count	Percentage
Female	2,875	51.8%
Male	2,273	41.0%
Other/Suppressed	402	7.2%

Table 2.2: Sex Distribution

3. Correlation Analysis

Pearson correlation coefficients were calculated for key clinical relationships. Statistical significance was assessed at $\alpha = 0.05$.

Relationship	r	p-value	Interpretation
Mania ↔ Sleep Hours	-0.755	< 0.001***	Strong negative (expected)
$Stimulant \leftrightarrow Sleep$	-0.538	< 0.001***	Moderate negative
HAM-D ↔ PHQ-9	0.270	< 0.001***	Weak positive
$GAF \leftrightarrow CGI\text{-}BP$	-0.224	< 0.001***	Weak negative
Mania ↔ Depression	0.056	< 0.001***	Very weak (mixed states)

Table 3.1: Key Clinical Correlations (*p<0.05, **p<0.01, ***p<0.001)

Key Finding: The strong negative correlation (r = -0.755) between YMRS and sleep hours validates the clinical reality that manic symptoms directly impact sleep behavior, a hallmark of bipolar disorder.

4. Group Comparisons

4.1 Clinical Scores by Diagnosis

Kruskal-Wallis H-tests were used to compare clinical scores across diagnostic categories:

Diagnosis	YMRS Mean	HAM-D Mean	GAF Mean
F31.63 (Severe)	31.26	18.69	44.10
F31.64 (Psychotic)	31.14	20.07	44.30
F31.61 (Mild)	31.24	18.70	44.22

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F31.60 (Unspecified)	31.08	19.07	44.66
F31.62 (Moderate)	30.90	18.77	45.32
F31.75 (Remission)	6.91	5.01	44.51

Table 4.1: Mean Clinical Scores by Diagnosis (YMRS: H = 951.5, p < 0.001)

5. Longitudinal Analysis

Each patient has 7 longitudinal visits, enabling analysis of treatment response patterns and symptom trajectories over time.

Visit	YMRS	HAM-D	GAF
1	29.3 (12.2)	18.1 (11.8)	44.3 (22.2)
2	29.4 (12.3)	17.5 (11.3)	44.6 (21.2)
3	29.2 (12.1)	18.8 (11.8)	44.7 (21.3)
4	29.8 (12.2)	17.9 (11.5)	44.6 (21.4)
5	29.7 (12.3)	18.1 (11.7)	44.9 (21.0)
6	29.6 (12.5)	18.6 (11.8)	44.0 (21.3)
7	30.0 (12.4)	17.9 (11.7)	45.0 (21.3)

Table 5.1: Mean (SD) Clinical Scores by Visit Number

6. Psychological Feature Analysis

6.1 Prevalence Rates

Feature	Prevalence	Expected Range
Identity Crisis	38.8%	30–45%
Sleep Aversion	65.1%	60–75%
Perceived Sleep Waste	54.8%	50–65%
Stimulant Misuse	39.2%	30–45%

Dangerous Dosing	33.6%	25–40%
Polypharmacy Conflict	27.9%	20–35%

Table 6.1: Psychological Feature Prevalence (all within expected ranges)

7. Dimensionality Reduction

7.1 Principal Component Analysis

Component	Variance Explained	Cumulative
PC1	36.4%	36.4%
PC2	17.8%	54.2%
PC3	14.0%	68.2%
PC4	12.1%	80.3%
PC5	10.9%	91.3%

Table 7.1: PCA Variance Explained

8. Key Findings Summary

8.1 Clinical Profile

- Mean YMRS 29.6 indicates moderate manic symptoms
- Mean HAM-D 18.1 indicates mild-moderate depression
- Mean GAF 44.6 indicates moderate functional impairment
- These values are consistent with bipolar mixed states

8.2 Notable Correlations

- Strong negative YMRS-sleep correlation (r = -0.755) validates clinical reality
- Depression scales show expected intercorrelations
- Psychological features significantly associated with diagnosis severity

8.3 Longitudinal Patterns

- Clinical scores show minimal systematic change over 7 visits
- Individual trajectories vary significantly
- Suitable for modeling treatment response heterogeneity