Bipolar disorder

Overview

Bipolar disorder, formerly called manic depression, is a mental health condition that causes extreme mood swings. These include emotional highs, also known as mania or hypomania, and lows, also known as depression. Hypomania is less extreme than mania.

When you become depressed, you may feel sad or hopeless and lose interest or pleasure in most activities. When your mood shifts to mania or hypomania, you may feel very excited and happy (euphoric), full of energy or unusually irritable. These mood swings can affect sleep, energy, activity, judgment, behavior and the ability to think clearly.

Episodes of mood swings from depression to mania may occur rarely or multiple times a year. Each bout usually lasts several days. Between episodes, some people have long periods of emotional stability. Others may frequently have mood swings from depression to mania or both depression and mania at the same time.

Although bipolar disorder is a lifelong condition, you can manage your mood swings and other symptoms by following a treatment plan. In most cases, healthcare professionals use medicines and talk therapy, also known as psychotherapy, to treat bipolar disorder.

Symptoms

There are several types of bipolar and related disorders:

- **Bipolar I disorder.** You've had at least one manic episode that may come before or after hypomanic or major depressive episodes. In some cases, mania may cause a break from reality. This is called psychosis.
- **Bipolar II disorder.** You've had at least one major depressive episode and at least one hypomanic episode. But you've never had a manic episode.
- **Cyclothymia.** You've had at least two years or one year in children and teenagers of many periods of hypomania symptoms and periods of depressive symptoms. These symptoms are less severe than major depression.
- Other types. These types include bipolar and related disorders caused by certain drugs or alcohol, or due to a medical condition, such as Cushing's disease, multiple sclerosis or stroke.

These types may include mania, or hypomania, which is less extreme than mania, and depression. Symptoms can cause changes in mood and behavior that can't be predicted. This can lead to a lot of distress and cause you to have a hard time in life.

Bipolar II disorder is not a milder form of bipolar I disorder. It's a separate diagnosis. While the manic episodes of bipolar I disorder can be severe and dangerous, people with bipolar II disorder can be depressed for longer periods of time.

Bipolar disorder can start at any age, but usually it's diagnosed in the teenage years or early 20s. Symptoms can differ from person to person, and symptoms may vary over time.

Mania and hypomania

Mania and hypomania are different, but they have the same symptoms. Mania is more severe than hypomania. It causes more noticeable problems at work, school and social activities, as well as getting along with others. Mania also may cause a break from reality, known as psychosis. You many need to stay in a hospital for treatment.

Manic and hypomanic episodes include three or more of these symptoms:

- Being much more active, energetic or agitated than usual.
- Feeling a distorted sense of well-being or too self-confident.
- Needing much less sleep than usual.
- Being unusually talkative and talking fast.
- Having racing thoughts or jumping quickly from one topic to another.
- Being easy to distract.
- Making poor decisions. For example, you may go on buying sprees, take sexual risks or make foolish investments.

Major depressive episode

A major depressive episode includes symptoms that are severe enough to cause you to have a hard time doing day-to-day activities. These activities include going to work or school, as well as taking part in social activities and getting along with others.

An episode includes five or more of these symptoms:

- Having a depressed mood. You may feel sad, empty, hopeless or tearful.
 Children and teens who are depressed can seem irritable, angry or hostile.
- Having a marked loss of interest or feeling no pleasure in all or most activities.
- Losing a lot of weight when not dieting or overeating and gaining weight. When children don't gain weight as expected, this can be a sign of depression.
- Sleeping too little or too much.
- Feeling restless or acting slower than usual.

- Being very tired or losing energy.
- Feeling worthless, feeling too guilty or feeling guilty when it's not necessary.
- Having a hard time thinking or concentrating, or not being able to make decisions.
- Thinking about, planning or attempting suicide.

Other features of bipolar disorder

Symptoms of bipolar disorders, including depressive episodes, may include other features, such as:

- **Anxious distress,** when you're feeling symptoms of anxiety and fear that you're losing control.
- Melancholy, when you feel very sad and have a deep loss of pleasure.
- **Psychosis,** when your thoughts or emotions disconnect from reality.

The timing of symptoms may be described as:

- **Mixed,** when you have symptoms of depression and mania or hypomania at the same time.
- **Rapid cycling,** when you have four mood episodes in the past year where you switch between mania and hypomania and major depression.

Also, bipolar symptoms may happen when you're pregnant. Or symptoms can change with the seasons.

Symptoms in children and teens

Symptoms of bipolar disorder can be hard to identify in children and teens. It's often hard to tell whether these symptoms are the usual ups and downs or due to stress or trauma, or if they're signs of a mental health problem other than bipolar disorder.

Children and teens may have distinct major depressive or manic or hypomanic episodes. But the pattern can vary from adults with bipolar disorder. Moods can shift fast during episodes. Some children may have periods without mood symptoms between episodes.

The most noticeable signs of bipolar disorder in children and teenagers may be severe mood swings that aren't like their usual mood swings.

When to see a doctor

Despite their mood extremes, people with bipolar disorder often don't know how much being emotionally unstable disrupts their lives and the lives of their loved ones. As a result, they don't get the treatment they need.

If you're like some people with bipolar disorder, you may enjoy the feelings of euphoria and cycles of being more productive. But an emotional crash always follows this euphoria. This crash can leave you depressed and worn out. It could cause you to have problems getting along with others. It also could leave you in financial or legal trouble.

If you have any symptoms of depression or mania, see your healthcare or mental health professional. Bipolar disorder doesn't get better on its own. A mental health professional with experience in bipolar disorder can help you get your symptoms under control.

Causes

While it's not known what causes bipolar disorder, these factors may be involved:

- **Biological differences.** People with bipolar disorder appear to have physical changes in their brains. The importance of these changes is still uncertain, but more research may help identify why these changes happen.
- **Genetics.** Bipolar disorder is more common in people who have a first-degree relative, such as a sibling or parent, with the condition. Researchers are trying to find genes that may cause bipolar disorder.

Risk factors

Factors that may raise the risk of getting bipolar disorder or cause the first episode include:

- Having a first-degree relative, such as a parent or sibling, with bipolar disorder.
- Periods of high stress, such as the death of a loved one or another traumatic event.
- Drug or alcohol misuse.

Complications

Left untreated, bipolar disorder can lead to serious problems that affect every area of your life, including:

- Problems related to drug and alcohol misuse.
- Suicide or suicide attempts.
- Legal or financial problems.
- Trouble getting along with others.

• Poor work or school performance.

Conditions that occur at the same time

Sometimes what seems to be bipolar disorder might really be another disorder. Or, the symptoms of bipolar disorder might overlap with other disorders, and you also may have another health condition that needs to be treated along with bipolar disorder. Some conditions can make bipolar disorder symptoms worse or make treatment less successful.

Examples include:

- · Anxiety disorders.
- Eating disorders.
- Attention-deficit/hyperactivity disorder (ADHD).
- Post-traumatic stress disorder (PTSD).
- Alcohol or drug misuse.
- Borderline personality traits or disorders.
- Physical health problems, such as heart disease, thyroid issues, headaches or obesity.

Prevention

There's no sure way to prevent bipolar disorder. But getting treated as soon as you notice a mental health disorder can help stop bipolar disorder or other mental health conditions from getting worse.

If you've been diagnosed with bipolar disorder, here are some ways you can stop minor symptoms from becoming full-blown episodes of mania or depression:

- Pay attention to warning signs. Talking with your care team about symptoms
 early on can stop episodes from getting worse. You may have found a pattern to
 your bipolar episodes and what causes them. Call your healthcare professional
 or mental health professional if you feel you're starting to have an episode of
 depression or mania. Ask your family members or friends to watch for warning
 signs.
- Get enough sleep. Sleep disruptions often cause bipolar instability.
- Stay away from drugs and alcohol. Drinking alcohol or taking street drugs can make your symptoms worse and make them more likely to come back.

• Take your medicines as directed. You may be tempted to stop treatment, but don't. Stopping your medicine or lowering your dose on your own may cause withdrawal effects. Also, your symptoms may get worse or return.

Diagnosis

To find out if you have bipolar disorder, your evaluation may include:

- **Physical exam.** Your healthcare professional may do a physical exam and lab tests to find any medical problems that could be causing your symptoms.
- Mental health assessment. Your healthcare professional may refer you to a
 psychiatrist, who will talk to you about your thoughts, feelings and behavior
 patterns. You also may answer a series of questions. With your permission,
 family members or close friends may be asked to provide information about your
 symptoms.
- **Mood charting.** You may be asked to keep a daily record of your moods, sleep patterns or other factors that could help make the right diagnosis and get you the right treatment.

Treatment

Treatment is best guided by a medical doctor who diagnoses and treats mental health conditions (psychiatrist) who is skilled in treating bipolar and related disorders. Your care team also may include a psychologist, social worker or psychiatric nurse.

Bipolar disorder is a lifelong condition, with treatment directed to manage symptoms.

Depending on your needs, treatment may include:

- **Medicines.** Often, you'll need to start taking medicines right away to balance your moods.
- Ongoing treatment. You need to take your medicine for the rest of your life even when you feel better. If you don't keep taking your medicine, your symptoms could come back, or minor mood changes could turn into full-blown mania or depression.
- Intensive outpatient programs or a program involving a partial stay in a hospital. These programs provide intensive support and counseling that lasts a few hours per day for several weeks to help you get symptoms under control.
- Treatment for alcohol or drug misuse. If you have problems with alcohol or drugs, you'll also need treatment for this misuse. Without this treatment, it can be very hard to manage bipolar disorder.

• A hospital stay. Your healthcare professional may recommend that you stay in a hospital if you're behaving dangerously or thinking about suicide, or you've become detached from reality. Getting mental health treatment at a hospital can keep you calm and safe and stabilize your mood. This is true whether you're having a manic or major depressive episode.

The main treatments for bipolar disorder include medicines and talk therapy, also known as psychotherapy, to control symptoms. Treatment also may include education and support groups.

Talk therapy

Talk therapy, also called psychotherapy, is a vital part of bipolar disorder treatment. This treatment can be provided in individual, family or group settings.

Several types of therapy may help, including:

- Interpersonal and social rhythm therapy. This therapy focuses on stabilizing daily rhythms, including sleeping, waking and eating. A consistent routine helps manage moods. A daily routine for sleep, diet and exercise may help people with bipolar disorder.
- Cognitive behavioral therapy (CBT). This therapy focuses on identifying
 unhealthy, negative beliefs and behaviors and replacing them with healthy,
 positive beliefs and behaviors. CBT can help find what triggers your bipolar
 episodes. You also learn effective ways to manage stress and cope with
 upsetting situations.
- **Psychoeducation.** Learning about bipolar disorder, also known as psychoeducation, can help you and your loved ones know more about the condition. Knowing what's going on can help you get the best support, find issues, make a plan to stop symptoms from returning and stick with treatment.
- **Family-focused therapy.** Family support and communication can help you stay with your treatment plan. It also can help you and your loved ones see and manage warning signs of mood swings.