

## Childhood Treatment Options for Bipolar Disorder

Bipolar disorder, or manic depression, has in past years only been found in adults, while children with similar symptoms have been mistakenly diagnosed as have attention deficit disorder (ADD), or attention deficit hyperactivity disorder (ADHD). However, in recent years, psychiatrists and pediatricians have found that bipolar disorder definitely rears its ugly head in childhood as often as it does in adolescent or adult years.

Diagnosis of bipolar in childhood increases the chances for bipolar patients to have successful treatment and ordinary, uninhibited lives as adults. However, treatment options of bipolar in childhood is a controversial subject. Many doctors wish to medicate first, and regulate with therapy in addition to medications. However, many parents and some psychologists disagree with these methods.

Overall, many parents discover that once their child has been put on bipolar medications, the child seems to lose some of their personality traits that endear them to the parents. Children, and adults, who have been overly medicated or medicated when not absolutely necessary lose a sense of who they are. Some medications can make children overly despondent, seeming "out of it" or "spacey." This causes concern for parents and doctors, and raises the question of whether or not the child is really better off on medication.

Play therapy can be quite effective in helping children with bipolar disorder live more successful childhoods. This play therapy typically involves placing children in various hypothetical situations in which they must work out a logical and emotionally healthy solution. While play therapy is very successful in some children, it is not enough for others. In certain childhood cases of bipolar disorder, the mood swings and symptoms are so severe that the child is not able to control their actions or emotional reactions to stimuli and situations.

Cognitive behavioral therapy is a fairly new method of therapy for bipolar patients in which the patient learns to recognize symptoms of their illness, triggers for mood swings and inappropriate behavior, and alternatives to inappropriate behavior. Cognitive behavioral therapy also allows the patient to discover what he or she can do to avoid manic or depressive episodes, and how to manage the episodes more effectively. In adults, this treatment option is very viable, and works well both in conjunction with and without medication treatment.

However, cognitive behavioral therapy requires a level of problem solving and

critical thinking that is not often present in childhood. For this reason, it is not commonly used in children with bipolar disorder under a certain age or maturity level. Some believe that the techniques learned through cognitive behavioral therapy could be equally viable in treating childhood bipolar disorder if the exercises and learning could be geared toward children. This, however, could prove difficult.

In the end, treatment options must be discussed with pediatricians, psychiatrists, psychologists, parents, and teachers. Everyone involved in childhood must be involved in the treatment process in order for it to be successful. If a parent or teacher has concerns about the effects of childhood treatment for bipolar disorder in their child or student, those concerns should be expressed immediately so that changes in treatment can be made. Additionally, parents should not be afraid to change doctors if they feel their child is not benefiting from treatment or medication.