BIPOLAR DISORDER

Symptoms

Bipolar disorder involves mood episodes that alternate between major depression and manic or hypomanic episodes.

<u>Manic episode:</u> Episode lasting at least 1 week that involves an abnormally and persistently elevated ("high"), expansive (e.g., exaggerated), or irritable mood most of the day, nearly every day (most of the time). Three or more of the following symptoms must be present:

- Inflated self-esteem or grandiosity (thinking too highly of oneself in unrealistic ways)
- Decreased need for sleep (*not needing* much or any sleep)
- Being more talkative than usual or talking rapidly
- Ideas race from one to the other
- Distractibility
- Increase in goal-directed behavior (starting major projects, taking on too many tasks at once)
- Excessive involvement in activities with a high potential for negative consequences (reckless or dangerous behavior that causes problems for the individual, such as sexual indiscretions, impulsively making major life decisions, excessive spending sprees, etc.).

<u>Hypomanic Episode</u>: Episode last for just a few days, with less severe "manic" symptoms. Some individuals feel quite good and even function well, being more productive than usual, during a hypomanic episode.

Mood symptoms must cause significant impairment in social or occupational functioning *or* must require hospitalization to protect self or others. Symptoms *cannot* be due to substance use or another medication condition.

Types of Bipolar Disorder Presentations

There are 3 types of bipolar disorder, based on the duration and severity of symptoms, as well as whether a depressive episode has ever occurred.

<u>Bipolar 1 Disorder</u>: involves periods of severe changes in mood ranging from manic episodes to depressive episodes.

<u>Bipolar 2 Disorder</u>: involves periods of changes in mood ranging from hypomanic episodes to depressive episodes.

<u>Cyclothymic Disorder</u>: involves periods of change in mood that range from brief periods of mild hypomanic symptoms to mild depressive symptoms; episodes are not as long or as severe as with full hypomanic or full depressive episodes.

Note: It is possible to have "mixed episodes," in which an individual experiences symptoms of mania or hypomania and depression *at the same time*. This might involve having lots of energy, not needing to sleep, but also feeling hopeless and irritable.

Things to Consider

Bipolar disorder is a complicated diagnosis to make. This is because it is not always possible to recognize the cycling nature of moods until we have worked with an individual for an extended period of time. In addition, it is often difficult for an individual to recognize manic and hypomanic symptoms when they are experiencing them, or even in hindsight; most people seek help during depressive episodes, making it even more difficult to recognize manic/hypomanic patterns.

Manic and hypomanic symptoms can also overlap with depressive symptoms. Is someone going on shopping sprees because they are excited about a poorly thought-out business adventure and impulsively spending money before they've made it? Or are they going on a spending spree because they are depressed and looking for brief periods of feeling better via 'retail therapy?'

It takes a detailed, lengthy, discussion to understand the context of symptoms, as the presentation of manic or hypomanic symptoms can also closely resemble anxiety or PTSD. Without detailed medical records of documented symptoms, bipolar disorder can be extremely difficult to diagnose in a brief appointment.

Treatment

There are effective treatments for bipolar disorder. Medication is often required for managing symptoms, but additional improvement can be obtained when therapy is also part of the treatment plan. Therapy can help individuals recognize the early signs of a manic or depressive episode and steps to take to reduce the severity and length of mood episodes. Therapy can also help individuals recognize certain stressors or life habits that tend to trigger mood episodes.

If you struggle with drastic changes in mood that may be related to bipolar disorder, please know that there is hope. If available, talk to your physician, contact your local community mental health clinic, or seek a therapist; if you do not have access to these things, continue seeking information from reliable sources on the internet or via books on Amazon or from your local library.

If you are experiencing suicidal ideations, DIAL 988 (the National Suicide Prevention Lifeline) to call, text, or chat with a trained counselor.