



DISORDER

-2016

Subjects

- ❑ The Definition of Bipolar Disorder.
- ❑ Symptoms of Bipolar Disorder.
- ❑ Types of Bipolar Disorder.
- ❑ Etiology of Bipolar Disorder.
- ❑ Who is at risk?
- ❑ Bipolar Disorder SAD.
- ❑ Prevalence & Epidemiology.
- ❑ Suicide Risk.
- ❑ Treatment of Bipolar Disorder.

Bipolar Disorder

- **Bipolar disorder**, also known as **manic-depressive illness**, is a brain disorder that causes unusual shifts in mood, energy, activity levels, and the ability to carry out day-to-day tasks.

Symptoms

- People with bipolar disorder experience unusually intense emotional states that occur in distinct periods called "**mood episodes**". An overly joyful or overexcited state is called a manic episode, and an extremely sad or hopeless state is called a depressive episode.
- Sometimes, a mood episode includes symptoms of both mania and depression. This is called a **mixed state**.

Symptoms

- In addition to mania and depression, bipolar disorder can cause a range of moods, as shown on the scale.



A person having a hypomanic episode may feel very good, be highly productive, function well, and may not feel that anything is wrong even as family and friends recognize the mood swings. Without proper treatment, however, people with hypomania may develop severe mania or depression.

Symptoms of mania or a manic episode include:

□ **Mood changes**

- A long period of feeling "high," or an overly happy or outgoing mood
- Extremely irritable mood, agitation, feeling "jumpy" or "wired."

Symptoms of depression or a depressive episode include:

□ **Mood changes**

- A long period of feeling worried or empty
- Loss of interest in activities once enjoyed, including sex.

Symptoms of mania or a manic episode include:

Symptoms of depression or a depressive episode include:

□ Behavioral Changes

- Talking very fast, jumping from one idea to another, having racing thoughts
- Being easily distracted
- Increasing goal-directed activities, such as taking on new projects
- Being restless
- Sleeping little
- Having an unrealistic belief in one's abilities
- Behaving impulsively and taking part in a lot of pleasurable, high-risk behaviors, such as spending sprees, impulsive sex, and impulsive business investments.

□ Behavioral Changes

- Feeling tired or "slowed down"
- Having problems concentrating, remembering, and making decisions
- Being restless or irritable
- Changing eating, sleeping, or other habits
- Thinking of death or suicide, or attempting suicide.

Types of Bipolar

- Bipolar disorder usually lasts a lifetime. Episodes of mania and depression typically come back over time. Between episodes, many people with bipolar disorder are free of symptoms, but some people may have lingering symptoms.
- There are four basic types of bipolar disorder.

Types of Bipolar

1. **Bipolar I Disorder** is mainly defined by manic or mixed episodes that last at least seven days, or by manic symptoms that are so severe that the person needs immediate hospital care. Usually, the person also has depressive episodes, typically lasting at least two weeks. The symptoms of mania or depression must be a major change from the person's normal behavior.
2. **Bipolar II Disorder** is defined by a pattern of depressive episodes shifting back and forth with hypomanic episodes, but no full-blown manic or mixed episodes.

Types of Bipolar

- 3. Bipolar Disorder Not Otherwise Specified (BP-NOS)** is diagnosed when a person has symptoms of the illness that do not meet diagnostic criteria for either bipolar I or II. The symptoms may not last long enough, or the person may have too few symptoms, to be diagnosed with bipolar I or II. However, the symptoms are clearly out of the person's normal range of behavior.
- 4. Cyclothymic Disorder, or Cyclothymia,** is a mild form of bipolar disorder. People who have cyclothymia have episodes of hypomania that shift back and forth with mild depression for at least two years.

Etiology for Bipolar Disorder

- Scientists are learning about the possible **causes** of bipolar disorder.
- **The Brain and Bipolar Disorder**
 - Experts believe bipolar disorder is partly caused by an underlying problem with the balance of brain chemicals called neurotransmitters.

Etiology for Bipolar Disorder

□ **Genetics**

- Bipolar disorder tends to run in families. Children with a parent or sibling who has bipolar disorder are four to six times more likely to develop the illness, compared with children who do not have a family history of bipolar disorder.
- Studies of identical twins have shown that the twin of a person with bipolar illness does not always develop the disorder. The study results suggest factors besides genes are also at work.
- It is likely that many different genes and a person's environment are involved.

Who Is At Risk?

- Bipolar disorder often develops in a person's late teens or early adult years. At least half of all cases start before age 25.
- Some people have their first symptoms during childhood, while others may develop symptoms late in life.

Seasonal Affective Disorder (SAD)

- Vulnerable to changes in sunlight, especially **Fall and Spring**
 - Prevalence rates of 4-6%, found more often in northern latitudes
 - Many **SAD** symptoms opposite of those found in major depression – increase in appetite, weight gain, more sleep

Prevalence

- No data on the prevalence of preadolescent bipolar disorder.
- Lifetime prevalence among 14 to 18 year olds, 1%
 - ▣ Subsyndromal symptoms, 5.7%
- Mean age of onset, 10 to 12 years.
- First episode usually depression.

Epidemiology

- Bipolar disorder affects men and women equally, as well as all races, ethnic groups, and socioeconomic classes.
- Bipolar disorder often develops in a person's late teens or early adult years. At least half of all cases start before age 25.
- However, some people have their first symptoms during childhood, while others may develop symptoms later in life.

Suicide Risk

- The prevalence rates of attempted suicide in bipolar II and bipolar I disorder appear to be similar (32.4% and 36.3%).
- However, the lethality of attempts, may be higher in individuals with bipolar II disorder compared with bipolar I disorder.

Treatments

□ Medications

- **Mood stabilizing** medications are usually the first choice to treat bipolar disorder.
 - Lithium, Depakote
- **Atypical antipsychotic** medications are called "atypical" to set them apart from earlier medications, which are called "conventional" or "first-generation" antipsychotics.
 - Zyprexa, Abilify, Seroquel, Risperdal, Geodon
- **Antidepressant** medications
 - Prozac, Paxil, Zoloft, Wellbutrin

Treatments

□ **Psychotherapy**

- In addition to medication, psychotherapy, or "talk" therapy, can be an effective treatment for bipolar disorder. It can provide support, education, and guidance to people with bipolar disorder and their families.

- Cognitive behavioral therapy (CBT)

- Family-focused therapy

- Psychoeducation

Treatments

- **Electroconvulsive Therapy (ECT)**

- For cases in which medication and/or psychotherapy does not work, electroconvulsive therapy (ECT) may be useful.