

Facts

Bipolar disorder is a serious mental illness. People who have it go through unusual mood changes. They go from very happy, “up,” and active to very sad and hopeless, “down,” and inactive, and then back again. They often have normal moods in between. The up feeling is called mania. The down feeling is depression.

Bipolar disorder often starts in a person’s late teen or early adult years, but children and adults can have bipolar disorder too. The illness usually lasts a lifetime.

If not treated, bipolar disorder can lead to damaged relationships, poor job or school performance, and even suicide. However, there are effective treatments to control symptoms: medicine and talk therapy. A combination usually works best.

Bipolar disorder usually begins in late adolescence or early adulthood. Although the disorder has been diagnosed in children younger than 12, it is not common. It is easily confused with attention deficit/hyperactivity disorder, so careful diagnosis is necessary.

About 2.8% of the population have bipolar disorder. Men and women are equally likely to develop this illness.

Signs & Symptoms

People with bipolar disorder experience periods of unusually intense emotion, changes in sleep patterns and activity levels, and unusual behaviors. These distinct periods are called “mood episodes.” Mood episodes are drastically different from the moods and behaviors that are typical for the person. Extreme changes in energy, activity, and sleep go along with mood episodes.

Signs and symptoms of **MANIA** include:

- Increased energy, activity, restlessness, racing thoughts, and rapid talking
- Unrealistic beliefs in one’s abilities and powers, grandiose delusions, invincibility
- Feeling very “up,” “high” or elated, a sensation of total happiness that nothing can change
- Extreme irritability and distractibility, particularly when grandiose plans are thwarted
- Sleep troubles
- Uncharacteristically poor judgment and risky behavior, such as reckless driving, spending sprees

Signs and symptoms of **DEPRESSION** include:

- Persistent sad, anxious or empty mood
- Feelings of hopelessness or pessimism
- Feelings of guilt, worthlessness, or helplessness

- Loss of interest or pleasure in ordinary activities that were once enjoyed, including sex
- Decreased energy, a feeling of fatigue and/or being “slowed down”
- Difficulty concentrating, remembering, making decisions
- Restlessness or irritability
- Sleep disturbances, sleeping too much or not at all
- Loss of appetite and weight, or weight gain
- Chronic pain or other bodily symptoms not caused by physical disease
- Thoughts of death or suicide; suicide attempts

Causes

There is no single, proven cause of bipolar disorder. Most agree that there is no single cause.

The causes of bipolar disorder aren’t always clear. It runs in families. Abnormal brain structure and function may also play a role.

Researchers are hopeful that identification of susceptibility genes for bipolar disorder and learning more about the differences in brain structure will make it possible to predict which types of treatment will work most effectively.

Treatment

Bipolar disorder is one of the most treatable psychiatric disorders. Even though an episode may stop on its own due to the cyclic nature of the illness, treatment to achieve and maintain a balanced state is extremely important. Proper diagnosis and treatment help people with bipolar disorder lead healthy and productive lives. Talking with a health care provider or other licensed mental health professional is the first step for anyone who thinks he or she may have bipolar disorder. The health care provider can complete a physical exam to rule out other conditions. If the problems are not caused by other illnesses, the health care provider may conduct a mental health evaluation or provide a referral to a trained mental health professional, such as a psychiatrist, who is experienced in diagnosing and treating bipolar disorder.

Treatment includes:

- **Medication** — prescribed for nearly all people with the disorder.
- **Education** — crucial in helping people and families learn how to best manage bipolar disorder and prevent

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its complications.

- **Psychotherapy** — helpful for many individuals and families in solving problems and dealing with stress; should not be used alone, but rather be combined with medication.

Four types of psychotherapy are particularly useful for depression and may also help during recovery:

- **Behavioral** therapy — focuses on behaviors that can increase or decrease stress and on ways to increase pleasurable experiences that may help improve depressive symptoms.
- **Cognitive** therapy — focuses on identifying and changing the pessimistic thoughts and beliefs that can lead to depression.
- **Interpersonal and social rhythm** therapy — focuses on reducing the strain a mood disorder may place on relationships. Both individual and group sessions are beneficial.
- **Psychoeducation** — an evidence-based therapeutic intervention for people and their loved ones that provides information and support to better understand and cope with illness.

Helping Yourself

If you are diagnosed with bipolar disorder, it is important to understand that the disorder will not go away, and that continued acceptance of treatment is needed to keep the disease under control. Because of the long-term nature of the disorder, it will help if you and your family learn as much as possible about the disorder and its treatment.

You can help reduce the minor mood swings and stresses that sometimes lead to more severe episodes by:

- Maintaining a stable sleep pattern. Inconsistent sleep patterns appear to cause chemical changes in the body that trigger mood episodes.
- Maintaining a regular pattern of activity.
- Being careful of everyday use of small amounts of alcohol, caffeine, and some over-the-counter medications for colds, allergies, or pain. Even small amounts of these can interfere with sleep, mood, or your medicine.

Learning to recognize the early warning signs of a new mood episode is another important way to help yourself. Each person begins to recognize the inner feelings that indicate when a mood change is coming. Minor changes in mood, sleep, energy, self-esteem, sexual interest, concentration, willingness to take on new projects, thoughts of death (or sudden optimism), and even changes in dress and grooming may be early warnings of an upcoming high or low. Pay special attention to a marked change in your sleeping pattern, as this is a common clue that trouble is brewing. Don't hesitate to ask your family to watch for early warnings that you may be missing.

In addition, support groups can be an invaluable part of treatment. These groups provide acceptance, understanding, self-discovery, and strategies for coping with the illness.

Helping Someone Else

People with bipolar disorder often need help to get help. It is not uncommon for people with bipolar disorder to be unaware of how impaired they are, deny that there is a problem, or blame their problems on a cause other than mental illness. These individuals need strong encouragement from family and friends to seek treatment. Family physicians can play an important role for such referral. If this does not work, loved ones must take the person for a proper mental health evaluation and treatment.

If the person is in the midst of a severe episode, he or she may have to be committed to a hospital for his or her protection and much needed treatment. If the person becomes ill with a mood swing and suddenly views your concern as interference, remember that this is not a rejection of you, it is the illness talking.

Learn the warning signs of suicide, and take any threats the person makes very seriously. Encourage the person to realize that suicidal thinking is a symptom of the illness. Always stress that the person's life is important to you and to others. Anyone who is considering suicide needs immediate attention, preferably from a mental health professional or physician.

Ongoing encouragement and support are needed after the person gets treatment, because it may take some time to discover what form of therapy and medication is best for the individual. If you are a family member or friend, inform yourself about the person's illness, its causes and its treatments. If possible, talk to the person's doctor. Learn the warning signs for how that person acts when he or she is getting manic or depressed. Try to plan, while the person is well, for how you should respond when you see these symptoms.

Sources:

*National Institute of Mental Health
American Psychiatric Association
National Depressive and Manic-Depressive Association*

For more information contact

Northern Lakes Community Mental Health Authority
1-800-337-8598
(231) 922-4850

National Alliance on Mental Illness, www.nami.org, (800) 950-6264

National Institute of Mental Health
www.nimh.nih.gov
(800) 421-4211 (depression info)
(888) 826-9438 (anxiety info)
(301) 443-4513 (other info)

Mental Health America, www.nmha.org, (800) 969-6642

The Center for Mental Health Services
www.mentalhealth.org/cmhs/