

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.

Bipolar disorder often develops in a person's late teens or early adult years. At least half of all cases start before age 25.¹ Some people have their first symptoms during childhood, while others may develop symptoms late in life.

Bipolar disorder is not easy to spot when it starts. The symptoms may seem like separate problems, not recognized as parts of a larger problem. Some people suffer for years before they are properly diagnosed and treated. Like diabetes or heart disease, bipolar disorder is a long-term illness that must be carefully managed throughout a person's life.

Causes

The exact cause of bipolar disorder is unknown, but several factors seem to be involved in causing and triggering bipolar episodes:

- **Biological differences.** People with bipolar disorder appear to have physical changes in their brains. The significance of these changes is still uncertain but may eventually help pinpoint causes.
- **Neurotransmitters.** An imbalance in naturally occurring brain chemicals called neurotransmitters seems to play a significant role in bipolar disorder and other mood disorders.
- **Hormones.** Imbalanced hormones may be involved in causing or triggering bipolar disorder.
- **Inherited traits.** Bipolar disorder is more common in people who have a blood relative (such as a sibling or parent) with the condition. Researchers are trying to find genes that may be involved in causing bipolar disorder.
- **Environment.** Stress, abuse, significant loss or other traumatic experiences may play a role in bipolar disorder.

Factors that may increase the risk of developing bipolar disorder include:

Having blood relatives such as a parent or sibling with bipolar disorder

Periods of high stress

Drug or alcohol abuse

Major life changes, such as the death of a loved one

Being in your early 20s

Manifestations

Bipolar is a complex illness. There are many different symptoms -- and several different types -- of bipolar disorder. The primary symptoms of the disorder are dramatic and unpredictable mood swings. The various types of bipolar disorder range from mild to severe.

Symptoms

Bipolar Symptoms

The primary symptoms of bipolar disorder are dramatic and unpredictable mood swings.

Mania Symptoms

Mania symptoms may include excessive happiness, excitement, irritability, restlessness, increased energy, less need for sleep, racing thoughts, high sex drive, and a tendency to make grand and unattainable plans.

Depression Symptoms

Depression symptoms may include sadness, anxiety, irritability, loss of energy, uncontrollable crying, change in appetite causing weight loss or gain, increased need for sleep, difficulty making decisions, and thoughts of death or suicide.

Bipolar types and their manifestations

There are several types of bipolar disorder; all involve episodes of depression and mania to a degree. They include bipolar I, bipolar II, cyclothymic disorder, mixed bipolar, and rapid-cycling bipolar disorder.

Bipolar I

A person affected by bipolar I disorder has had at least one manic episode in his or her life. A manic episode is a period of abnormally elevated mood, accompanied by abnormal behavior that disrupts life.

Bipolar II

Bipolar II is similar to bipolar I disorder, with moods cycling between high and low over time. However, in bipolar II disorder, the "up" moods never reach full-on mania.

Rapid Cycling

In rapid cycling, a person with bipolar disorder experiences four or more episodes of mania or depression in one year. About 10% to 20% of people with bipolar disorder have rapid cycling.

Mixed Bipolar

In most forms of bipolar disorder, moods alternate between elevated and depressed over time. But with mixed bipolar disorder, a person experiences both mania and depression simultaneously or in rapid sequence.

Cyclothymia

Cyclothymia (cyclothymic disorder) is a relatively mild mood disorder. People with cyclothymic disorder have milder symptoms than in full-blown bipolar disorder.

Treatment /Management

Bipolar disorder can be treated with medication, therapy, and lifestyle changes, but sticking with treatment can be a challenge.

The following are some important ways of treating and managing Bipolar Disorder:

- Don't skip medications.
"[Medications] can help you live a much more normal life if you choose to take them," says Cara Hoepner, a nurse practitioner who also has bipolar disorder. But it isn't necessarily easy. Lithium is a commonly used drug, but it requires monitoring with blood tests to make sure

the dose is correct, as higher levels can be toxic. And skipping doses of lithium or any drug due to side effects or other reasons can precipitate a relapse. There are ways to deal with side effects; some are even transient, lasting for only a week or two.

- Get the right amount of sleep.
People with bipolar disorder often have problems sleeping. About 25% of them sleep too much at night or take long naps, and about one-third have insomnia even when they aren't having an episode.
Irregular sleep patterns can precipitate a manic or depressive episode.
Set an alarm and get up at the same time every day. Even if you don't have to get up for work, try to schedule regular morning activities such as walking or exercising with a friend (because exercise is important too).
- Use therapy too.
Therapy is really important. Some patients, if their mood is stabilized, see a psychiatrist only every month or two. But a psychiatrist recommends more regular therapy, typically cognitive behavioral therapy, which can help people get on a good schedule and understand and interpret events and thoughts.
Interpersonal therapy, which can be helpful in maintaining stable friendships, relationships, and family interaction—often a problem with people who are bipolar, is also vital in managing the disorder.
- Connect with others.
Try to strike a balance in your social life. Overstimulation can be stressful and trigger problems, but so can isolation.
"People who are bipolar tend to have trouble maintaining relationships; they wear friendships out," Hoepner says.
Aim for things that make you feel good: a hobby or sport, or volunteer for a cause that's important to you. "You're getting your mind off of yourself and focusing it on something else, which can be really therapeutic," Hoepner explains.
- Be wary of triggers.
Stress, social isolation, sleep deprivation, and deviation from your normal routine can trigger episodes of depression or mania. Be cautious during life changes like starting a new job, going to college, or getting a divorce.
Also be aware that you can encounter problems even when it's not a major event. "It doesn't have to be a fight or a major disruption in your day," Hoepner says. "Anytime you are out of balance, it can be a trigger."
- Find Support.
Let your family and friends know what you are going through. They might be able to understand your triggers and help you avoid them, or may be able to realize before you do that you're entering a manic or depressive episode.
On the other hand, family stress is also one of the biggest factors for relapse.
If you need more support, seek help from organizations like the Depression and Bipolar Support Alliance and the National Alliance on Mental Illness.
- Steer clear of drugs and alcohol
About 50% of bipolar patients have a problem with substance abuse. This is one of the biggest challenges to getting good treatment outcomes.

Although you might feel alcohol helps you cope with depression, it may actually be contributing to sleep disturbances and mood changes.

Patients who abuse drugs and alcohol have poor cognitive functioning and a lower chance for a full recovery of mood symptoms.

- Combat weight gain.

Many of the medications used to treat bipolar disorder, including lithium and antipsychotics, can trigger metabolic syndrome or weight gain in some patients.

It is recommended that keeping track of one's weight and talking with one's doctor if the one notices a problem after starting a new drug.

The impact is very individualized; some people don't have this problem while others do. Eating right and getting regular exercise can help control your weight.

- Have a "don't give up" attitude.

Doctors will often have the patient try different doses and combinations of bipolar meds to find the right cocktail suited for him/her.

If side effects are intolerable or a drug isn't working, discuss options; don't just stop taking the medication.

People often think that the doctor knows best and they shouldn't question their treatment. But be a wise consumer and take charge of your health. Ask questions and know what symptoms a drug is supposed to be helping so you will know if it's working.

Sample conversation

Sally, a 24 year old female with Bipolar disorder starts to unbutton her shirt in front of her therapist...

Therapist: Sally, it is not okay to unbutton your shirt and show your breasts. Everyone here respects the privacy of everyone else. We keep our bodies covered, our shirts buttoned, and our zippers zipped.

Sally: But he shwa shu sha sshi...ssss breastsss zwah zhoo to you... (sally mumbles and speaks too fast)

Therapist: I hear you are speaking, but the words are mumbled and spoken too fast for me to understand.

Please repeat what you just said, but speak slowly and distinctly.

Sally: But he showed and came into my room and ...told me to show you my breasts.

Therapist: When you say, 'He came into my room,' I am not sure whom you mean. Please tell me the name of the person who came into your room.

Sally: Pete, the nurse came to my room...

Therapist: What happened then?

Sally: He gave me a pill.

Therapist: This makes me feel puzzled and confused. You said "He came into my room and told you to show me your breasts". So was this before Pete gave you the pill?

Sally didn't answer the question, and started to move closer to the therapist...

Therapist: Sally, you're sitting too close to me. Please stand back two feet.

Then Sally starts to stand and pace around mumbling again...

Therapist: Nurse Mary, Sally needs some quiet time now. Let's leave her alone and go to the activity room. We need to set up the tables for the art therapy class.