What is Bipolar disorder

- is an episodic, potentially life-long, disabling disorder that can be difficult to diagnose
- Need to improve recognition, reduce sub-optimal care and improve long-term outcomes
- There is variation in management of care across healthcare settings
How it is diagnosed

- Bipolar disorder is a cyclical mood disorder
- Abnormally elevated mood or irritability alternates with depressed mood
  - bipolar I – at least one manic or mixed episode
  - bipolar II – at least one major depressive episode and at least one hypomanic episode
Bipolar Disorder

**Bipolar I**
- Alternation of full manic and depressive episodes
- Average onset is 18 years
- Tends to be chronic
- High risk for suicide

**Bipolar II**
- Alternation of Major Depression with hypomania
- Average onset is 22 years
- Tends to be chronic
- 10% progress to full bipolar I disorder
Causes of Bipolar Disorder

- Genetics
- Environment
- Brain structure and functioning
- Stressful Life Events
- Cognitive Styles as Vulnerabilities
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.
Signs & Symptoms

- Mood Swings
- Euphoria
- Rapid Speech
- Racing thought
- Irritability
- Increased physical activity
- Careless use of drugs/alcohol
- Decreased need for sleep
- Missed work
- Fatigue
- Chronic pain with no known cause
- Sadness/Hopelessness
- Suicidal thoughts
Look for key features

<table>
<thead>
<tr>
<th>Presentation</th>
<th>Key features</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mania</td>
<td>Elevated, expansive or irritable mood</td>
</tr>
<tr>
<td></td>
<td>With or without psychotic symptoms</td>
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<tr>
<td></td>
<td>Marked impairment in functioning</td>
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<tr>
<td>Hypomania</td>
<td>Elevated, expansive or irritable mood</td>
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<tr>
<td></td>
<td>No psychotic symptoms</td>
</tr>
<tr>
<td></td>
<td>Less impairment of functioning</td>
</tr>
<tr>
<td>Depression</td>
<td>Mild, moderate or severe</td>
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<td></td>
<td>With or without psychotic symptoms</td>
</tr>
<tr>
<td>Rapid cycling</td>
<td>At least four episodes in 1 year</td>
</tr>
<tr>
<td>Mixed states</td>
<td>Manic and depressive features present during same episode</td>
</tr>
</tbody>
</table>
Statistics

- Bipolar disorder affects approximately 5.7 million American adults, or about 2.6 percent of the U.S. population age 18 and older in a given year.
- The median age of onset for bipolar disorders is 25 years for women
- Men have an earlier onset
- Bi polar is more common among women than men
- Bi Polar Disorder increases suicide risk by 15X more than that of the general population
- Bipolar is an equal opportunity disorder, affecting people of all races, ethnic groups and socio-economic backgrounds.
Statistics

- women are 3 times more likely than men to experience rapid cycling.
- women may have more depressive episodes and more mixed episodes than men.
- 70% of bipolar patients had been misdiagnosed more than 3 times before receiving their correct diagnosis.
- Only 1 person in 4 receives an accurate diagnosis in less than 3 years.
- the disorder results in 9.2 years reduction in expected life span.
- up to 1 in 5 bipolar people completes suicide.
Bipolar Disorder: Social and Cultural Factors

- Stressful life events
- Social support (marital relationship) (see chart)
- Gender
- Culture (see chart)
5 Myths and Facts About Bipolar Disorder

**Myth #1:**
- People with Bipolar Disorder can't get better and have a normal life.

**Fact:**
- Many people with Bipolar Disorder have successful careers, happy family life, and satisfying relationships.
5 Myths and Facts About Suicide

Myth #2: People with Bipolar Disorder swing back and forth between mania and depression.

Fact: People with Bipolar Disorder can go for long stretches without any symptoms.
5 Myths and Facts About Suicide

Myth # 3:
• Bipolar Disorder only affects moods.

Fact:
Bipolar disorder can affect energy levels, memory, judgment, concentration, appetite, sleep patterns, sex drive, and self esteem.
5 Myths and Facts About Suicide

Myth # 4: People with Bipolar Disorder or are dangerous.

Fact:
Research shows that people with mental illness do not commit significantly more violent acts than people in the general population. People with mental illness are twice as likely to be victims of violence.
5 Myths and Facts About Suicide

Myths # 5:
- Very Few People Actually Have Bipolar Disorder

Fact:
- almost 6 million Americans are affected each year by bipolar disorder
Treatment

- Cognitive-Behavioral Treatment Therapy
- Medications
- Diet
- Developing Coping skills through support groups or individual therapy
- social rhythm therapy
- Family-focused therapy
Education

- Offer emotional support, understanding, patience, and encouragement
- Learn about bipolar disorder so you can understand what your friend or relative is experiencing
- Talk to your friend or relative and listen carefully
- Listen to feelings your friend or relative expresses and be understanding about situations that may trigger bipolar symptoms
Education continued

• Invite your friend or relative out for positive distractions, such as walks, outings, and other activities.

• Remind your friend or relative that, with time and treatment, he or she can get better.

• Never ignore comments from your friend or relative about harming himself or herself. Always report such comments to his or her therapist or doctor.
References

Questions??????