

Bipolar disorder is a chronic mental illness that causes dramatic shifts in a person's mood, energy and ability to think clearly. People with bipolar disorder have high and low moods, known as mania and depression, which differ from the typical ups and downs most people experience. If left untreated, the symptoms usually get worse. However, with a strong lifestyle that includes self-management and a good treatment plan, many people live well with the condition.

Although bipolar disorder can occur at any point in life, the average age of onset is 25. Every year, 2.9% of the U.S. population is diagnosed with bipolar disorder, with nearly 83% of cases being classified as severe. Bipolar disorder affects men and women equally.

Symptoms

A person with bipolar disorder may have distinct manic or depressed states. Severe bipolar episodes of mania or depression may also include psychotic symptoms such as hallucinations or delusions. Usually, these psychotic symptoms mirror a person's extreme mood.

Mania. To be diagnosed with bipolar disorder, a person must have experienced mania or hypomania. Hypomania is a milder form of mania that doesn't include psychotic episodes. People with hypomania can often function normally in social situations or at work. Some people with bipolar disorder will have episodes of mania or hypomania many times; others may experience them only rarely.

Although someone with bipolar may find an elevated mood very appealing—especially if it occurs after depression—the “high” does not stop at a comfortable or controllable level. Moods can rapidly become more irritable, behavior more unpredictable and judgment more impaired. During periods of mania, people frequently behave impulsively, make reckless decisions and take unusual risks. Most of the time, people in manic states are unaware of the negative consequences of their actions.

Depression. Depression produces a combination of physical and emotional symptoms that inhibit a person's ability to function nearly every day for a period of at least two weeks. The level of depression can range from severe to moderate to mild low mood, which is called dysthymia when it is chronic.

Causes

Scientists have not discovered a single cause of bipolar disorder. They believe several factors may contribute:

- **Genetics.** The chances of developing bipolar disorder are increased if a child's parents or siblings have the disorder. But the role of genetics is not absolute.
- **Stress.** A stressful event such as a death in the family, an illness, a difficult relationship or financial problems can trigger the first bipolar episode. In some cases, drug abuse can trigger bipolar disorder.

- **Brain Structure.** Brain scans cannot diagnose bipolar disorder in an individual. However, researchers have identified subtle differences in the average size or activation of some brain structures in people with bipolar disorder. While brain structure alone may not cause it, there are some conditions in which damaged brain tissue can predispose a person.

Diagnosis

To be diagnosed with bipolar illness, a person has to have had at least one episode of mania or hypomania. *The Diagnostic and Statistical Manual of Mental Disorders (DSM)* defines four types of bipolar illness:

- **Bipolar I Disorder** is an illness in which people have experienced one or more episodes of mania. Most people diagnosed with bipolar I will have episodes of both mania and depression, though an episode of depression is not necessary for a diagnosis. To be diagnosed with bipolar I, a person's manic or mixed episodes must last at least seven days or be so severe that he requires hospitalization.
- **Bipolar II Disorder** is a subset of bipolar disorder in which people experience depressive episodes shifting back and forth with hypomanic episodes, but never a full manic episode.
- **Cyclothymic Disorder or Cyclothymia**, is a chronically unstable mood state in which people experience hypomania and mild depression for at least two years. People with cyclothymia may have brief periods of normal mood, but these periods last less than eight weeks.
- **Bipolar Disorder "other specified" and "unspecified"** is diagnosed when a person does not meet the criteria for bipolar I, II or cyclothymia but has had periods of clinically significant abnormal mood elevation.

Treatment

Bipolar disorder is a chronic illness, so treatment must be ongoing. If left untreated, the symptoms of bipolar disorder may get worse, so diagnosing it and beginning treatment in the early stages is important. There are several well-established types of treatment for bipolar disorder:

- **Medications**, such as mood stabilizers, antipsychotic medications and antidepressants
- **Psychotherapy**, such as cognitive behavioral therapy and family-focused therapy
- **Electroconvulsive therapy (ECT)**
- **Self-management strategies and education**
- **Complementary health approaches** such as meditation, faith and prayer

See more at: <http://www.nami.org/Learn-More/Mental-Health-Conditions/Bipolar-Disorder>

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