



BIPOLAR DISORDER

(Manic-Depressive Disorder)



BASIC INFORMATION

DESCRIPTION

A condition in which a person has episodes of mania, or cycles of mania and depression. There is usually no relationship between the moods and what is happening in the person's life. Periods of highs can alternate with periods of deep depression. The high periods are called mania. Periods of normal behavior occur in between the mania and the depression. The normal behavior can last for a short time or for years.

FREQUENT SIGNS AND SYMPTOMS

Mania:

- Higher than normal energy levels. Person feels "high".
- Getting up earlier and earlier in the morning. Some people may not sleep at all for 3 to 4 days.
- Easily distracted and restless. Excited to start new projects, but then rarely finish.
- May go on spending sprees.
- May become sexually promiscuous.
- Often irritable. Often have attacks of rage.
- Speech becomes rapid. Speech may not make sense.
- May have very high opinion of one's abilities.
- May forget to eat. May lose weight. Can become exhausted.
- May have delusions of grandeur.

Depression:

- Becomes more and more withdrawn. Sleep may be disturbed. Late rising becomes a habit.
- May stay in one's room. May be afraid to face the world. Often lacks self-esteem.
- Self-neglect.
- Sex drive is lowered.
- Slow speech and movement.
- Imagined problems multiply.
- Worries about imagined illnesses.

CAUSES

There is no single cause. Genetics plays a part. Other factors may include changes in chemicals in the brain and environmental factors, such as stress.

RISK INCREASES WITH

Family history of bipolar disorder.

PREVENTIVE MEASURES

There are no known preventive measures.

EXPECTED OUTCOMES

Long-term therapy can help reduce how often and how severe the episodes are.

POSSIBLE COMPLICATIONS

- Relapse, especially if medicine is stopped.
- Problems at work, school, or home.
- Failure to get better.
- Alcohol or drug abuse.
- Suicide.



DIAGNOSIS & TREATMENT

GENERAL MEASURES

- Your health care provider will usually do a physical exam and ask questions about your symptoms and activities. Psychological testing may be done. Other medical tests are usually done to rule out infections or disorders that could be causing the symptoms.
- Treatment will depend on the specific symptoms. Follow your health care provider's instructions. Schedule regular office visits. Your health care provider will monitor the effectiveness of the treatment and watch for side effects.
- Hospital care may be required for severe symptoms. A stay at a mental health facility may be recommended.
- Do not stop taking your medicine when you feel better. This may cause a relapse.
- Education and counseling can help you, and your family, cope with the condition. Family members should learn to recognize signs of a coming episode.
- Electroconvulsive therapy (ECT) may be considered if other treatment steps are not successful.
- Seek support groups. Contact social agencies for help. Call a suicide prevention hotline if needed.
- To learn more: Depression and Bipolar Support Alliance, 730 N. Franklin St., Suite 501, Chicago, IL 60610; (800) 826-3632; website www.dbsalliance.org.

MEDICATIONS

Drugs will be prescribed to help relieve symptoms of the depression and the manic episodes. Other drugs may be prescribed to help prevent mood swings. Changes in drugs or dosages may be needed at various times to manage the illness more effectively.

ACTIVITY

Maintain daily activities. Exercise on a regular basis.

DIET

Eat a normal, well-balanced diet. Try to eat well even if you have little or no appetite.



NOTIFY OUR OFFICE IF

- You or a family member exhibit symptoms of this condition.
- You feel suicidal or hopeless. Call 911 if needed.
- Any new symptoms develop that cause concern.

