Bipolar symptoms and diagnosis

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Bipolar Disorder and the Difference Between Mood Variation and Illness

Bipolarity is a sharp change in mood – when you cry, you laugh. Changing moods are also characteristic of healthy people. But if a person is characterized by sharp transitions from euphoria to overwhelming grief and experiences this difficulty in everyday life – it is worth consulting with a specialist. Any bipolar disorder causes certain inconveniences, but to a greater or lesser extent, it depends on the person himself.

Most often, people with this diagnosis do not change their mood in the blink of an eye, but at the same time, it is rather unstable and often becomes a serious obstacle to a full life: difficulties arise at work, in relationships, and there is an increased thirst for risk. Most often, bipolar disorder begins at the age of 13 to 25 years, although it can begin at almost any age. The average age of the beginning is 19 years, but the first appeal to a psychiatrist is usually about 22 years.

Any person is peculiar in being sad or happy from time to time. A healthy change of emotional reactions is inherent in everyone. However, if instead of a harmonious manifestation of emotions, mood swings become radical, it is probably worth talking about the disorder of the psyche. Bipolar disorder is a serious mental illness that can destroy relationships and work and lead to suicide. The patient constantly tries on a mask of grief or happiness and requires constant attention. The patient can make rash acts, be sad today, and lie all day under the blanket, and tomorrow, spend all the savings and be on the rise; also, this disease is called manic-depressive psychosis.

Causes, Diagnostic Difficulty, and the Cycles of Mania and Depression

Until now, scientists have not established the exact cause of bipolar disorder. In addition, bipolar disorder is difficult to diagnose. Two cyclically repeating phases of mania and depression, their different severity, prevent the doctor from confidently diagnosing. A patient with mild symptoms of mania, with a high level of energy, does not come to mind to consult specialists, and only in the stage of depression, many pay attention to the strangeness of the patient while ignoring the phase of mania. And this, of course, makes it difficult to diagnose.

Diagnosis of bipolar disorder is very difficult in adolescence because, due to puberty, mood swings are the norm. However, the following symptoms are pronounced in bipolar disorder: disobedience,

frequent and prolonged tantrums, and aggression. The main symptom is the cyclical nature of the change in mood phases from the maximum experience to a minimum. The cycle can change in a few hours, days, months. Bipolar disorder is divided into two types: Bipolar I includes a classical form of the disorder characterized by pronounced periods of mania and depression, and Bipolar II includes the peculiarity of this type of disorder is a blurred, fuzzy picture of the disease, the phases of mania and depression are poorly expressed. (National Institute of Mental Health, 2026)

The manic phase is a heightened mood that persists for a long time and has no reason, a tendency to commit rash acts, consumption of alcohol/drugs, uncontrolled sex life, and rapid change of activities. The depressive phase is a sense of despair, despair, and sleep problems – insomnia or waking up in the middle of the night. Increased anxiety, a tendency to self-flagellation, a problem with appetite, and an inability to enjoy life, with the severe course of this phase, the appearance of psychosis is possible. Psychosis entails problems in perception and sensation – the appearance of hallucinations and delusions. In case of psychosis, a psychiatrist consultation is necessary. In the treatment of bipolar disorder, doctors use antidepressants, tranquilizers, and neuroleptics. In the absence of medication, the course of the disease leads to negative consequences. It is necessary to fully complete the course. (American Psychiatric Association, 2022)

Episode Patterns and the Clinical Course of Bipolar Disorder

Bipolar disorder usually begins with a depressive episode, less often with a manic (more often in men). If the first episode was manic, then the probability of the following manic episodes is greater, and if the depressive episode is depressive. The earlier a depressive episode occurs in life, the greater the likelihood that there will subsequently be an episode of mania or hypomania. According to some sources, children who were depressed before the age of 15 are about 50% more likely to suffer from bipolar disorder of the second type.

The forecast is influenced by treatment, concomitant diseases (especially alcoholism and drug addiction), and the burden of accumulating due to illness problems (unemployment, family troubles, problems with the law). Approximately, out of 10 people with bipolar disorder ten years later, one will fully recover; the two health will improve significantly (that is, the attacks will become easier and less frequent, usually against the background of regular medication); in 5, the disease will flow as before; the two will deteriorate significantly (usually due to alcoholism, drug addiction, less often due to worsening of the disease itself); and one will commit suicide. Most of the cases of stable or worsened course of the disease are due to the fact that people do not take medication or do it irregularly.

Among the types of psychotherapy with which you can combat bipolar disorders, the following are distinguished i.e.; behavioral models are recreated, allowing to struggle with stress, cognitive therapy: this approach assumes that the patient must learn to identify and change the way thinking that accompanies mood changes and interpersonal therapy, which uses a relationship and aims to

reduce the stress caused by the disease. There is a therapy of social rhythm, which allows you to enter and adhere to the daily routine. (Goldstein et al., 2014)

Mania, Impulsivity, and the Transition Between Mood States

Maniacal is considered to be an anxious, energetic, talkative, reckless, powerful period of euphoria. There may be an excessive revival or impulsive dangerous sex. Then, at some point, this elated mood can be replaced by a more somber one, which can be irritation, confusion, anger, or impotence. The word depression describes the opposite mood – sadness, the desire to cry, the feeling of uselessness, loss of energy, a feeling of constant dissatisfaction, and problems with sleep.

Danger, according to the doctor, comes when the mania increases. Change can happen very dramatically, and the consequences can be terrible. The behavior of the patient can become reckless, he can become a lot of money, lead a promiscuous sex life, endangering his sexual health. The phase of depression can be no less dangerous: a person can have frequent thoughts about suicide. For a family of a person suffering from bipolar disorder, his illness is also very difficult. It is most difficult for families to realize that their loved one suffers from such a serious mental disorder, says Dr. Aronson to WebMD. It’s easier for families to take schizophrenia; it’s easier for them to understand that this is a disease. But if a person’s periods of euphoria are replaced by recklessness and his behavior contradicts common sense, it brings his family much more harm. It’s more like bad behavior as if a person just does not feel like behaving humanly. If, in the description, you recognize yourself or someone close to you, hurry to see a psychiatrist, as this may be the first step in solving the problem. Be it bipolar disorder or another problem related to mood swings, be sure: currently, there is an effective treatment. The most important step on the way to solving your problem is to realize it and ask for help.

In older teens, symptoms and ways of treating bipolar disorders are almost the same as in adults. But if your teenage child exhibits symptoms of the disorder, this is accompanied by a lot of different problems. When a teenager gets older, he may be offended by the fact that you force him to be treated. So you need to have a conversation with him. Talk frankly about treatment options, and invite your child’s doctor to talk. Try not to cause the child to be hostile to treatment. Like adults and adolescents with bipolar disorders, you should never take alcohol and drugs, as they may be incompatible with medications and cause mood swings. The danger of developing alcohol or drug dependence in adolescents suffering from bipolar disorders is much higher than that of their healthy peers. (Sullivan & Miklowitz, 2010)

Medication, Reproductive Health, and Treatment Concerns for Women

Medications for bipolar disorders that stabilize mood are associated with reproductive problems in women – polycystic ovary often develops, a problem related to female hormones. Thus, women with bipolar disorders are at risk of developing infertility, diabetes, and even heart failure and uterine cancer. However, with the help of medications, you can cope with the disease.

Adults should not take lithium-mediated medicines and other medications for bipolar disorders before and during pregnancy. What is interesting is that sometimes, pregnancy itself stabilizes the condition of a woman suffering from bipolar disorder. At the same time, in some women during pregnancy, bipolar disorders, on the contrary, are exacerbated. The best alternative for a pregnant woman susceptible to depression or mania and unable to adhere to a normal regimen is the use of ECT [electroconvulsive therapy]. It is very effective and safe. When menopause can help hormone therapy, the result can be a change of antidepressants or a drug that stabilizes the mood. Thanks to individual or group therapy, a woman can get support and cope with the twists of fate, increasing stress and aggravating depression.

Diagnosis of bipolar disorder or attention deficit disorder is more common in American children or adolescents. Symptoms are somewhat similar, so how can a doctor pinpoint whether the child suffers from bipolar disorder or attention deficit disorder? Watch every episode broadcast by Bipolar TV and get not only basic but also more in-depth knowledge, getting to know the stories of people who are living well with bipolar disorder. Also, you can see interviews with experts about life, work, marriage, treatment, treatment options, etc. If you have bipolar disorder or you know someone who suffers from the disease, a mental health check will allow you to easily and carefully assess the symptoms, choose treatment, discuss life problems, and much more.

Scientists have not yet come to a common opinion about the unique cause of bipolar disorder, but they agree that there is a genetic predisposition to this disease, which means that the disorder manifests itself in families. According to some scientists, a number of different causes can cause a chemical imbalance in the brain, which will lead to symptoms of bipolar disorder, namely, deep depression or mania. Among external factors, you can identify stress, alcohol or drug dependence, and problems with sleep. Some scientists hold the theory that the cause of the imbalance causing bipolar disorder may be the irregular production of hormones or a malfunction in the neurotransmitters (chemicals) of the brain that send signals to nerve cells. Experts have established a link between the hormonal level and bipolarity. For example, hypothyroidism can lead to the development of depression or mood instability. During puberty, women have a particularly high tendency to develop bipolar disorders. The intensity of symptoms of the disorder in girls is usually different from the menstrual cycle.

Prevalence, Gender, and the Demography of Bipolar Disorder

In the US, more than 5.7 million adults suffer from bipolar disorder. In women and men, bipolar disorders occur with equal frequency; their manifestation also does not depend on race, ethnicity, and socioeconomic class. Although men and women experience bipolar disorder equally often, rapid phase changes are more common in women. In addition, women are usually more likely to develop depressive and mixed phases than men. Bipolar disorder in men usually begins with a manic phase, and in women – with a depressive.

Based on the results of numerous studies, it was found that people with bipolar disorders usually have at least one close relative suffering from the same disease. In 15% -30% of children exposed to bipolar disorder, at least one parent also suffers from the disorder. If both parents suffer from disorders, in 50% – 75% of cases, they will develop in children. If one of the nonidentical twins has this disease, in 15% -25% of cases, it will be found in the second. Studies of identical twins showed that the development of the disease affects not only the genetic factor. Considering the fact that identical twins have the same genes, it can be concluded that if bipolar disorders were only transmitted genetically, then all pairs of identical twins would necessarily have this disease. However, studies have shown that if one of the identical twins suffers from a disorder, only 40% -70% of the cases will experience a second twin. Note that bipolar disorders are sometimes met through the generations and also occur in different forms in members of the same family. Scientists involved in the investigation of disorders found that they are caused not by one gene but by a number of genes, each of which has a certain effect on a person's susceptibility to the disease and plays a certain role together with external factors such as stress, lifestyle, habits, and sleep. Scientists are trying to calculate these genes to make diagnosis and treatment simpler.

Measures to prevent bipolar disorder do not exist, but the sooner you find that you are sick and consult a doctor, the more likely you are to cope with emotional states, including by taking necessary medications, and the more likely that you can stop the development of the disease.

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