



Bipolar Disorder: Symptoms and Treatment

Family, Youth, and Caregiver Guide

Bipolar disorder is a type of mental illness characterized by significant and sometimes extreme changes in mood and behavior. Many people with bipolar disorder experience alternating periods of greatly elevated mood (called manic episodes) and greatly lowered mood (called depressive episodes). This is why bipolar disorder used to be referred to as manic depression or manic-depressive disorder.

It is normal for children and teens to experience mood changes in response to positive or negative life events, or as a result of physiological changes such as puberty. By contrast, mood changes associated with bipolar disorder are often extreme, lack any apparent cause, and can significantly alter behavior, energy levels, sleep patterns, and cognitive functioning. Additionally, these mood changes persist for weeks or months before subsiding instead of a few hours or days.

The average age of onset for bipolar disorder is around age 25, but it may also develop during adolescence. For instance, about 1 in 34 adolescents ages 13–18 will be diagnosed with bipolar disorder. Among these, 90% will experience severe impairment. Girls are about 1.3 times more likely than boys to be diagnosed with bipolar disorder.

Symptoms and Types

Bipolar disorder can be challenging to diagnose, in part because its symptoms may be similar to those of other disorders like ADHD, depression, anxiety disorders, and conduct disorders. In some cases, symptoms may be very mild and difficult to detect; in others, they may consist of co-occurring manic and depressive qualities.

Generally speaking, a person must experience at least one manic or hypomanic episode in order to be diagnosed with bipolar disorder. Many people who have bipolar disorder also experience depressive episodes, although this is not usually a requirement for diagnosis.

Symptoms of a **manic episode** may include:

- Intense happiness or silliness for extended periods of time
- Extreme irritability, aggressiveness, shortness of temper, or angry outbursts
- More frequent and/or faster speech, especially speech that changes topics rapidly and resists interruption
- Racing thoughts that are difficult to control
- Increased energy levels and decreased need for sleep
- Increased activity, such as working on multiple projects at once
- Difficulty focusing on tasks or a tendency to become distracted
- Excessive interest or participation in risky activities (e.g. reckless driving, spending sprees, abusing alcohol or drugs, or high-risk sexual behaviors)
- Unrealistically high self-esteem or belief in own abilities

Symptoms of a **depressive episode** may include:

- Frequent sadness, tearfulness and crying
- Hopelessness, low self-esteem, and feelings of guilt
- Persistent boredom, low energy, and poor ability to concentrate
- Social isolation, poor communication skills, and difficulty with relationships
- Decreased interest in activities or inability to enjoy favorite activities
- Extreme sensitivity to rejection or failure
- Increased irritability, anger or hostility
- Difficulty making decisions
- Slowed speech or movement
- Frequent complaints of physical illnesses such as headaches and stomachaches
- Frequent absences from school or poor performance in school
- Major changes in eating, sleeping, and/or hygiene patterns
- Thoughts or expressions of suicide or self-destructive behavior

Psychologists group bipolar disorder into three main types with slightly different symptoms:

➤ **Bipolar I Disorder**

Individuals with bipolar I disorder experience manic episodes that last at least seven days, with symptoms occurring every day during the episode. Many people with bipolar I also experience depressive episodes that last at least two weeks, with symptoms occurring daily during the episode. It is common for individuals with bipolar I to experience periods of normal mood between manic and depressive episodes.

➤ **Bipolar II Disorder**

Individuals with bipolar II disorder experience depressive episodes that last at least two weeks in addition to hypomanic episodes. Hypomanic episodes consist of less severe symptoms that do not last as long as in manic episodes. Most people with bipolar II experience periods of normal mood between depressive and hypomanic episodes.

➤ **Cyclothymic Disorder (also called Cyclothymia)**

Individuals with cyclothymic disorder experience alternating periods of hypomania and mild depression. This pattern must last for at least two years with symptoms never stopping for more than two months at a time. Many people with cyclothymic disorder have symptoms that are mild enough that their daily functioning is not seriously impaired.

Treatments

Bipolar disorder can be extremely challenging to live with, but it is treatable, and children who develop the disorder can go on to live full, normal lives. They just need a little help to manage and cope with their symptoms.

Bipolar disorder and other mental health conditions tend to be highly intertwined with a child's personal relationships. As such, it is imperative for caregivers and family members to be involved in and supportive of their child's treatment. If their relationships and home/school environments do not change to support their treatment, then its efficacy will be greatly reduced.

➤ **Medication**

Several types of psychiatric medication are commonly used to treat bipolar disorder.

Medications known as mood stabilizers are often prescribed to reduce the severity of manic and hypomanic episodes. Because these medications "flatten" the euphoric highs of a manic episode, some children may be resistant to taking them. It is important for individuals with bipolar disorder to understand how their manic episodes can be harmful to themselves and others, thereby increasing compliance with medication regimens.

Individuals who experience depressive episodes may be prescribed an antidepressant to manage their symptoms. However, antidepressant medications can sometimes trigger manic episodes, so they are often prescribed alongside a mood stabilizer or antipsychotic medication. Antipsychotics may be prescribed if manic and/or depressive symptoms persist despite treatment with other medications.

It may be necessary to try several different medications or a combination of medications to find a prescription that works for your child. In any case, you should speak with your clinician or psychiatrist about the potential benefits and possible negative side effects before starting your child on any medication regimen.

➤ **Therapy and Skills Training**

Professional therapy and counseling are typically used alongside medication to treat bipolar disorder. Treatments like individual therapy, family therapy, and skills training can help children and their families learn how to manage symptoms of bipolar disorder.

Some common therapeutic practices include:

- Teaching you and your child about bipolar disorder and what it means.
- Talking about the way your child thinks about themselves and how these thoughts make them feel. When talking about these thoughts, the therapist may be able to help change them and help your child feel differently.
- Encouraging your child to pay attention to their thoughts, feelings, and behaviors and to connect those to feelings of mania or depression.
- Looking at the activities your child is involved in and working on ways for your child to participate in them while enjoying themselves.
- Talking about whom your child feels close to and the different relationships in their life, and discussing how these relationships can create stability and ease feelings of depression.
- Guiding your child through relaxation, meditation, and deep breathing techniques, and teaching your child how to perform these techniques on their own.
- Teaching your child how to take care of their personal health, including how to keep a healthy diet, get enough exercise, and maintain a consistent sleep schedule.

Supporting a Child with Bipolar Disorder

Parents, caregivers, and other family members play an important role in supporting children diagnosed with bipolar disorder. The younger the child, the more likely they'll need help learning how to manage their symptoms. Family members can be instrumental in modeling and guiding new coping behaviors.

The following section includes tips that can be helpful for supporting your child's progress. Keep in mind they might not all be right for you and your family, but it could be useful to give them a try.

Educate yourself

Stay educated on what bipolar disorder is, how it affects children, and how it affects your child in particular. Help your child understand what bipolar disorder is and what the treatment process will be like.

Get involved in therapy

Actively participate with the clinician in your child's treatment plan, and assist your child with taking any medications at home. Be open and flexible about meeting for treatment. Make time for both you and your child to participate individually and as a family.

Stay involved with school

Bipolar disorder can directly and negatively affect your child's progress in school. If you inform the necessary school staff about your child's struggle with bipolar disorder, they can help keep your child safe and supported when you are not around.

Create a positive home environment

Make sure that your home is a safe place for your child and the rest of your family. Have meals together, take walks as a family, and spend plenty of positive time together. Bipolar disorder in children can cause extra stress on the family, so it is important to de-stress.

Create support systems

Make sure everyone who lives in your home is informed about what is going on in order to create a strong family support for your child. Find people you can trust and confide in to help you with transportation to appointments, taking care of family members, and emotional support.

Develop structures

Changes in routine are inevitable if your child begins treatment of any kind. Do your best to stay organized with appointments, medication, work, and social plans with friends and family. Creating structure for your child will help them stay on track with a daily routine.

Practice coping skills

There are a variety of coping skills you can practice with your child to help them manage their symptoms. Examples include mindfulness, meditation, and deep breathing. Moving the body can also reduce symptoms of mania and depression.

Help to solve problems

Use rewards and reinforcement of positive behaviors with your child. Encourage communication and relationship building with others. Assist with monitoring behavior and utilizing problem solving techniques that you learn from your child's clinician.

Don't place blame

Blaming yourself, your child, or anyone else will not help the situation. Be supportive in any way possible and don't feel guilty about what your child is going through. Don't punish anyone if they make mistakes or if you don't see progress being made.

Take care of yourself

Know your limits and seek support if you need it. Join support groups and seek professional guidance if you think it would be helpful. You are your child's source of support and comfort, so feeling your best will help your child feel their best!

Reduce your stress

You may laugh at this one, but it is important nonetheless. The less stress you have in your life, the better off everyone will be. Continue doing things you love and be sure to stay healthy (exercise and eat nutritious foods).

Be proud of yourself

This is a difficult time. You are already on the right path just by staying informed and involved in your child's life.

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