

# BIPOLAR DISORDER

*Bipolar disorder, formerly known as manic-depressive illness, is a persistent psychological illness that affects over 2% of adults worldwide. In general, this disorder is characterized by recurring periods, called episodes, in which mood becomes elevated or down for weeks to months at a time. These debilitating shifts in mood are accompanied by changes in energy, activity levels, and thought patterns that can ultimately impair the ability to carry out day-to-day responsibilities (e.g., school, work, and home tasks). Therefore, the symptoms of bipolar disorder are much more severe than the normal “ups” and “downs” that people may experience from time to time. Bipolar disorder is a long-term condition that can be managed with the combination of medications and psychotherapy.*

## What Is a Manic Episode?

In this cyclic disorder, manic episodes, or mania, refer to the “up” periods of abnormally elevated, euphoric (intensely excited and happy) mood or sustained intense irritability. Mania is further characterized by additional symptoms such as greater feelings of importance or confidence in personal abilities, a reduced need for sleep, excessive talkativeness, racing thoughts, increased distractibility, greater participation in or completion of activities, and/or increased risk-taking behaviors (e.g., excessive spending sprees, unsafe sexual activities). When the mood shift is irritable rather than euphoric, it is often significant enough to result in physical fights or potentially serious legal consequences. Individuals may also experience psychotic symptoms (e.g., grandiose delusions that one is famous, wealthy, or very powerful) during a manic episode. Any or all of these symptoms can negatively impact an individual’s social, academic, or job functioning and may even result in hospitalization. Often these symptoms are noticed first by other people, such as family members, friends, or a doctor, before the individual becomes aware of them. Depending on the severity and duration of the mood symptoms, it may qualify as either a full manic episode or a lower-severity hypomanic episode.

## What Is Bipolar Depression?

Bipolar depression refers to the episodes in which mood sifts downward, but has been preceded in the past by a period of mania or hypomania. Key features of bipolar depression are significantly sad mood and a decrease or loss of enjoyment or interest in activities normally found to be pleasurable. During an episode of depression, it is common for individuals to also experience sleep problems (difficulties with falling or staying asleep or sleeping significantly more than usual), change in appetite, or constantly feeling tired or “run down.” During depressive episodes individuals may also have trouble focusing or remembering things and may experience feelings of hopelessness, excessive worthlessness, or guilt. It is not uncommon for depressed individuals to isolate themselves from friends and loved ones. The severity of depressive episodes can vary from mild, in which one may feel “down” and have some modest changes in the other symp-

## What Is Cognitive Behavior Therapy?

Behavior Therapy and Cognitive Behavior Therapy are types of treatment that are based firmly on research findings. These approaches aid people in achieving specific changes or goals.

Changes or goals might involve:

- A way of acting, like confronting our feared thoughts
- A way of feeling, like helping a person be less scared, less depressed, or less anxious
- A way of thinking, like evaluating the probability of an event occurring
- A way of dealing with physical or medical problems, like lessening back pain or helping a person stick to a doctor’s suggestions.

Behavior Therapists and Cognitive Behavior Therapists usually focus more on the current situation and its solution, rather than the past. They concentrate on a person’s views and beliefs about their life, not on personality traits. Behavior Therapists and Cognitive Behavior Therapists treat individuals, parents, children, couples, and families. Replacing ways of living that do not work well with ways of living that work, and giving people more control over their lives, are common goals of behavior and cognitive behavior therapy.

**HOW TO GET HELP:** If you are looking for help, either for yourself or someone else, you may be tempted to call someone who advertises in a local publication or who comes up from a search of the Internet. You may, or may not, find a competent therapist in this manner. It is wise to check on the credentials of a psychotherapist. It is expected that competent therapists hold advanced academic degrees and training. They should be listed as members of professional organizations, such as the Association for Behavioral and Cognitive Therapies or the American Psychological Association. Of course, they should be licensed to practice in your state. You can find competent specialists who are affiliated with local universities or mental health facilities or who are listed on the websites of professional organizations. You may, of course, visit our website ([www.abct.org](http://www.abct.org)) and click on “Find a CBT Therapist.”

*The Association for Behavioral and Cognitive Therapies (ABCT) is an interdisciplinary organization committed to the advancement of a scientific approach to the understanding and amelioration of problems of the human condition. These aims are achieved through the investigation and application of behavioral, cognitive, and other evidence-based principles to assessment, prevention, and treatment.*

toms described above, to severe, in which mood is significantly depressed, other symptoms are severe and disabling, and which may require hospitalization to treat effectively.

### **What Affects Mood Cycling in Bipolar Disorder?**

Mood episodes may last from days to months and are vulnerable to recur. That is why prevention of future episodes is as important as recovery from any current episode. Stress, sleep disruption, and illicit drug use can all increase the likelihood of a mood episode in bipolar disorder. Also, early identification of an upcoming mood episode can lead to early intervention to reduce the severity or length of an episode. For these reasons, education about the nature of bipolar disorder, training in the early identification of a mood episode, and training in skills for stress reduction are all important in the management of the disorder.

### **Treatment for Bipolar Disorder**

Because bipolar disorder is characterized by cycling between normal moods and the extreme “highs” and “lows” defined by mania and depression, respectively, treatment for bipolar disorder involves three distinct features: (1) strategies to prevent new episodes, (2) treatment of bipolar depression when it occurs, and (3) treatment of mania or hypomania when it occurs. Also, because bipolar disorder dramatically affects mood, irritability levels, judgment, and engagement in risky behavior, the disorder can have powerful impacts on families and relationships. For this reason, involvement of loved ones in treatment is common and recommended. To accomplish all these goals, comprehensive treatment of bipolar disorder involves ongoing use of medications designed to prevent both manic and depressive episodes (mood stabilizers) combined with education on the nature of the disorder, training in stress- and mood-management strategies, and sometimes, family therapy. Because bipolar disorder is a lifelong condition, ongoing treatment is important for helping maintain periods of mood stability. Then, when severe mood episodes occur, additional medication and psychotherapy interventions may be needed to help an individual recover from a particular episode and to plan for prevention of future episodes. Because bipolar mood episodes can so disrupt social, educational, and work goals, preventive treatment relies on early identification and intervention for pending mood episodes (i.e., mania and/or depression).

Further information about the types of medications and psychotherapy used to treat bipolar disorder can be found online at the website of the National Institute of Mental Health: <http://www.nimh.nih.gov/health/topics/bipolar-disorder/index.shtml>.

### **What Is the Role of Cognitive Behavioral Therapy in the Treatment of Bipolar Disorder?**

There are three primary ways in which Cognitive Behavior Therapy (CBT) has been found to help individuals with bipolar disorder. First, CBT can help individuals recover from bipolar depressive episodes. Treatment starts with education about bipolar disorder; its common patterns; the biological, psychological, and social factors that influence it; the rationale for treatment; and the importance of adhering to the treatment in best managing the dis-

order. This educational phase is typically followed by a focus on changing negative thoughts that are part of depression and on returning individuals to a balanced schedule of rewarding and meaningful activities. To help reduce the risk of future episodes, CBT also focuses on stress and sleep management skills, conflict management, problem solving, and the treatment of anxiety or drug misuse that commonly co-occurs with bipolar disorder. Finally, CBT may be directed toward the early identification and early intervention of future episodes to try to prevent them or reduce their severity. Family meetings may be included in this process.

#### *For More Information*

Information on CBT therapists in your region can be found at the website of the Association for Behavioral and Cognitive Therapies: <http://www.abct.org/xFAT/>

More information on bipolar disorder as well as support services in your area can be found at the website of the Depression and Bipolar Support Alliance: <http://www.dbsalliance.org/site/PageServer?pagename=home>

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***For more information or to find a therapist:***

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