



Bipolar Disorder

What Is Bipolar Mood Disorder?

Bipolar disorder, which used to be called manic depressive illness, is a disorder of mood, characterised by extreme mood swings. The mood swings are episodic and in between episodes the person is usually completely well. Bipolar disorder is a neurobiological brain disorder and is strongly genetic. A person fluctuates between high mood “mania” or “hypomania” and low mood “depression”.

What Is Mania?

- **Hypomania** - Activity and thought speeds up, there is less need to sleep, mood is high with a sense of wellbeing, but there is often irritation and intolerance towards other people. Ideas flow quickly and thought processes are relatively intact. The person feels well and in control, but may not see the consequences of their behaviour and may react angrily if confronted. Judgment is affected and people may become unable to make complex decisions. Hypomania can look very much like an exaggeration of the person’s normal personality and it is often difficult to get them to seek help or for health professionals to recognise this as part of an illness.
- **Acute Mania** - If hypomania is not treated the lack of sleep, inability to eat and drink, and the high level of activity may lead to the person developing acute mania after a few days. In mania, thinking is disjointed and distorted and may not make sense to other people. The person may be talking so fast that other people cannot understand the flow of thoughts. Hallucinations and delusions are common and may appear very real to the person. Religious ideas are common, e.g. being a messenger of God, feeling especially chosen, or in touch with a higher being. The person is at risk of accidental injury and is usually not capable of looking after themselves. While in this acute phase, a person may spend excessive amounts of money and go into serious debt without being able to recognise the consequences. People who are manic may also take on risky ventures or increase gambling because of an increased sense of optimism and sense of luck. Those with heart problems are at high risk of heart attacks during acute mania.

Symptoms of mania include:

- Increased energy, activity, restlessness
- Racing thoughts, increased ideas and rapid speech
- Excessive euphoria and feelings of wellbeing
- Extreme irritability and distractibility
- Decreased sleep requirement: getting to sleep later and waking earlier
- Uncharacteristically poor judgment and inability to weigh up consequences
- Increased sexual drive, poor judgment in selecting sexual partners and vulnerability to sexual exploitation
- Denial that anything is wrong: inability to reflect on behaviour and effects on others
- Overspending – feeling that one is rich and can be generous
- Risky behaviour: driving fast, increased sense of physical invulnerability.

- **Delirious Mania** - The person appears confused and bewildered and may seem very disturbed. This stage often follows some days or weeks of not eating or sleeping, so the symptoms may be caused by poor nutrition and physical exhaustion. Without treatment, people can die in this stage of manic illness. This stage is often mistakenly diagnosed as a schizophrenic illness.

What Is Depression?

Depression is the opposite of mania. Thoughts are slower, mood is low and there may be feelings of sadness and emptiness. Thinking is difficult and it is hard to make decisions. The person may be incapable of or uninterested in performing everyday tasks. Sleeping is disturbed - it may be difficult to get to sleep with periods of wakefulness in the early hours of the morning followed by oversleeping into the late morning. The person may have an increase in or a complete lack of appetite. There is a decrease or loss of libido. Self-confidence is low and there is a generally pessimistic outlook regarding self and others.

Patterns of Bipolar Disorder

Bipolar disorder usually develops in adolescence and early adulthood. Stress is usually the trigger for early episodes of this mood disorder but after a number of occurrences, the episodes of mania or depression can develop without any obvious trigger.

- **Bipolar I** - the person has episodes of mania and depression which are severe.
- **Bipolar II** - the person has episodes of hypomania which generally do not disrupt normal activities. People often only seek help for the episodes of severe depression in this type of disorder.
- **Mixed States** - sometimes mania and depression happen at the same time: the person may be laughing and crying at the same time or feel sad but driven to high levels of activity.
- **Rapid Cycling Disorder (4 or more episodes per year)** - many more women than men develop rapid cycling moods after a number of years of mood disorder.

What are the Causes of Bipolar Disorder?

Bipolar mood disorder is thought to have a genetic component. In families where one person has bipolar disorder, there are often other family members who have episodes of depressive illness or hypomania. It is not known if there is a gene(s) for bipolar disorder or if it is a vulnerability to severe mood swings that is passed on through families.

Other Possible Causes of Mood Swings

It is important to know that not all mood swings are caused by bipolar disorder. Some of the other possible causes include physical illnesses such as diabetes, recreational drugs, alcohol and medications. Mood swings can also be caused by a viral or bacterial infection in the brain. If there is no history of mood disorder in your family then you should have a full physical check up to find out why these mood swings are happening.

What Help is Available?

Bipolar disorder is an illness that can take some time to diagnose and treat effectively.

- Medication - is usually an essential part of treatment. A combination of medications including mood stabilisers (such as lithium carbonate,

carbamazepine or sodium valproate), anti-psychotic medication (used to manage manic symptoms) and antidepressants are often used.

- Support, education and counselling - are important to help the person find ways of understanding and coping with the disorder and learning to recognise triggers for their episodes.
- Hospitalisation can sometimes be necessary if a person becomes very unwell and requires a period of rest and restabilisation.

What Can I Do to Help Myself?

- Find out more about bipolar disorder by accessing the resources and information listed below.
- See your local doctor (GP) or have an assessment conducted by a mental health professional, e.g. psychologist.
- If treatment is required, discuss your options with your health professional and decide on a program that is right for you.
- Although it can be difficult to accept a diagnosis of bipolar disorder and the need for ongoing treatment those who persevere generally find it is much easier to manage the severity and frequency of their illness.

Useful Websites

- www.beyondblue.org.au
- www.blackdoginstitute.org.au

Talk to Someone

If you are concerned that you or someone you know is showing signs of bipolar disorder it is important to seek help from a skilled mental health professional. Don't let misconceptions about mental illness stop you from seeking help.

- Contact the Mental Health Information Service on 1300 794 991 for information about services in your area
- Speak to your local doctor (GP)
- Contact your local Community Health Centre (under 'Community Health' in the Business and Government White Pages)
- Contact the Australian Psychological Society (APS) on 1800 333 947 for referral to a psychologist in your area
- Complete an online questionnaire and find out more about symptoms and treatments for bipolar disorder at www.blackdoginstitute.org.au



Telephone Interpreter Service 131 450

If English is not your first language please call the Mental Health Information Service through the Telephone Interpreter Service (TIS). This service is free to non-English speaking Australian citizens or permanent residents. TIS have access to interpreters speaking more than 120 languages and dialects.



Medicare Rebates and Accessing Private Practitioners

What is the difference between psychiatrists and psychologists?

Psychiatrists are medically trained doctors who specialise in the treatment of mental illness. Like GPs they can prescribe, administer and monitor medication. Psychiatrists do not advertise so it is up to your GP to refer you to someone appropriate.

Psychologists are trained in human behaviour and use a range of therapies to treat patients. They provide services including assessment, psychological testing, and various types of psychotherapy and counselling.

Medicare rebate for psychologists

A Medicare rebate is now available for a number of sessions per calendar year with a registered psychologist* with a Medicare Provider Number. To obtain the rebate you must be referred by an appropriate medical practitioner, i.e. a GP, psychiatrist or paediatrician. The practitioner will ensure that you meet the eligibility requirements and develop a management plan for your condition.

The cost and rebate from Medicare can vary depending on the consultation length and fee charged. If the psychologist bulk bills there will be no extra cost.

For further information about the rebate or to locate a psychologist in your area contact the Australian Psychological Society on 1800 333 497 www.psychology.org.au.

* Similar Medicare rebates also exist for mental health accredited social workers and occupational therapists.

Mental Health Resource Centre

The Resource Centre contains material that promotes a better understanding of mental health issues. New books and DVDs are purchased on a regular basis and visitors are welcome to come in and browse.

Members of MHA, CAG and ARAFMI may check-out resources on loan. The length of the loan is 3 weeks. Membership costs between \$10 - \$30 per individual per annum. Please note that most of the reference books are not available for loan.

You will find the Resource Centre Booklist on our website: www.mentalhealth.asn.au for further information contact 1300 794 991.

Disclaimer

This information is for educational purposes. As neither brochures nor websites can diagnose people it is always important to obtain professional advice and/or help when needed. The listed websites provide additional information, but should not be taken as an endorsement or recommendation.

This information may be reproduced with an acknowledgement to the Mental Health Association NSW. This and other fact sheets are available for download from www.mentalhealth.asn.au. The Association encourages feedback and welcomes comments about the information provided.

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mental health
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