

## **Bipolar Disorder**

### **What is bipolar disorder?**

Bipolar disorder, also known as “manic-depressive illness”, is a brain disease that causes people to have unusual shifts in their mood, energy and ability to function. These mood shifts are very different from the normal ups and downs that everyone goes through; the shifts of the person with bipolar disorder are so severe that they impair the person’s thinking and judgement, resulting in relationships problems, poor work and school performance and even causing them to harm themselves.

This sounds rather frightening, but there is good news behind all these clouds of gloom. The disease can be treated and people with bipolar disorder can live full and productive lives.

People with this illness switch from feeling overly happy and joyful (or irritable) to feeling very sad. Because of the highs and the lows – or two poles of mood – the condition is referred to as “bipolar” disorder or manic depressive illness. In between the mood swings, a person may experience normal moods.

Most individuals with bipolar disorder spend more time in depressed phases than in manic phases.

Bipolar disorder causes dramatic and rapid changes in mood swings, from highs to lows that do not follow a set pattern, and depression does not always follow manic phases.

A person may also experience the same mood state several times before suddenly experiencing the opposite mood. Mood swings can happen over a period of weeks, months, and sometimes even years. The severity of the depressive and manic phases can differ from person to person, and in the same person at different times.

The features of a person with mania (“the highs”) include excessive happiness, hopefulness, and excitement, sudden changes from being joyful to being irritable, angry, and hostile, restlessness, talking very fast and loudly, poor concentration, feeling full of energy, less need for sleep, making grand and unattainable plans, tendency to show poor judgment, such as deciding to quit a job and abusing drugs and alcohol.

Some people with bipolar disorder can become psychotic – seeing and hearing things that aren’t there and holding false beliefs from which they cannot be swayed. In some instances they see themselves as having

superhuman skills and powers, or think they are god-like.

A milder form of the "highs" is called "hypomania". The person with hypomania may feel good and may even be functioning better, but without proper treatment, such hypomanic swings can become severe and can even switch to depression.

During the depressive periods, a person with bipolar disorder may experience feelings of sadness, feeling tired easily, feelings of hopelessness or worthlessness, losing the ability to enjoy things that were once pleasurable, difficulty concentrating, sleep problems, appetite changes and having thoughts of death and suicide.

At this juncture, it is important for families, relatives and friends of people with bipolar disorder to be aware that the illness can strike from two sides, like a "double-edged sword".

For example, let's take a physical illness we've all had. When we come down with the flu, a host of new, unwanted symptoms (fever, headache) well up and engulf the healthy self. At the same time, we are drained by symptoms which take away personal resources we've always depended upon (energy, will, drive to keep going, etc.). The more severe the illness, the more our healthy self is overwhelmed and the more our dependable, resourceful self is diminished.

Also, we have no control over the severity of symptoms that attack us, and during the period we are ill, it's almost impossible to summon up our dependable responses.

Mental illnesses are no different, except that because they are disorders of the brain, many symptoms of the illness are expressed as complex behaviours instead. When the person with bipolar disorder is affected by his or her symptoms, a host of unfamiliar, unwanted behaviours appear that were never part of the personality; at the same time, many of the resourceful attributes are taken away.

It is important then to understand which added behaviours and diminished responses occur in the person's illness, which may look to be under his/her control, but are not. This will help us to separate the person from the illness.

According to best estimates, about 1% of the population suffers from bipolar disorder ie there are about 250,000 people with bipolar disorder in the country. Bipolar disorder usually begins in early adulthood, appearing before age 35. Children and adolescents, however, can develop this disease in more severe forms.

## **Causes of Bipolar Disorder**

A definite cause for bipolar disorder is difficult to determine but include genetics, changes in the brain, and environmental factors like stress and major life changes. More research is being done to determine the relationship between these factors and the disorder and how they may help prevent its onset, and what role they may play in its treatment.

## **Diagnosis**

A diagnosis of bipolar disorder is made after taking careful note of the symptoms, how they affect the person, how long and how often these symptoms had occurred. The most telling symptoms include severe mood swings (going from extreme highs to extreme lows) that don't follow a set pattern. Getting further information from close friends and family is often very helpful to distinguish bipolar disorder.

If you or someone you know is experiencing symptoms of bipolar disorder, seek the advice of a doctor or a psychiatrist. The person would require urgent assessment and possibly treatment.

In Malaysia, assessment and treatment services for people with bipolar disorder are available at most government health clinics and private clinics, but in most cases, a more detailed assessment may be required by a psychiatrist.

## **How serious is bipolar disorder?**

Bipolar disorder is a long-term illness that requires management throughout a person's life. People who have numerous (four or more) episodes of mood changes in a year can be much more difficult to treat.

## **How long does bipolar disorder last?**

Bipolar disorder can be an enduring or recurring condition and is a lifelong illness.

## **How is bipolar disorder treated?**

- a) There are many treatments available for bipolar disorder, including counselling and medicines, but the first step is always to see a doctor who can accurately diagnose the condition. While general practitioners (family doctors) can sometimes diagnose bipolar disorder, it is preferable that patients exhibiting symptoms of bipolar disorder be evaluated by a psychiatrist.
- b) Most patients require the simultaneous use of a combination of medicines to treat not only mood symptoms but also to prevent switching from periods of mania to periods of depression, or vice versa (mood swings). These medications in combination are designed to alleviate depression, control the symptoms of mania and prevent mood swings.
- c) A good treatment programme for people with bipolar disorder include making sure that the medications given are in the right amounts and given for an adequate period of time, educating the family, friends and relatives of the person, educating the person about the illness and techniques in self-management, especially identifying early warning signs and making sure that the affected person continues with his education or work with support from the family and the mental health treatment team.
- d) With such a treatment programme, the person's mood can be stabilised. Treatment that is continual has been proven more effective in preventing relapses and controlling the frequent mood changes in people with bipolar disorder. Those who also have a substance abuse problem may need more specialised treatment.

There is no known way to prevent bipolar disorder. Because its exact cause has not yet been determined, it is especially important to know its symptoms and seek early intervention. Some people who experience bipolar disorder may become suicidal. By knowing how to recognise the symptoms, there is a better chance for effective treatment and finding coping methods that may prevent long periods of illness, extended hospital stays, and suicide.