





What is Bipolar Disorder?

Bipolar Disorder has previously been known as *'manic depression'*. As the older name suggests, someone with Bipolar Disorder will have severe mood swings. These usually last several weeks or months and are far beyond what most of us experience.

They are:

Low or 'depressive'	Feelings of intense depression and despair
High or 'manic'	feelings of extreme happiness and elation
Mixed	For example, depressed mood with the restlessness and over-activity of a manic episode





How common is Bipolar Disorder?

About 1 in every 100 adults has bipolar disorder at some point in their life. It usually starts between the ages of 15 to 19 - and it rarely starts after the age of 40. Men and women are affected equally.

Types of Bipolar Disorder:

- Bipolar I
- Bipolar II
- Rapid Cycling
- Cyclothymia







Types of Bipolar Disorder

Bipolar I	 Bipolar I is diagnosed if a person has at least one high or manic episode which has lasted for longer than one week. A person may only have manic episodes, although most people with Bipolar I also have periods of depression. Untreated, a manic episode will generally last three to six months. Depressive episodes last longer without treatment, from six to 12 months. 	
Bipolar II	 If a person has more than one episode of severe depression, but only mild manic episodes, it is diagnosed as 'hypomania'. 	
Rapid Cycling	 Rapid Cycling is diagnosed if a person has more than four mood swings in a 12 month period. This affects around 1 in 10 people with Bipolar Disorder and can happen with both types I and II. 	
Cyclothymia	 When a person has cyclothymia, the mood swings are not as severe as those in full Bipolar Disorder, but can be longer. This can develop into full Bipolar Disorder. 	





What causes Bipolar Disorder?

The medical sector does not understand this well, but research suggests that:

- Bipolar disorder runs in families but it seems to have more to do with genes than with upbringing
- There may be a physical problem with the brain systems which control our moods, which is why bipolar disorder can often be controlled with medication
- Mood swings can be brought on by stressful experiences or physical illness





What does depression feel like?

The answer to this questions depends on which way a person's mood has swung.

The feeling of depression is something we all experience from time to time. It can even help us to recognise and deal with problems in our lives.

However, in clinical depression or Bipolar Disorder, the feeling of depression is much worse. The feeling lasts for much longer and makes it difficult or impossible to deal with the normal things of life.





What does depression feel like?

If a person becomes depressed, they may notice some of these changes:

Emotional	Thinking	Physical	Behaviour
 Feelings of unhappiness that don't go away Feeling that you want to burst into tears for no reason Losing interest in things Being unable to enjoy things Feeling restless and agitated Losing self-confidence Feeling useless, inadequate and hopeless Feeling more irritable than usual Thinking of suicide 	 Can't think positively or hopefully Finding it hard to make even simple decisions Difficulty in concentrating 	 Losing appetite and weight Difficulty in getting to sleep Waking earlier than usual Feeling utterly tired Constipation Going off sex 	 Difficulty in starting or completing things – even everyday chores Crying a lot – or feeling like you want to cry, but not being able to Avoiding contact with other people





What does mania feel like?

A person may have an intense sense of wellbeing, energy and optimism. It can be so strong that it affects thinking and judgement. Someone may believe strange things, make bad decisions or behave in embarrassing, harmful and - occasionally dangerous ways.

Like depression, it can make it difficult or impossible to deal with day-to-day life. Mania can badly affect both relationships and work. When it isn't so extreme, it is called 'hypomania'.

If someone is in the middle of a manic episode for the first time, they may not realise that there is anything wrong – although their friends, family or colleagues will. They may even feel annoyed if someone tries to point this out to them. They increasingly lose touch with day-to-day issues and with other people's feelings.





What does mania feel like?

If you become manic, you may notice that you are:

Emotional	Thinking	Physical	Behaviour
 Very happy and excited Irritated with other people who don't share your optimistic outlook Feeling more important than usual 	 Full of new and exciting ideas Moving quickly from one idea to another Hearing voices that other people can't hear 	 Full of energy Unable or unwilling to sleep More interested in sex 	 Making plans that are grandiose and unrealistic Very active, moving around very quickly and behaving unusually Talking very quickly - other people may find it hard to understand what you are talking about Making odd decisions on the spur of the moment, sometimes with disastrous consequences Recklessly spending your money Over-familiar or recklessly critical with other people Less inhibited in general





Psychotic Symptoms

If an episode of mania or depression becomes very severe, a person may develop psychotic symptoms.

In a manic episode, these will tend to be grandiose beliefs about themselves or others, for example that they are on an important mission or that they have special powers and abilities.
 In a depressive episode, they may feel uniquely guilty, worse than anybody else, or even that they don't exist.

As well as these unusual beliefs, they might experience hallucinations, which is when they hear, smell, feel or see something, but there isn't anything (or anybody) there to account for it.





Treatments

There are some things you can try to control mood swings so that they stop short of becoming fullblown episodes of mania or depression. These are mentioned below, but medication is still often needed to:

- Stabilise your mood (prophylaxis)
- Treat a manic or depressive episode

Medications to stabilise mood

There are several mood stabilisers, some of which are also used to treat epilepsy or schizophrenia. A psychiatrist may need to use more than one medication to control mood swings effectively, such as Lithium.

Other mood stabilisers

There are other medications, apart from Lithium, that can be used to help.

- Anti-epileptic medications/anticonvulsants: it is possible that Sodium Valproate, an anticonvulsant, works just as well Lithium, but there isn't enough evidence to be sure. It should not be prescribed to women of child-bearing age
- Carbamazepine and Lamotrigine are also effective for some people
- Antipsychotic medications such as Olanzapine or Quetiapine





- Eat a well-balanced diet.
- Drink unsweetened fluids regularly. This helps to keep your body salts and fluids in balance.
- Eat regularly to maintain your fluid balance.
- Watch out for caffeine in tea, coffee or cola. This makes you urinate more, and so can upset your Lithium level.





Self-monitoring: Learn how to recognise the signs that your mood is swinging out of control so you can get help early. You may be able to avoid both full-blown episodes and hospital admissions. Keeping a mood diary can help to identify the things in your life that help you, and the things that don't.

Knowledge: Find out as much as you can about your illness - and what help there is. There are sources of further information at the end of this leaflet. See <u>support</u> groups and caring organisations.

Stress: Try to avoid particularly stressful situations - these can trigger off a manic or depressive episode. It's impossible to avoid all stress, so it may be helpful to learn ways of handling it better. You can do relaxation training with CDs or DVDs, join a relaxation group, or seek advice from a clinical psychologist.





Relationships: Depression or mania can cause great strain on friends and family; you may have to rebuild some relationships after an episode. It's helpful if you have at least one person that you can rely on and confide in. When you are well, try explaining the illness to people who are important to you. They need to understand what happens to you - and what they can do for you.

Activities: Try to balance your life and work, leisure, and relationships with your family and friends. If you get too busy you may bring on a manic episode. Make sure that you have enough time to relax and unwind. If you are unemployed, think about taking a course, or doing some volunteer work that has nothing to do with mental illness.

Exercise: Reasonably intense exercise for 20 minutes or so, three times a week, seems to improve mood.





Fun: Make sure you regularly do things that you enjoy and that give your life meaning.

Continue with medication: You may want to stop your medication before your doctor thinks it is safe – unfortunately this often leads to another mood swing. Talk it over with your doctor and your family when you are well.

Have your say in how you are treated: If you have been admitted to hospital for bipolar disorder, you may want to write an 'advance directive' with your doctor and family to say how you want to be treated if you become ill again.





Mania or depression can be distressing – and exhausting - for family and friends.

Dealing with a depressive mood episode

It can be difficult to know what to say to someone who is very depressed. They see everything in a negative light and may not be able to say what they want you to do. They can be withdrawn and irritable, but at the same time need your help and support. They may be worried, but unwilling or unable to accept advice. Try to be as patient and understanding as possible.

Dealing with a manic mood episode

At the start of a manic mood swing, the person will appear to be happy, energetic and outwardgoing - the 'life and soul' of any party or heated discussion. However, the excitement of such situations will tend to push their mood even higher. So try to steer them away from such situations. You can try to persuade them to get help, or get them information about the illness and self-help. Practical help is very important – and much appreciated. Make sure that your relative or friend is able to look after themselves properly.





Support for Staff

Helping the people we support to stay well

In between mood episodes, find out more about bipolar disorder. It may be helpful to go with your friend or loved one to any appointments with the GP or psychiatrist.

Staying well yourself

Give yourself space and time to recharge your batteries. Make sure that you have some time on your own, or with trusted friends who will give you the support you need. If your relative or friend has to go into hospital, share the visiting with someone else. You can support your friend or relative better if you are not too tired.





Dealing with an emergency

- In severe mania, a person can become hostile, suspicious and verbally or physically explosive
- In severe depression, a person may start to think of suicide

If you find that they are:

- seriously neglecting themselves by not eating or drinking
- behaving in a way that places them, or others, at risk
- talking of harming or killing themselves
- ... then seek medical help immediately.

Keep the name of a trusted professional (and their telephone number) for any such emergency. A short admission to hospital may sometimes be needed.





Support groups and external help

<u>Bipolar UK</u>: Provides support, advice and information for people with bipolar disorder, their friends and carers. **Support line:** 0333 323 3880 **Website:** www.bipolaruk.org

<u>Bipolar Fellowship Scotland:</u> Provides information, support and advice for people affected by bipolar disorder and all who care for them. Promotes self-help throughout Scotland, and informs and educates about the illness and the organisation. **Support line**: 0141 560 2050

Depression Alliance: Information, support and understanding for people who suffer with depression, and for relatives who want to help. Self-help groups, information, and raising awareness for depression. Support line: 0845 123 23 20 Email: information@depressionalliance.org

<u>Journeys - towards recovery from depression:</u> Welsh organisation which supports people affected by depression. **Support line:** 029 2069 2891 **Email**: info@journeysonline.org.uk

Samaritans: Confidential, non-judgmental support 24 hours a day by telephone and email for anyone who is worried, upset, or suicidal. Support line: 08457 90 90 90 (ROI 1850 60 90 90) Email: jo@samaritans.org





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