



A GUIDE TO  
BIPOLAR  
DISORDER



You're not alone ...  
bipolar disorder  
affects 8 million  
Americans and  
their families.  
Learn more  
about it.

ACP

AMERICAN COLLEGE OF PHYSICIANS  
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AstraZeneca 



A GUIDE TO

# BIPOLAR DISORDER

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# WHAT IS BIPOLAR DISORDER?

Bipolar disorder is a type of mental illness where a person's moods swing from "highs" to "lows." It used to be called "manic depression." People with bipolar disorder have moods that swing widely from "very high" to "very low." For others, the mood swings are not as extreme.

The mood swings of bipolar disorder are believed to be caused by problems in the part of the brain that keeps mood balanced. It's normal to feel full of energy, outgoing, and happy sometimes. It is also normal sometimes to feel low, quiet, and sad. People with bipolar disorder swing higher or lower than normal. When they are "up," they have so much energy that they make wild plans and take risks. They may believe things that are not true. When they are "down," they lose all hope and see every glass as half empty. They may even think about suicide.

Bipolar disorder is among the most common types of mental illness, affecting about 8 million adults in the United States. It often shows up in the late teen years, early 20's, or early 30's. Many times family and friends don't know what has happened. They just think the person is very moody, or "difficult." There is no sharp line between mood swings that are "normal" and those that are "not normal." But there are some clear tell-tale signs.



"I tended to sit and brood about life. I daydreamed a lot—at home, in class. When I was young I didn't like reality, so I tried to escape it however I could. I became a train wreck after I left home for college. I suddenly became promiscuous. I started drinking and doing drugs. Then my first severe depression grabbed hold of me. I remember wanting to just sink into myself and disappear from life."

—Gretchen

# WHAT ARE THE SIGNS OF BIPOLAR DISORDER?

There is no test for bipolar disorder. But a trained health professional can diagnose the disorder using careful questioning and observation.




## Here are some of the common signs of the “highs” or “manic” stages of bipolar disorder:

- Inflated self-esteem and self-confidence
- Reduced need for sleep
- More talkative than usual
- Racing thoughts
- Distractibility—can’t stick to a task and can't concentrate
- Increase in activity directed toward a specific goal
- Doing a lot of things that give pleasure or are risky, such as spending sprees, lots of sex, or risky business ventures

If a person has a “high” mood plus three or more of these symptoms for a week or more and it interferes with their work or social life, they may be manic. During such a time, a person might fly to Europe, not tell anyone—and take along a new-found friend. They might suddenly buy a new car or house. They might work feverishly at a project for days with no sleep. Or they might believe they are Joan of Arc and begin acting the part.

## The flip side of mania is **depression**. The most common symptoms include:

- 
- A lasting sad, anxious, or empty mood
  - Feelings of guilt, feeling worthless, or helpless
  - Loss of interest or pleasure in activities once enjoyed, including sex
  - Less energy, feeling very tired or being "slowed down"
  - Can't concentrate, remember, or make decisions
  - Restless or irritable
  - Sleeping too much, or can't sleep
  - Change in appetite, gain or lose weight without trying
  - Thoughts of death or suicide, or suicide attempts

If five or more of these symptoms have been present during the same 2-week period and at least one of the symptoms is either a depressed mood or a loss of interest or pleasure, then it could be depression.

Bipolar disorder can be hard to diagnose, even for a doctor. Sometimes it is confused with depression because a person has not yet had a manic attack. But once the right diagnosis is made, people often feel a great sense of relief.

It can be a comfort to know that you're not alone. It helps to know you're not “crazy.” It can help to know that the problems you have are believed to be caused by chemical changes in your brain. They have nothing to do with how you were brought up or life choices you have made. The important thing, if you suspect bipolar disorder in yourself or a loved one, is to go to a doctor. You can't diagnose this problem yourself!

# WHAT DOES BIPOLAR DISORDER FEEL LIKE?

The high and low moods of bipolar disorder often grow over the course of several days or weeks. They start with mood changes that are not much different from normal, just a little

higher or lower. In fact, the early stages of a manic attack are often described by those who have them as “great.” They have energy. They are excited. Ideas come easily and quickly. They feel more sexual. A person has an enthusiasm that can be very charming. This early manic state can feel very good. Even people who have suffered terribly from bipolar disorder may want to quit their medicines so they can experience a manic state again.



But for some people the mood gets out of hand. Thoughts begin to race. Self image distorts (“I’m the best chef in the country”). Sometimes false or untrue beliefs grow (“the FBI is watching me because they want to know my secrets”). A severe manic attack can involve hearing or seeing things that aren’t real, but they are scary and seem real. At its worst, a manic episode is so wild that the person is out of touch with reality.

The low times of bipolar disorder are just the opposite of the high times. Things look bleak, pointless, and empty. Even the smallest tasks seem much too hard. All hopes and plans seem worthless or stupid. The pain of the darkness makes suicide look good. As with manic episodes, people vary a lot in how often they feel depressed. Sometimes it happens several times a year, sometimes only every few years.



I couldn’t really concentrate, I couldn’t focus on what I was doing and that causes major problems. You become a procrastinator or you just don’t do what you are supposed to do.

—Jim

# THE RISK OF SUICIDE

The risk that a person with bipolar disorder will try or succeed in killing him or herself is very high. The risk is 10 to 20 times higher than the risk in the general population.

This is one of the reasons it's important to seek help rather than try to "tough it out."

Signs that a person might be thinking about suicide include

- Talking about feeling suicidal or wanting to die
- Feeling hopeless or helpless
- Feeling like a burden to family and friends
- Abusing alcohol or drugs
- Putting affairs in order
- Writing a suicide note
- Doing very risky things that endanger life

**If you or someone you know is feeling suicidal, call a doctor, emergency room, or 911 right away.** Make sure the person is not left alone. Prevent access to large amounts of medication, weapons, or other items that could be used for self-harm. And even if the crisis passes, make an appointment to talk with a health care professional about the situation.



I didn't know which way to turn. That's when I got frustrated and thought that my life was over, that I didn't have anything to live for.

—Jim



Treatments found to reduce suicidal thoughts are

- Medications
- Psychotherapy—chiefly a problem-solving approach
- Family therapy—can be very helpful in cases of troubled teenagers

The goal in all cases is to help the person break out of his or her thoughts of suicide. Treatment aims to open connections between the troubled person and those around him or her. It tries to build a mental toughness. This, in the end, is the best protection of all against the tragedy of suicide.

# WHAT CAUSES BIPOLAR DISORDER?

Of all mental illness that involves mood, bipolar disorder has the strongest ties to family members. Studies show that having a relative with the disorder makes it more likely that you will also have the disorder.



Sadly, the way it may be inherited is not fully understood. It is not easy to predict. Scientists think that the problem is a change in the brain chemicals that control our moods.

Of course life events play a role as well. In a sense, biology can load the gun of bipolar disorder. But life events often pull the trigger. Major life stresses, such as loss of a loved one or a job, may trigger a “high” or a “low.” Or these stresses can make it harder to recover. Finding ways to ease the stress in one’s life (often with the help of a trained therapist) can speed recovery. It can help keep the “highs” or “lows” from returning.



There was a lot of depression in my family so it was nothing unusual. It’s something that many people in my family struggled with.

—Rita



# HOW IS BIPOLAR DISORDER TREATED?

As serious as it is, bipolar disorder can now be well controlled. But it cannot be cured. Like diabetes or high blood pressure, bipolar disorder is a chronic condition. It takes long-term treatment. You need to take medications as prescribed. Here are some general tips on how to keep the illness under control:

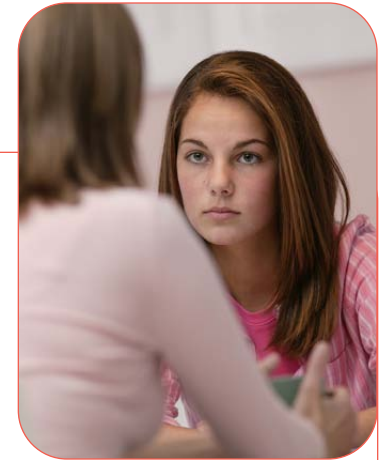
- Build a strong connection with your doctor.
- Report any serious mood changes as soon as you notice them. Your doctor may need to change your treatment plan from time to time.
- Keep a chart of your daily moods, treatments, sleep patterns, and stresses in your life. These can really help you and your doctor better understand the illness.

**Three types of treatments** are used to control bipolar disorder and help people cope with the severe mood swings. These are psychotherapy, medication, and electro-convulsive therapy (ECT).



It's very important to have a good connection with your doctor. It's a team effort to deal with bipolar disorder.

—Rita



## Psychotherapy

Psychotherapy can be very helpful to both the person with bipolar disorder and his or her family. Because people with bipolar disorder are often troublesome, they can cause those around them to be afraid or annoyed. They can cause people to hate them. These strong feelings may make matters worse for all involved.

Therapy can help everyone know what is going on. It gives people a chance to learn the best ways to act at times of stress or upset. It helps people listen to the thoughts and feelings of others. Using family therapy plus personal therapy works very well. It has been shown to help a person recover from bipolar disorder. And it has been shown to make the stable periods longer as well.

Your doctor may have the names of some therapists near you who are skilled in treating bipolar disorder. Therapy most often means talking with a trained therapist about your condition. You will talk about what has been happening and the best ways for you to cope with it. Long talks to explore your personal history are seldom needed. Note that this kind of talk therapy is most helpful if begun after your moods are stable. A person has to have energy to take an active part in the therapy. In bipolar disorder, this almost always requires taking a medication.

## Medication

It will likely take a number of weeks to work out the best treatment for you. Each person responds to medicine in a different way. You and your doctor can decide on the best treatment plan for you. Your medicine may have to be changed from time to time. No matter which medicine you take, follow these general rules:

- Always take your medicines as you were told. It does not matter how good you feel. It could be dangerous if you stop them suddenly for any reason.
- Keep in mind that medicine for bipolar disorder may have to be taken for life.
- Medications for depression can trigger a manic episode. Be sure to talk to your doctor if you have any concerns before taking such medications.
- Always tell your doctor about any other medicines, including over the counter and herbal treatments, that you may be taking.



It's just a good feeling to feel like a whole person again and to look forward to something.

—Jim



- Avoid alcohol. Do not take drugs that were not prescribed for you. Stay away from drugs used for “recreation.” All of them can strongly affect your mood and make it much harder to control extreme mood swings.
- Many people with bipolar disorder may be very sensitive to certain chemicals. Among these are caffeine and some prescription drugs. Knowing what you are sensitive to can help with your treatment.
- Studies show many people do best with several kinds of medicine rather than just one drug.
- Depending on the medicine you take, you could have side effects. They may include weight gain, nausea, dry mouth, hair loss, and movement problems. You could feel anxious and have shaky hands. You could have less sex drive. Be sure to tell the doctor about any side effects. He or she may change the dose or give you another medication to relieve the side effects you are experiencing.

## Electroconvulsive Therapy (ECT)

Modern ECT is controlled, painless, and brief. Most of all, it is a very helpful treatment for bipolar disorder. In fact, it is a better choice than medicine for some people. ECT is most useful for people who can't take a medicine due to its side effects or because they are pregnant.

ECT is done under general anesthesia. A controlled series of electric currents is sent to the brain through small discs that stick to the scalp. Most sessions take just 15 to 30 minutes. A standard course of ECT is six to twelve treatments. These are given about three times per week. Research with ECT in bipolar disorder found that most people get better with treatment. The most common side effects of ECT are confusion and loss of memory for recent events.



## Hospitalization

At some point in time, people with bipolar disorder may need to be in a hospital. When people are a danger to themselves or others, they need the total care given by a mental hospital. It can offer safety, medicine, and talk therapy. It can be a

great help for families. It links patients to outside services.


Most people being treated for bipolar disorder stay in the hospital for about 2 weeks. This can be a vital option. It can give needed comfort and support for both patients and those around them. It is most helpful when a patient cannot control his or her symptoms, does not take the prescribed medicine, or has little support from friends or family.

## Family Matters

No matter what the treatment plan for a person with bipolar disorder, family members are almost always involved. Bipolar disorder is really a family illness. Everyone needs to learn about the disease. And patients do best when everyone around them is working together.

Talking as a family with a therapist or a physician can really help. Every community has groups that can offer support to both a person with bipolar disorder and those involved in his

or her care. Ask your doctor about such groups or contact one of the organizations listed at the end of this booklet.



I don't think I recognized, as a professional, the effect this has on families until I walked in those shoes. If I could live a few of those years over again I probably would have done things differently because you don't treat just one person. It's really a family disease. It affects everyone.

—Carol (bipolar patient's wife)

## THE GOOD NEWS

Those who have bipolar disorder have good reason to be hopeful. New and better treatments have been discovered and are available. Mental illness is more widely understood. People know more about bipolar disorder. That means more people are being diagnosed and treated earlier in the course of the illness. Living a good life with bipolar disorder can be done. Those who might have been crippled by mood swings in the past can, today, almost always be helped to lead fulfilling lives.

## FOR MORE INFORMATION

### **American College of Physicians**

Philadelphia, PA

[www.doctorsforadults.com](http://www.doctorsforadults.com)

### **American Academy of Child and Adolescent Psychiatry**

[www.aacap.org](http://www.aacap.org)

202-966-7300

### **American Psychiatric Association**

[www.psych.org](http://www.psych.org)

703-907-7300

### **American Psychological Association**

[www.apa.org](http://www.apa.org)

800-374-2721

### **Depression and Bipolar Support Alliance**

[www.dbsalliance.org](http://www.dbsalliance.org)

800-826-3632

### **National Alliance for the Mentally Ill**

[www.nami.org](http://www.nami.org)

800-950-6264

### **National Institute of Mental Health**

[www.nimh.nih.gov](http://www.nimh.nih.gov)

301-443-4513

### **Mental Health America**

[www.nmha.org](http://www.nmha.org)

800-969-6642

**DISCLAIMER:** This guidebook and DVD program is intended for informational purposes only. No one should rely upon this information as the basis for medical decisions. Only a health care professional can make a diagnosis of bipolar disorder or prescribe appropriate treatment. Anyone requiring medical or other health care should consult a medical or health care professional. Any actions based on the information provided are entirely the responsibility of the user and of any medical or other health care professionals who are involved in such actions.

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For more information about internal medicine physicians, please visit [www.doctorsforadults.com](http://www.doctorsforadults.com).







# A GUIDE TO BIPOLAR DISORDER

Bipolar disorder is when a person's moods swing from "highs" to "lows." It used to be called "manic depression." Doctors now believe this disease is caused by a chemical imbalance in the brain. Bipolar disorder is one of the most common mental illnesses.

Those with bipolar disorder have good reason to be hopeful. Doctors are finding better treatments. Those who might have been crippled by mood swings in the past can almost always be helped to lead healthy lives today.

This guidebook and DVD will help you

- Learn more about bipolar disorder
- Understand how bipolar disorder can be treated
- Work with those around you to cope with this disorder

*"The past decade has seen tremendous progress in clinical options for patients with bipolar disorder. We have many more treatments with proven benefits, so the outlook now is much more hopeful."*

**– Gary S. Sachs, M.D.**

*Director, Bipolar Clinic and Research Program  
Massachusetts General Hospital*

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