

## **Bipolar disorder**

In bipolar disorder (previously called manic depression), we experience mood swings far beyond what most people ever experience in the course of their lives.

These mood swings may be low, as in depression, or high, as in periods when we might feel very elated.

These high periods are known as 'manic' phases. Many people have both high and low phases, but some will only experience either depression or mania. A more technical term used to describe this illness is 'bipolar affective disorder'.

This fact sheet will describe features of the disorder, the particular problems they present, ways of coping with them, and some of the treatments available.

Bipolar disorder is a serious condition, but with the right treatment, it's possible to live one's life without too much interference.

### **How common is it?**

It's much less common than simple depressive illness. About one in every hundred adults will suffer from manic depression at some point in their life. It can start at any time during or after the teenage years. Unlike other forms of depression, manic depression affects equal numbers of men and women.

### **What causes manic depression?**

Nobody understands this completely. But research has shown that manic depression does seem to run in



families, and that it seems to have more to do with our genes than with our upbringing. It seems that the parts of the brain which control our moods don't work properly – that's why the symptoms of manic depression can be controlled with medication.

Episodes of illness can sometimes be brought on by stressful experiences, lack of support, or physical illness. So, it's no use expecting someone with this problem to just 'pull themselves together'.

### **What does it feel like?**

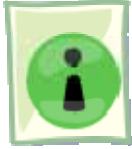
It depends on whether the sufferer is experiencing a manic or depressive mood swing. The two very different experiences are described below.

### **Depression**

We all experience feelings of depression from time to time. They can help us to recognise and deal with problems in our lives, but for someone with manic depression their depressive feelings will be worse, they will go on for longer and they will make it harder to tackle the daily tasks and problems of living. Someone with this sort of depression will be more likely to have the physical symptoms listed below. Not everyone who becomes depressed will have all these symptoms, but they will usually have several of them.

### **Mental symptoms**

- ✔ Feelings of unhappiness that won't go away
- ✔ Losing interest in things

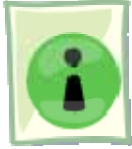


- ✔ Not being able to enjoy things
- ✔ Finding it hard to make even simple decisions
- ✔ Feeling utterly drained and tired
- ✔ Feeling restless and agitated
- ✔ Losing self-confidence
- ✔ Feeling useless, inadequate and hopeless
- ✔ Feeling more irritable than usual
- ✔ Thinking of suicide

### **Physical symptoms**

- ✔ Losing appetite and weight
- ✔ Difficulty in getting to sleep
- ✔ Waking earlier than usual
- ✔ Constipation
- ✔ Going off sex

If you become depressed, you may find that you aren't able to do your job or your normal daily tasks properly. It can become harder and harder to think positively about things and to see a hopeful future for yourself. You may feel like bursting into tears for no reason. You may find it difficult to be with other people. In fact, sometimes they may notice that you are not yourself before you have realised there is something wrong.



In mild depression you will usually be able to carry on with some or all of your regular activities. This can be very valuable as it can stop you from getting trapped in a vicious circle of pessimistic thinking that can make you feel worse. But you need to tell someone how you feel, both because that can be helpful in itself, but also so they can help.

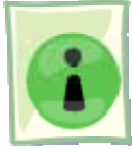
## **Getting help**

If you find that your depression is going on for more than a couple of weeks, that it is getting worse or that it is interfering with your normal activities, you should see your family doctor. Most people suffering from depression get the help they need from their GP. He or she can work out with you, what sort of help is going to be most useful.

In mild depression, counselling may be all that is needed. For moderately severe depression, psychotherapy and/or antidepressants may be needed.

For severe depression, antidepressants are usually necessary before psychotherapy can be of help and it usually needs the help of a specialist, a psychiatrist. Only a small number of people with depression ever need admission to hospital. They tend to have depressions that are life-threatening or are just not getting better.

If left untreated, depression can be so bad that life may not seem worth living. You may feel like ending the pain by killing yourself. If you find yourself thinking about this, you must get help by telling a friend; a professional or the Samaritans.



Feeling like this is a phase that many people with depression go through before they get better - it is important to remember that you will get better.

## **Counselling**

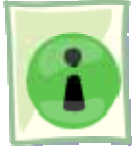
This is a way of talking over your problems with someone, a counsellor; who is not involved in your daily life. He or she can help by listening and allowing you to talk frankly in a way that it is sometimes difficult to do with family and friends. A counsellor may be able to help you to get a more helpful perspective on your problems. Putting feelings into words can help you to think about them more clearly, and to find practical and constructive ways of overcoming problems.

## **Psychotherapy**

There are many different types of psychotherapy. They are all ways of helping people to overcome stress, emotional problems, relationship problems or troublesome habits. What they have in common is that they are all treatments based on talking to another person and sometimes doing things together. Your GP will be able to refer you to a psychiatrist or psychologist for assessment for psychotherapy if this seems to be necessary.

## **Antidepressants**

These are medicines used to treat depression by correcting the chemical imbalance which accompanies depressed mood. The depression caused by manic depression usually requires this sort of treatment. Antidepressants are not simply 'feel-good' pills - they restore the depressed person to a normal mood level but will not improve the mood of someone who is not



depressed. Unlike tranquillisers, they are not addictive. They do have side effects - dry mouth, drowsiness and blurred vision are common with the 'tricyclic' antidepressants. Another form of antidepressants, the 'SSRIs', make some people feel a little sick or agitated when they start taking them. A third kind of antidepressant, the mono-amine oxidase inhibitors or 'MAOIs', mean that you have to avoid certain foods such as cheese and red wine. Your doctor will be able to recommend the type of antidepressant that is most appropriate for you.

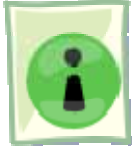
All antidepressants take between 2 and 6 weeks to work properly. People generally find that their sleep and their appetite improve before their mood lifts. During this period when your mood is still low, support from friends and family is especially important, because it can sometimes feel as if you are never going to get better.

You should be seeing a GP or a psychiatrist regularly during this time, so that any problems with the tablets can be quickly sorted out. Even when you are feeling better it is important to carry on taking the tablets as your GP or psychiatrist advises. If you stop them too soon, this can make it more likely that you will become depressed again.

The general rule is that you should carry on taking antidepressants for at least 6 months after your depression has lifted.

## **Mania**

Mania is an exaggeration of feelings that we all experience from time to time. It is the opposite of depression - a feeling of well-being, energy and optimism. Surely this can't be a problem? Well, actually it can. These



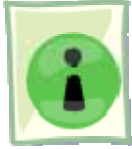
feelings can be so intense that you can lose contact with reality. When this happens you may find yourself believing strange things about yourself, making bad judgements and behaving in embarrassing, harmful and sometimes even dangerous ways.

Like depression, it can make it difficult or impossible to deal with life in an effective way. A period of mania can, if untreated, destroy your relationships and your work. When it isn't so extreme, doctors may use the word 'hypomania' to describe it. In an episode of mania, you may:

- ✔ Feel irritated with other people who don't share your optimistic outlook
- ✔ Feel full of energy
- ✔ Be unable or unwilling to sleep
- ✔ Be full of new and exciting ideas
- ✔ Feel more important than usual
- ✔ Believe that you are hearing voices that other people can't hear

**Other people may notice that you:**

- ✔ Are jumping very quickly from one idea to another
- ✔ Are making plans that are grandiose and unrealistic
- ✔ Are very active and moving very quickly
- ✔ Are behaving in a bizarre way



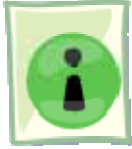
- ✔ Are speaking very quickly
- ✔ Are making odd decisions on the spur of the moment
- ✔ Are recklessly spending your money
- ✔ Are less inhibited about your sexual behaviour

When someone is in the middle of a manic episode for the first time, they usually do not realise that there is anything wrong. It is often friends, family or colleagues who first notice that there is a problem. Unfortunately the sufferer will often object if anyone tries to point this out. This is quite understandable because people experiencing a manic mood swing often feel better than they ever have done before. The trouble is that this wonderful sense of happiness leads you to become increasingly detached from day-to-day reality.

When a sufferer has recovered from one of these episodes they will often regret the things that they did while they were high.

## **Self-Management**

If you suffer from manic mood swings, the most important thing is to be able to recognise the warning signs. This means that you can get help before you are feeling so good that you do not realise that there is a problem. This is not easy at first, but is possible with practice and gives you more control over your life. It can also make it less likely that you will need to be admitted to hospital. Friends, relatives or a trusted professional may be able to help as they may recognise the warning signs before you do. In fact you will probably feel very well and may resent people saying that they are worried about you. At this point it can



be very difficult to listen to people who care for you and want you to stay well. Admission to hospital can be needed, usually for your own protection, but is less likely to happen if you can catch the episode early.

## **Drug treatment**

### **Controlling a manic mood swing**

If you are experiencing a manic mood swing, treatment will usually be started with anti-psychotic drugs. These are sometimes called major tranquillisers because the older anti-psychotics (Chlorpromazine, Haloperidol) have this effect. They can also have other unpleasant side-effects such as stiffness, shakiness, dizziness and dry mouth.

However, some drugs (Risperidone, Sulpiride) can stabilise a manic swing without so much of the drowsiness and other unpleasant side-effects of the older drugs. Once the treatment has started the symptoms should improve within a few days, but may take a few weeks to have their full effect. You should check with your GP if you wish to drive while still taking this sort of medication. It may be tempting to stop taking the tablets before your doctor recommends, either because of the side effects or because you don't seem to need them any more. This is unwise, bearing in mind how catastrophic the consequences of a manic episode can be. One way of feeling better about going on with the treatment is to discuss this with your doctor and your family when you are well.

You can decide in advance how you want to be treated when you are ill.

### **Stopping the mood swings - helping yourself**



## **Knowledge**

Find out as much as you can about your illness and how you can be helped.

## **Stress**

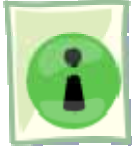
Avoid stressful situations - we know that these can trigger off a manic or depressive episode. We can't avoid all stress in our life, so it's also helpful to learn how to handle stress better. You can do relaxation training yourself with tapes or CD's, join a relaxation group or seek advice from a therapist. Your GP will be able to help you find what you need locally.

## **Relationships**

We all need people we feel close to and with whom we can share both the good and bad things in our lives. Without them it can be difficult to feel good about ourselves or to be happy. However, episodes of depression or mania can cause great strain on friends and family - you may find that you have to rebuild some relationships after such a time. It's important that you have at least one person that you can rely on and confide in. When you are well, you might want to explain the illness to people who are important to you, so that they know what to expect and understand it.

## **Activities**

It is vital to balance your life between work, leisure and relationships with your family and friends. A lot of people with bipolar disorder tend to get too busy when they feel well - it's important not to do this. Make sure that you have



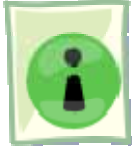
enough time to relax and unwind. If you are unemployed, think about taking courses or doing some volunteer work.

## **Stopping the mood swings**

Lithium is a naturally occurring substance, given as a tablet or liquid, which is an effective way of preventing mood swings for many people. It can also strengthen the effect of antidepressants. Treatment with Lithium is usually started by a psychiatrist, although once it is stabilised it may be taken over by a GP. If this doesn't work, there are other possibilities that you can discuss with your psychiatrist. It can take some time for Lithium to work properly, so you may have to be patient and persistent in taking the tablets if nothing very much seems to be happening.

Side effects can happen in the first few weeks after starting Lithium treatment. They can be irritating and unpleasant but often disappear or get better with time. They may include:

- ✔ Feeling thirsty
- ✔ Passing more urine than usual
- ✔ Slight muscle weakness
- ✔ Occasional loose stools
- ✔ Fine trembling of the hands
- ✔ A feeling of being mildly ill
- ✔ Weight gain



If the level of Lithium in your blood is too high, you will experience:

- \* Vomiting
- \* Staggering
- \* Slurred speech
- \* Drowsiness

If this happens you must contact your doctor urgently.

## **Blood Tests**

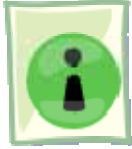
At first you will need blood tests every week to make sure that you have enough Lithium in your blood, but not too much. You will need to have these tests for as long as you take Lithium, but less often after the first few months. You will also need to have blood tests every few months to make sure that your thyroid gland is working properly.

## **Diet**

You should eat a well-balanced diet and, especially, drink regular amounts of unsweetened fluids. By doing this you can make sure you have a proper balance of salts in your body. Try to eat regularly and to avoid drinking too much tea, coffee or cola. These all contain caffeine - this makes you urinate more than usual and so can upset your Lithium levels.

## **Pregnancy**

If you become pregnant, it's usually best to stop Lithium, but it is essential to ask your doctor about this. It is



advisable not to breast feed your baby if you need to take Lithium.

## **Advice for family and friends**

Episodes of mania or depression can be very distressing for family and friends. A manic episode can exhaust all those who are close to the person. Depression can leave family and friends feeling completely powerless to help.

## **Helping a depressed relative or friend**

It is often difficult to know what to say to someone who is very depressed - it may seem that you can't say anything right because they interpret everything in a very pessimistic way. It can be very difficult to know what they want - this is hardly surprising because often the depressed person does not know themselves what they want. They may be very withdrawn and irritable but at the same time unable to do without your help and support. They may be very worried but unwilling or unable to accept advice. So try to be as patient and understanding as possible. Practical help may be easier to offer, and is very important.

Make sure that your relative or friend is able to look after themselves properly. If you find that they are seriously neglecting themselves by not eating or drinking, seek medical help immediately. If they talk of harming or killing themselves, this should be taken seriously and professional help should be obtained. It is important that you give yourself space and time to recharge your batteries. Make sure that you are able to spend some time on your own or with trusted friends who will give you the support you need at this time.



If your relative or friend has to go into hospital, make sure that you share the visiting with someone else. You will be better able to support your friend or relative if you yourself have had some time to rest.

### **Helping a manic friend or relative at the start of a manic mood swing**

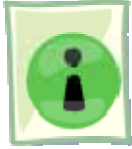
The person will appear to be happy, energetic and outward-going, the 'life and soul of the party'. They will relish being the centre of attention and will enjoy social occasions such as parties or heated discussions. However, these will tend to increase the sufferer's level of excitement and will tend to make their mood even higher. So, it is a good idea to keep them away from such situations if possible while you try to persuade them to seek help.

They will benefit from information about the illness, advice about how to help, and practical support. If a manic swing has become severe, the person may become hostile, suspicious and verbally or physically explosive. Don't get into arguments but get professional help immediately.

You should keep a contact telephone number and the name of a trusted professional handy for any such emergency. There may be times when it is necessary for the manic person to have a short admission to hospital to protect them from getting into trouble.

### **Looking after children**

It is very helpful if those caring for the sick parent can give some thought as to how the children may be affected. A sick parent may temporarily not be able to:



Look after their children as they normally would - washing, dressing, feeding or disciplining them.

Take responsibility for the child's daily routine - planning meals, making arrangements for childcare, making sure clothes are clean.

Explain why their behaviour has changed, answer their questions and give them the reassurance and support they need.

When a parent is unable to look after their child in the normal way, the child will often feel anxious and confused. When young children cannot express their feelings in words they will often express their distress through behaviour that is difficult or clingy. Your children may worry that they have caused the illness and may feel to blame. They will need to be reassured that they are not to blame and also to be shown what they can do to help. When an older child takes responsibility for caring for a sick parent they will need special understanding and practical support.

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