What is Bipolar mood disorder?
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Bipolar mood disorder is a form of depressive disorder that used to be called manic depressive illness.

People with bipolar mood disorder experience extreme mood swings - from depression and sadness to elation and excitement. The mood swings tend to recur, can vary from mild to severe, and can be of different duration.

Bipolar mood disorder affects about one percent of the Australian population, and severe disorder is experienced by about one in 200 people at any given time.

Early recognition and effective early treatment is vital to the future well-being of people with bipolar mood disorder. With effective treatment, people can live full and productive lives.

What are the symptoms of bipolar mood disorder?

Depression

Depression is the main mood disturbance for most people with bipolar disorder and is evident by:

- Loss of interest and pleasure in activities enjoyed before.
- Overwhelming sadness.
- Withdrawing from friends and avoiding social activities.
- Ceasing self-care tasks like shopping and showering.
- Changes to appetite and sleep patterns.
- Lack of concentration, extreme tiredness, and feelings of guilt or worthlessness.
- Development of false beliefs (delusions) of persecution or guilt for some people.

Harmful alcohol and other drug use often co-occurs with symptoms of depression.
This makes treatment more complex, so that effectively managing alcohol and other drug use is important.

Risk of suicide is heightened for people experiencing depression.

For more information on depression, read the brochure: *What is a depressive disorder?*

**Mania**

The term ‘mania’ is used to describe the most severe state of extreme elation and overactivity. A small number of people with bipolar mood disorder experience only episodes of mania and do not experience depressive episodes.

Common symptoms of mania include varying degrees of the following.

- Elevated mood - the person feels extremely high, elated, and full of energy. The experience is often described as feeling on top of the world and invincible.
- Increased energy and over-activity.
- Reduced need for sleep.
- Irritability - the person may get angry and irritable with people who disagree or dismiss their sometimes unrealistic plans or ideas.
- Rapid thinking and speech - thoughts are more rapid than usual. This can lead to the person speaking quickly and jumping from topic to topic.
- Recklessness - this can be the result of the person’s reduced ability to foresee the consequences of their actions, such as spending large amounts of money buying items that are not really needed.
- Grandiose plans and beliefs - it is common for people experiencing mania to believe they are unusually talented or gifted, or are kings, film stars or prime ministers for example. Often religious beliefs intensify or people believe they are an important religious figure.
- Lack of insight - people experiencing mania may not recognise that their behaviour is inappropriate, although they may understand that other people see their ideas and actions as inappropriate, reckless, or irrational.
- Mania is diagnosed when symptoms have been present for a week or more. Hypomania is less severe and may have shorter duration.
Normal moods

Most people who have episodes of mania and depression experience normal moods in between. They are able to live their lives productively and manage home and work commitments.

It is when moods become extreme and interfere with a person’s life that assessment and treatment for mental illness becomes necessary.

What causes bipolar mood disorder?

Men and women have an equal chance of developing this mental illness. It most commonly appears when people are in their twenties but may occur earlier or later in life.

It is believed that bipolar mood disorder is caused by a combination of factors including genetics, biochemistry, and environmental factors.

Genetic factors

Studies of close relations, such as identical twins and adopted children whose natural parents have bipolar mood disorder, strongly suggest that the illness is genetically transmitted. Children of parents with the disorder have a greater risk of developing it.

Biochemical factors

Mania, like depression, is thought to be due, in part, to a chemical imbalance in the brain. This can be treated with medication.

Stress

Stress may play a part in triggering symptoms, but not always. Sometimes the illness itself may cause the stressful events (such as divorce or a failed business), which may then be blamed for the illness.

What treatment is available?

Effective treatments are available for bipolar mood disorder. Education about the illness and learning to recognise early warning signs of an episode and how to take preventive action is important. Peer support can be particularly helpful in this way.
Specific medications help to manage mood swings.

For the depressive phase of this illness, anti-depressant medications can relieve depressed feelings, restore normal sleep patterns and appetite, and reduce anxiety. Anti-depressant medications are not addictive. They slowly return the balance of neurotransmitters in the brain, taking one to four weeks to achieve their positive effects.

During acute or severe episodes of mania, several different medications are used. Some are used to calm the person’s manic excitement; others help stabilise the person’s mood.

Some medications are also used as preventive measures as they help to control mood swings and reduce the frequency and severity of depressive and manic phases. Long-term medication may be required to prevent recurrent episodes.

Lifestyle changes, such as physical exercise and reducing harmful alcohol and other drug use and other triggers of episodes, can assist people to recover.

Psychological interventions can be an important component of treatment. Therapies, such as cognitive behavioural therapy (CBT), are aimed at changing patterns of thinking, behaviours, and beliefs that contribute to the illness.

Interpersonal therapies help people to learn new ways to relate to important people in their lives.

When people are in a manic episode, it can be difficult to persuade them that they need treatment. It is sometimes necessary for a person to be hospitalised if symptoms are severe.

Many people are never hospitalised and their health care is delivered entirely in the community.

With access to appropriate treatment and support, people with bipolar mood disorder live full and productive lives.

The family and friends of people with bipolar mood disorder can often feel confused and distressed. Support and education, as well as better community understanding, are an important part of treatment.
Where to go for help

- Your general practitioner.
- Your community health centre.
- Your community mental health centre.

For information on services, check the Community Help and Welfare Services and 24-hour emergency numbers in your local telephone directory.

For immediate counselling assistance, contact Lifeline on **13 11 14**. Lifeline can also supply you with contacts, further information and help.

More information is available at:

- www.beyondblue.org.au
- www.blackdoginstitute.org.au
- www.ranzcp.org
- www.sane.org

About this brochure

This brochure is part of a series on mental illness funded by the Australian Government under the National Mental Health Strategy.

Other brochures in this series include:

- What is mental illness?
- What is an anxiety disorder?
- What is a depressive disorder?
- What is an eating disorder?
- What is a personality disorder?
- What is schizophrenia?

Free copies of all brochures are available from Mental Health and Workforce Division of the Australian Government Department of Health and Ageing:

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