

# Bipolar Disorder

Children with Bipolar Disorder go back and forth between two emotional states: mania and depression. Although Bipolar Disorder is usually diagnosed in adults, the disorder can begin in childhood. All children have “mood swings” from time to time, but children with Bipolar Disorder constantly switch between manic and depressed moods. The frequency of these mood changes can vary among children.

## SIGNS AND SYMPTOMS

Typical manic signs and symptoms of Bipolar Disorder include:

- Severe changes in mood—either unusually happy or silly or very irritable, angry, agitated, or aggressive
- Unrealistically high self-esteem
- Significant increases in energy and the ability to go with little or no sleep for days without feeling tired
- Increase in talking—the child talks too much or too fast, changes topics too quickly, and cannot be interrupted
- Distractibility—the child’s attention moves constantly from one thing to the next
- Repeated high risk-taking behavior, such as abusing alcohol and drugs, reckless driving, or sexual promiscuity

Typical depressive signs and symptoms of Bipolar Disorder include:

- Irritability, depressed mood, persistent sadness, or frequent crying
- Thoughts of death or suicide
- Loss of enjoyment in favorite activities
- Frequent complaints of physical illnesses, such as headaches or stomachaches
- Low energy level, fatigue, poor concentration, or complaints of boredom
- Major changes in eating or sleeping patterns, such as overeating or oversleeping



## RESOURCES

Child and Adolescent  
Bipolar Foundation  
[www.cabf.org](http://www.cabf.org)

Depression and  
Bipolar Support Alliance  
800-826-3632  
[www.ndmda.org](http://www.ndmda.org)

*New Hope for Children  
and Teens with Bipolar Disorder:  
Your Friendly, Authoritative Guide  
to the Latest in Traditional and  
Complementary Solutions (2004)*  
By Boris Birmaher

## EVALUATION AND DIAGNOSIS

Bipolar Disorder can be a very dangerous condition in children, with both the manic and depressive symptoms having an impact on all aspects of their lives. Unfortunately, diagnosing Bipolar Disorder is complex. Bipolar Disorder can be diagnosed at any point in childhood, but it tends to be more common in adolescence. If you think your child has Bipolar Disorder, your child may need a comprehensive psychiatric evaluation. For more information, turn to **MENTAL HEALTH EVALUATIONS (p39)**.

## TYPICAL CO-EXISTING DIAGNOSES

Common mental health diagnoses that co-exist with Bipolar Disorder include:

- Anxiety Disorders (p48)
- Attention Deficit Hyperactivity Disorder (ADHD) (p52)
- Conduct Disorder (p64)
- Substance Abuse and Dependence (p94)

## TREATMENT

Treatment of Bipolar Disorder usually requires a team-based approach. The team should include a psychotherapist and a child and adolescent psychiatrist. For more information on mental health specialists, turn to page 106 in **MENTAL HEALTH SUPPORT**. The team could also include a care manager to help coordinate a child's treatment. For more information on health insurance care managers, turn to page 144 in **MENTAL HEALTH SUPPORT**.

The treatment should address school, work, social, and family functioning. Treatment may include psychoeducation, psychotherapy, and mood stabilizing medications. For more information, turn to **MENTAL HEALTH TREATMENT (p147)**. A family support group can also be helpful.

If Bipolar Disorder is affecting the child's ability to learn, adjustments may need to be made in his or her education program. For more information on the school system, turn to page 118 in **MENTAL HEALTH SUPPORT**.

# Diagnosing Bipolar Disorder

## HOW COMMON IS BIPOLAR DISORDER?

At the moment, it is hard to say. Psychiatrists have not agreed upon a common definition of Bipolar Disorder in children. Some professionals have a more limited and narrow definition, and some have a more broad and general definition. Also, there is a lack of long-term research on this disorder in children. It is thought that about 1% of children have Bipolar Disorder, which is similar to the number of adults with the disorder. About 59% of adults with Bipolar Disorder report that their symptoms started in childhood.

## IF MY CHILD IS DEPRESSED, WHAT ARE THE RISK FACTORS FOR DEVELOPING BIPOLAR DISORDER?

Risk factors for developing Bipolar Disorder include:

- A family history of Bipolar Disorder
- Medication-induced mania or hypomania
- Sudden onset of symptoms
- Delusions (fixed false beliefs)
- Moving very slowly (psychomotor retardation)
- Significant increase in need for sleep

## WHAT DOES MANIA OR HYPO-MANIA LOOK LIKE IN A CHILD?

Mania is a period of extreme irritability that lasts for about a week (or less if hospitalization is necessary). During this time, the child would have three or more of the following symptoms:

- Significantly increased self-esteem (for example, feels like a superhero)
- Decreased need for sleep (for example, sleeps 3–4 hours and feels fully rested in the morning)
- Very talkative, difficult to interrupt, and uses rapid speech
- Racing thoughts (difficult to follow a linear path in his or her thoughts)
- Easily distracted
- Increase in goal-directed activity (normal activities done in large amounts)
- Engaging in pleasurable behaviors that are dangerous (for example, sexual talk or actions, or extremely wild driving)

Hypomania is a milder form of mania that does not last as long (4 days rather than 7 days) and is not severe enough to require hospitalization.

## HOW DO I KNOW IF IT IS ADHD OR BIPOLAR DISORDER?

Psychiatrists are working hard to answer this question. Hyperactivity is a common symptom in both ADHD and Bipolar Disorder—90% of bipolar cases have this symptom. Children who respond inconsistently to psychostimulants (medications that raise the mood or energy level) may have Bipolar Disorder, rather than ADHD. Also, children with ADHD have symptoms that are chronic, whereas mania occurs in episodes and reflects a change in functioning. A decreased need for sleep and increase in goal-directed activities are two distinguishing features of Bipolar Disorder. Children with ADHD can be irritable or feel a loss of pleasure or interest in usual activities due to decreased self-esteem and associated depression. Even more confusing is that some children may have both Bipolar Disorder and ADHD.

