When to call the doctor

Over and above the normal consultations, call the doctor when there are:

- Suicidal feelings or violent behaviour
- Changes in mood, sleep or energy levels
- An increase in medication side-effects
- An acute medical illness, a need for surgery, or an need for other medications

The vast majority of people with bipolar disorder respond well to treatment. The first step is to discuss your symptoms with an experienced professional, like your family practitioner.

SU/UCT MRC Unit on Risk and Resilience in Mental Disorders

The Research Unit on Risk and Resilience in Mental Disorders, to which the MHIC is affiliated, was established by the Medical Research Council (MRC) in 1997. The Unit is located at the Department of Psychiatry at the University of Stellenbosch and investigates the psychobiology and treatment of anxiety disorders, including obsessive-compulsive disorder (and related conditions), panic disorder, posttraumatic stress disorder, and social anxiety disorder. For more information about research trials, please visit the website below or contact the MHIC. www.mrc.ac.za/anxiety/anxiety.htm

For more information contact:

Mental Health Information Centre of Southern Africa (MHIC)
PO Box 241, Cape Town, 8000, South Africa

Tel: +27 (0)21 938-9229
Email: mhic@sun.ac.za
www.mentalhealthsa.org.za

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Bipolar Disorder

Western Cape Government
Health
FOR YOU

MENTAL HEALTH INFORMATION CENTRE
Southern Africa

What is bipolar disorder?

Bipolar disorder, also known as manic-depressive illness, is a brain disorder that causes extreme changes in mood, energy and the ability to function. The mood usually swings from overjoyed, irritable and/or aggressive (manic) to sad and hopeless (depression). Periods of fairly normal mood can be experienced between cycles.

Types of bipolar disorder

People with bipolar disorder type I have had at least one manic episode and periods of major depression. This was also called manic depression in the past.

People with bipolar disorder II have never had full mania. They experience hypomania (a mild form of mania) and major depressive episodes intermittently.

In cyclothymia there are, for a period of at least two years, hypomania and mild depression, which are never severe enough to be classified as a full manic and depressive disorder.

What causes bipolar disorder?

The exact cause of bipolar disorder is unknown, but it may be a combination of biochemical, genetic and psychological factors. Approximately 50% of patients with bipolar disorder have at least one parent with a mood disorder. The following may trigger a manic episode:

- life changes such as childbirth
- recreational drug use
- periods of sleeplessness
- medications such as anti-depressants or steroids

Who gets bipolar disorder?

Men and women are affected equally. It usually starts between the ages of 15-25 years.

Characteristic symptoms

Symptoms of a manic episode include:

- Increased energy, activity and restlessness
- Excessively high, euphoric mood
- Extreme irritability
- Spending sprees
- Distractibility (cannot concentrate)
- Little sleep needed
- Racing thoughts, rapid speech
- Poor judgment (excessive buying, sexual indiscretions)
- Inflated self-esteem
- Increased sociability
- Binge eating, drinking and/or drug use
- Denial that anything is wrong
- Symptoms of a depressive episode include:
- Persistent depressed mood, most of the day, almost every day
- Decreased interest and pleasure in almost all activities
- Insomnia or hypersomnia
- Feelings of worthlessness, self-reproach, guilt
- Tiredness, listlessness, restlessness or irritability
- Impairment in concentration
- Recurrent thoughts of death, suicidal ideation
- Change in appetite and/or weight gain/loss

Treatment

Bipolar disorder requires long-term treatment, since it is a chronic (ongoing), relapsing illness. The most effective treatment plan includes a combination of medication, psychotherapy, lifestyle changes and social support. Psychotherapy (talk-therapy) used to treat bipolar disorder includes cognitive behavioural therapy (CBT) and family-focused therapy. Psychotherapy may help you gain self-insight, change negative thoughts and feelings, and learn new behaviours and coping strategies. Talking about your emotions with a trained professional can help reduce symptoms.

Diagnosis of this disorder can be tricky and medication should be monitored closely by a psychiatrist. Medication is used to stabilize the extreme mood swings of mania and depression.

Mood-stabilizers provide relief or prevent acute episodes of depression or mania. Anti-depressants treat the symptoms of depression. Anti-psychotics treat psychotic symptoms such as delusions or hallucinations which may sometimes occur in bipolar disorder. Long-term treatment is important as maintenance treatment between episodes reduces the severity and frequency of depression and mania. Bipolar medications are powerful drugs. For this reason, medication should not be stopped without a doctor's supervision.