

**BIPOLAR DISORDER**

**FREDERICK EARLSTEIN**



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## Are You Moody?



If your mood is constantly changing uncontrollably then you most likely have a bipolar disorder. This is a brain disorder that causes a change in the energy and mood of a person and also loses the ability to function properly. This disorder includes three types of conditions. Patients with this condition have an intense and extreme emotional state. This usually occurs at certain times, which is why it is referred to as mood episodes. The mood episodes can be classified under three categories including manic, depressive, hypomanic.

People with this condition typically have normal mood periods as well. The good thing is that bipolar disorders can be managed and also treated. People with this condition can still lead to productive and full lives.

## Bipolar Episodes



The types of episodes as well as the severity of the symptoms that a patient goes through usually depend on the type of bipolar disorder either type I or type II, although there are other mental conditions that is also exhibiting symptoms similar to bipolar disorder.

### Manic Mode

A manic episode is identified when a person with bipolar disorder is experiencing very high or irritable emotional state. This extreme state is experienced for most of the day, and can last for a week or so. You can expect that the person is way more energetic as if they're on drugs. They are high as a kite, and when they get irritated, it would be like they are carrying the weight of the world on their shoulders.

Do you have these qualities?

Intense Multi-tasking

Extreme Confidence

Less need for sleep

Talks quickly and/or loudly

Exaggerated Grandiosity

Heightened risky behavior

Uncontrollable thoughts

Easily gets distracted

The changes are usually more noticeable within family and friends since they are the ones who know the person. These manic symptoms are usually severe enough to cause dysfunction in various life aspects of the patient. It can definitely cause problems in their family, social activities, work, school, responsibilities etc.

Those who were diagnosed with manic episode may require getting hospital care for them to stay safe and not accidentally harm themselves because of their condition. Manic episodes can start anytime from early childhood and adulthood, though it gets more pronounced when a person reaches 18 years old. It can also continue to later adulthood if not treated properly.

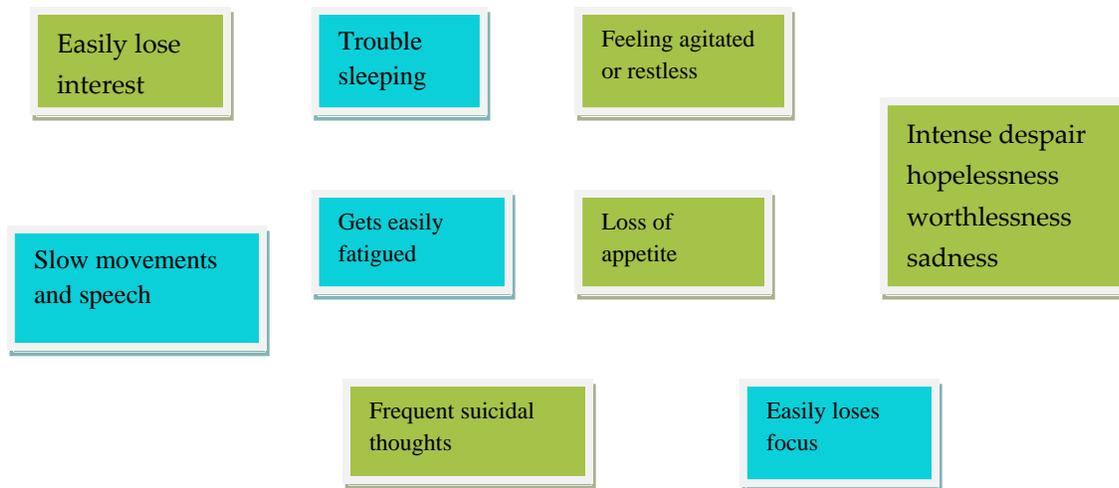
## Hypomanic Episode

A hypomanic episode is similar to the description of a manic episode though the symptoms only last for a couple of days, and usually less severe. Hypomanic symptoms don't lead to dysfunction and major problems that a manic episode exhibits which is why the person will still function on their day – to – day lives without too much disruption.

## Major Depressive Episode

When it comes to a depressive episode, the patient usually experiences this for 14 days.

Do you have these qualities?



## Managing Bipolar Disorder



The treatment and management of the bipolar disorder usually involve medication but it can also be in combination with psychotherapy or talk therapy. Keep in mind that each person is different which means the management of the disorder is personalized depending on the severity of the condition. Different people respond in different ways so there's no guarantee that medications and psychotherapy will immediately cure the illness. Patients may also need to try various combinations of medications and therapy methods to see what works or doesn't work for them.

Prescribed medications are also known as mood stabilizers. When it comes to psychotherapy, the patient can work with a mental health professional or a psychiatrist in order to deal with their condition, better understand what's happening and also rebuild relationships or their function in society.

### The Many Faces of Bipolar

Physicians have come a long way when it comes to understanding the different moods that a person with bipolar disorder exhibits. This thorough understanding enables them to make a more accurate diagnosis. Back then, bipolar disorder was confused with other kinds of mental – related problems such as unipolar depression, and schizophrenia. This is because the bipolar disorder has lots of similarities with other mental conditions. For instance, schizophrenia has symptoms of delusions, hallucinations and incoherent speech which sometimes are also present in other mental disorders.

As technology improves, physicians today have a greater understanding of various disorders. They can already rule out certain symptoms and factors. Doctors can also specifically identify based on signs and symptoms if the bipolar disorder is manic, depressive or hypomanic. For most cases, the disorder can be treated safely and effectively with medications.

## Physical Diagnosis



When it comes to diagnosis, most patients have gotten used to doing specialized blood tests as well as typical laboratory tests as it usually help physicians make an accurate findings. However, most imaging and lab tests are not useful to properly diagnosed bipolar disorder.

Perhaps the most important diagnostic tool is when a person consults with his/ her doctor to talk about the symptoms that one may be having. If you're feeling some sort of mood swings or unusual behaviors and a change in lifestyle habits, it's best to talk to a professional.

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

# BIPOLAR DISORDER

## What is bipolar disorder?

It is a kind of mental health disorder that causes a person to have emotional mood swings that are usually extreme – either a person becomes depressed (emotional low) or becomes emotionally manic (hypomania).

### Bipolar I Disorder

When a person has at least one manic episode or one depressive episode

### Bipolar II Disorder

When a person has more than one depression episodes and also one hypomanic episode. Hypomanic episodes are less severe than manic episodes

### Rapid – Cycling Bipolar Disorder

It has the same mood swing symptoms. The difference is that manic and depressive episodes are shorter and rapid

### Cyclothymic Disorder

This is the milder version of bipolar disorder. People diagnosed with it usually have mood disturbances that have alternate periods of hypomanic episodes as well as mild to moderate depression.

## STATS

Bipolar disorder in United States alone affects around **2% of adults**, and **nearly 80%** of them have been diagnosed as a severe case.

Most Common Psychotherapy Treatments include Cognitive Behavioral Therapy, Family - focused Therapy, Interpersonal & Social Rhythm Therapy, and Psycho - Education

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Obviously, physical tests can reveal the overall state of a patient. However, it's still important that you let your doctor know if you're feeling any signs and symptoms of bipolar disorder. In this way, the doctor can be more accurate with his diagnosis, and your illness will also be effectively and properly treated.

### Severity of the Symptoms

How the person acts during their bipolar episodes as well as how long the symptoms last is subjective and can vary greatly. For mood episodes, it can last for a couple of days to a week or two. Regardless of the bipolar disorder type, the episodes are interspersed with periods where they don't experience any symptoms or they are functioning on a normal state. This is very important to remember. Patients do not exhibit manic or depressive moods all the time.

## Bipolar Disorder Relapse



A psychiatrist prescribes medications as part of the patient's treatment plan. Keep in mind that bipolar disorder is a kind of recurring mental problem which means it can come back. There could be instances of relapse which is why ongoing preventive treatment is advised. In most cases, the condition can be controlled in a much better way if the patient receives continuous treatment.

Bipolar disorder can certainly interrupt a person's life. This can also create an intense and stressful environment around their personal and professional lives. This is why it's very important for them to get professional help. For family members, it's also good to join support groups so that they can learn strategies on how to deal with their relatives who have this condition. It's also a good thing for families to be an active part of treatment while gaining support for themselves.

## A Lifelong Condition



Bipolar disorder is a condition is a lifelong diagnosis that may around the early 20s. Some people do exhibit symptoms at a young age, while some feel it in their late adulthood. Usually, after the manifestation of 1<sup>st</sup> mood – elevate episodes, the patient will learn from their physicians that they are always going to be at risk of having another episode/s for the rest of their lives.

This is why a patient diagnosed with bipolar disorder will most likely need to work with a therapist all their lives as well as be on medication. You see, symptoms won't magically disappear just because you've been taking meds, going to therapy or simply taking the time and effort to develop coping methods. Having a mental health condition is like having a cold but it's in your head.

Sometimes you'll feel good, sometimes not so much; sometimes you need to sleep on it etc. Medication and therapy certainly helps if you want to go through this with ease. The key is to keep doing the right thing and embracing your condition so that you can find ways on how you can better deal with it.

## References

Bipolar Disorder – MedicalNewsToday.com

<https://www.medicalnewstoday.com/articles/37010>

Overview of Bipolar Disorder – Medscape.com

<https://emedicine.medscape.com/article/286342-overview>

Bipolar Disorder – DBSAlliance.org

<https://www.dbsalliance.org/education/bipolar-disorder/>

[www.canva.com](http://www.canva.com) (images)

[www.usedtotech.com](http://www.usedtotech.com) (ebook template)

### About

Retired high school biology teacher Frederick Earlstein lives to research. When his only niece was diagnosed with postural orthostatic tachycardia syndrome (POTS) at age 14, Earlstein felt helpless. His answer was to start researching the condition and sharing everything he learned with his sister and her family. That project not only resulted in a book on the subject, but also to the successful management of the girl's condition.

Earlstein applied the same approach to his own minor problems with blood pressure, allergies, and degenerative disc disease. "It's all about critical mass," he says. "When the notes on my laptop and those piled up on my actual desktop reach a certain level, I start realizing there's a book in there somewhere."

Writing about medical issues in plain English has become Earlstein's second career. After retiring from his career as an educator, he began looking around for something to occupy his time. "You can only clean out the garage so many times," he said. "I was trained to be an academic and old habits die hard."

Now Earlstein works daily in his home office on whatever manuscript he has at hand. He describes the work as the perfect combination of intellectual challenge and self-employment. "I decide what to write about and when to write it," Earlstein says. "Typically I pick a subject because I know someone who is grappling with the problem and with understanding the information they're being given."

A firm believer in the power of informed consent, Earlstein is appalled by how difficult the medical community makes it for the average person to really understand a condition and make good treatment choices. "There's no reason why this material can't be presented in plain English," he says. "You just have to make an effort to really understand what you're talking about."

Although Earlstein makes no claims of being a doctor himself, he does feel he has a good role as an interpreter. "I don't write about any condition until I've studied the material and have a good handle on the mechanics of the problem or the illness," he said. "I'm not shy about calling up a doctor or surgeon and asking questions."

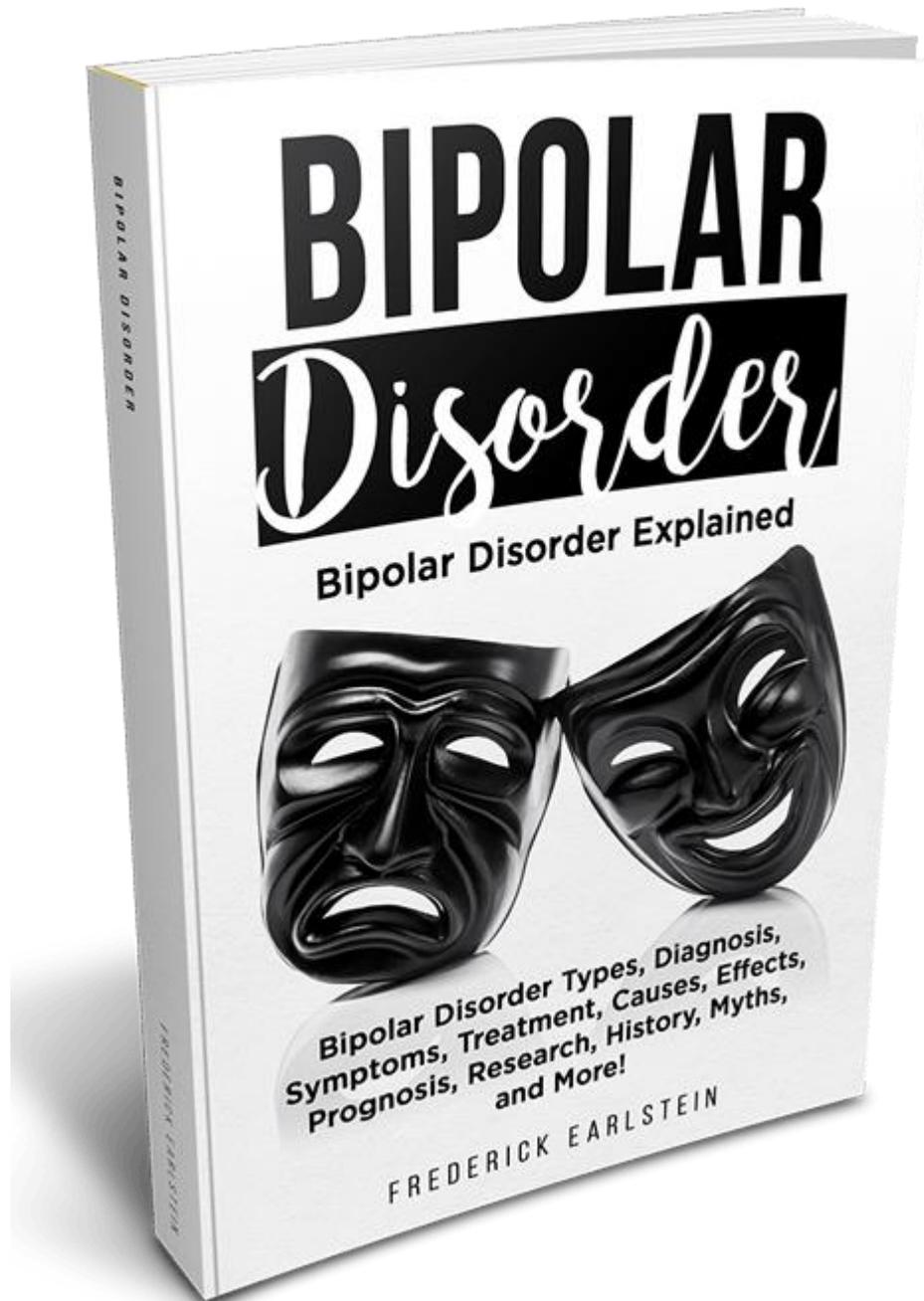
Recently, when his eye doctor told him he was suffering from eye strain, Earlstein immediately began to research the condition. "I knew I had been staring at the computer a lot," Earlstein said. "I didn't know that just getting lightly tinted lenses in my glasses could help. I'm still gathering information and yes, there's a book in the works."

When asked if he prefers writing over teaching, Earlstein makes it very clear that in his mind, he's still a teacher. "I'm just using a different method," he says. "One where I don't have to listen to the snores if I put anyone to sleep!"



*Frederick Earlstein*

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