Bipolar Disorder

Ever felt extremely happy one day and terribly depressed the next, as if you were on an emotional roller coaster? Imagine quitting your job at the spur of a moment to fly to Hollywood to audition for the next Mel Gibson film even though you have never had any training in acting or theater. How about spontaneously spending $5,000 on a gadget that you have no use for? On a completely different spectrum, imagine being so depressed that you want to commit suicide because dinner was not the meal you had in mind. Each of these actions may seem completely farfetched to the average person; however, actions similar to this are a reality for nearly 2.3 million adults in the United States that suffer from an illness called bipolar disorder (Arbucci 1).

According to Susan McCabe, bipolar disease, historically referred to as manic-depressive illness, is an umbrella term used to describe “cyclic, recurrent, polarizing mood disturbances that range from euphoria, elation, and mania at one pole to irritability, dysphoria, and depression at the other” (McCabe 3). According to the eCureMe.com description of bipolar disorder, some characteristics of this mania that are experienced with bipolar disorder include fast moving ideas, little need for sleep, and extravagant thoughts and behaviors. Depression includes feelings of hopelessness, lack of energy, and no interest in normal routine activities (1). Because of this strong depression, a successful suicide rate for individuals enduring bipolar disorder is 10 percent to 15 percent of those who are ill. This disorder can also cause disruption with a family and alcohol and drug abuse (Genetics & Bipolar Disorder 4).

Currently, there is not a single known cause for bipolar disorder. Nevertheless, “a combination of biological, genetic, and environmental factors appears to trigger and
perpetuate the chemical imbalances in the brain that shape this disorder,” according to the Health and Age (4). Bipolar disorder is hereditary. Nearly two-thirds of people with bipolar disorder have at least one close relative with the ailment as well (Psychiatry24x7 3). Bipolar disorder does not discriminate. It affects all races, both sexes, and targets adults between the ages of 25-44 (eCureMe.com 1).

According to the Health and Age Website on Bipolar Disorder, there are three different types of bipolar disorder categorized by the pattern and severity, which include bipolar disorder I, bipolar disorder II, and cyclothymic disorder. Each of these types can eventually develop into another. Bipolar disorder I include at least one manic episode that may or may not include depression. Episodes in this type are acute and more severe. Negative effects of this type are sexual recklessness, excessive and impulsive shopping, and sudden traveling. Bipolar disorder II and Hypomania consists of one episode of hypomania complimented with an episode of major depression. These episodes are milder and last for a shorter period of time than those of bipolar disorder I but have a more chronic course. Patients of bipolar disorder II have a high risk of suicide. Cyclothymic disorder is the least severe of the three but more chronic. A single episode can lasts for more than two months. It can develop into complete bipolar disorder or remain a low-grade chronic condition (Health and Age 1).

Although often misdiagnosed, bipolar disorder can for many years undetected and untreated. Once recognized, it is a can be treated and those suffering from the disorder can manage their outbreaks and live productive lives. There are several forms of treatment including psychotherapy, mood stabilizers, and other forms of pharmacological treatment. A study recently done on children suffering from bipolar disorder concluded
that “family focused” activities as a form of medication is very effective. In an article written by Laura Lane, Dr. Kiki D. Chang said, “Young patients did better and had higher levels of compliance when their parents and other family members were involved in therapy sessions and had been educated about the disease and how to manage behavior” (1). Bipolar offspring, children with the disorder but have not yet developed it themselves, must be given the correct types of antidepressants and stimulants because some can actually trigger manic episodes (Bipolar Kids…1). Lithium, a mood stabilizer, is considered the primary drug in the treatment of bipolar disorder. Lithium affects the G-protein system that coordinates the balance of neurotransmitters (McCabe 8). Each of these different types of treatment can be used to allow those suffering from bipolar disorder to still live a normal, productive life.

It is important to understand the study of bipolar disorder because it is more common than most people think. Many people often joke with friends and family about the possibility of having the disorder but it is a realistic illness that should not be overlooked or ignored. Many adolescents find themselves happy one day and angry the next. Because this common change of emotion is a characteristic of bipolar disorder, the author of this article desired to research and understand the causes of the disorder and what actually occurs leading to the drastic fluctuation of emotions. After observing how serious bipolar disorder is and the negative effects it can have one’s life and the lives of those around them, hopefully others will understand the complexity of this sickness and can benefit from the research.

Besides learning the basic information about the bipolar disease such as causes, symptoms, and treatment, the author of this article took a special interest in the effects of
bipolar disorder in the African-American community. After completing the research on the illness, the author discovered that the rate of the disorder in the African-American community is the same as that in any other community. However, according to the National Mental Health Association’s research, African-Americans are less likely to receive a diagnosis and, thus, treatment for the ailment. There are several factors listed on the National Mental Health Association Website which include:

- A mistrust of health professionals, based in part on historically higher-than-average institutionalization of African-Americans with mental illness; and on previous mistreatments such as the Tuskegee syphilis study
- Reliance on family and religious community, rather than mental health professionals, during times of emotional distress
- Socioeconomic factors which can limit access to medical and mental health care. About 25 percent of African-Americans do not have health insurance (Bipolar Disorder and African-Americans 1).

By placing information about bipolar disorder on the author’s Website, a large population can be informed about the topic that normally may not have been. Although the information is useful for the general public, the author desires to reach those who have a history of bipolar disorder in their family. If a viewer is unaware of this history, hopefully, information on the Website would persuade viewers to become inquisitive and enlighten themselves about the mental health history of their relatives.


Annotated Bibliography


“Bipolar Disorder: It Can Be Treated.” Virtual Hospital: Health Prose: Bipolar Disorder. 19 March 2004. <http://www.vh.org/adult/patient/psychiatry/prose/bipolar.html>. States that there is no single cause for the disorder and speaks on the disease being hereditary; also provides two different types of treatment to help manage the disorder.

“Bipolar Disorder.” Health and Age. 19 March 2004. <http://www.healthandage.com/Home/712!gm=6!gid6=6601>. Describes the different categories of bipolar disorder and the different phases of depression; also gives the emotional effect bipolar disorder can have one patient and their loved ones.


“Bipolar Kids Respond to Mood Stabilizer.” USA Today (Magazine). Feb 2004: v132 ¡2705 p(8)2. Magazine. InfoTrac_ Online. 20 March 2004. States that determining correct medication for youngsters is crucial because standard drug therapies, such as antidepressants and stimulants, may in fact trigger manic episodes, exacerbating their underlying condition.

Provides a detailed description of Lamotrigine as a pharmaceutical treatment for bipolar disorder; originally marketed as a treatment for epilepsy, Lamotrigine offers effective treatment for bipolar disorder with few adverse effects.


Besides general facts and statistics on the disorder, provides risks to family members of an affected person and a detailed description of the genetics involved in bipolar disorder.


Displays the importance of family-focused therapy in reducing relapse rate among young children suffering from bipolar disorder.


Included incredible facts about the advances of psychopharmacologic treatment of bipolar disorder and discussed in depth what these medicines do to prevent a bipolar episode.