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## BIPOLAR DISORDERS IN CHILDREN

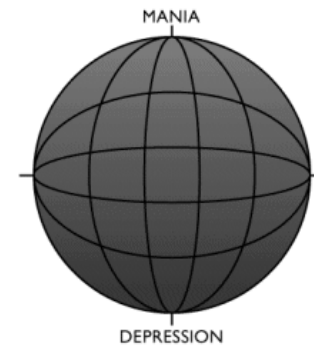
### 1 The nature of bipolar disorder

Bipolar disorder (also known as manic depression) is a treatable illness and can affect a person's ability to experience a normal range of mood. It is marked by extreme changes in mood, thought, energy and behavior. It is not a character flaw or a sign of personal weakness.

Bipolar disorder is not the same as the normal ups and downs every child goes through. Bipolar symptoms are more powerful than that. The illness can make it hard for a child to do well in school or get along with friends and family members. The illness can also be dangerous. Some young people with bipolar disorder try to hurt themselves or attempt suicide.

Bipolar disorder usually begins in late adolescence (often appearing as depression during teen years)

although it can start in early childhood or later in life. An equal number of men and women develop this illness (men tend to begin with a manic episode, women with a depressive episode) and it is found amongst all ages, races, ethnic groups and social classes. The illness tends to run in families and appears to have a genetic link. Like depression and other serious illnesses, bipolar disorder can also negatively affect spouses and partners, family members, friends and colleagues. Bipolar disorder is also known as manic depression because a person's mood can alternate between the "poles" - mania (highs) and depression (lows). This change in mood or "mood swing" can last for hours, days, weeks or months. Every time you experience symptoms at one pole for at least 1 week, it is called an episode. Experiencing 4 or more episodes of mania and/or depression in a year is called rapid-cycling bipolar disorder.



### 2 Types of bipolar disorder

Patterns and severity of symptoms, or episodes, of highs and lows, determine different types of bipolar disorder.

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- **Bipolar I disorder** is characterized by one or more manic episodes or mixed episodes (symptoms of both a mania and a depression occurring nearly every day for at least 1 week) and one or more major depressive episodes. Bipolar I disorder is the most severe form of the illness marked by extreme manic episodes.
- **Bipolar II disorder** is characterized by one or more depressive episodes accompanied by at least one hypomanic episode. Hypomanic episodes have symptoms similar to manic episodes but are less severe, but must be clearly different from a person's non-depressed mood. For some, hypomanic episodes are not severe enough to cause notable problems in social activities or work. However, for others, they can be troublesome.
- **Cyclothymic disorder** is characterized by chronic fluctuating moods involving periods of hypomania and depression. The periods of both depressive and hypomanic symptoms are shorter, less severe, and do not occur with regularity as experienced with bipolar II or I. However, these mood swings can impair social interactions and work. Many, but not all, people with cyclothymia develop a more severe form of bipolar illness.

- **Bipolar Disorder Not Otherwise Specified** is when the bipolar disorder is not characterized by any of the above mentioned types of bipolar disorder.<sup>1</sup> The experiences of bipolar disorder vary from person to person. Occasionally someone will experience the symptoms of a manic episode and a major depressive episode, but not fit into the above mentioned types of bipolar disorder. This is known as Bipolar Disorder Not Otherwise Specified. Just like the other types of bipolar disorder, Bipolar Disorder Not Otherwise Specified is a treatable disorder.

### 3 Bipolar disorder specifically in children and adolescents

#### Early-Onset Bipolar

Research findings, clinical experience, and family accounts provide substantial evidence that bipolar disorder, also called manic-depressive illness, can occur in children and adolescents. Bipolar disorder is difficult to recognize and diagnose in youth however, because it does not fit precisely the symptom criteria established for adults, and because its symptoms can resemble or co-occur with those of other common childhood-onset mental disorders. In addition, symptoms of bipolar disorder may be initially mistaken for normal emotions and behaviors of children and adolescents. But unlike normal mood changes, bipolar disorder significantly impairs functioning in school, with peers, and at home with family.

Doctors recognize that bipolar disorder is a serious but treatable medical illness. It's defined as a disorder of the brain marked by extreme changes in mood, energy, thinking and behavior. Symptoms may be present since infancy or early childhood, or may suddenly emerge in adolescence or adulthood. Until recently, a diagnosis of the disorder was rarely made in childhood. Doctors can now recognize and treat bipolar disorder in young children.

Early intervention and treatment offer the best chance for children with emerging bipolar disorder to achieve stability, gain the best possible level of wellness, and grow up to enjoy their gifts and build upon their strengths. Proper treatment can minimize the adverse effects of the illness on their lives and the lives of those who love them.

Families of affected children and adolescents are almost always baffled by early-onset bipolar disorder and are desperate for information and support. In this section, you will find answers to some of the most common questions asked about the disorder.

#### How common is bipolar disorder in children?

It is not known, because studies are lacking. However, bipolar disorder affects an estimated 1-2 percent of adults worldwide. The New York Times reports that as of 2003, over 800,000 children and adolescents had been diagnosed with bipolar disorder in the U.S. and that the more researchers, doctors and consumers learn about this disorder, the more prevalent it appears to be among children.

It is suspected that a significant number of children diagnosed in the United States with attention-deficit disorder with hyperactivity (ADHD) have early-onset bipolar disorder instead of, or along with, ADHD. According to the American Academy of Child and Adolescent Psychiatry, up to one-third of the 3.4 million children and adolescents with depression in the United States may actually be experiencing the early onset of bipolar disorder.

How is bipolar disorder different in children and teens than it is in adults?

When children develop the illness, it is called early-onset bipolar disorder. This type can be more severe than bipolar disorder in older teens and adults. Also, young people with bipolar disorder may have symptoms more often and switch moods more frequently than adults with the illness.

#### **4 Types of mood episodes associated with bipolar disorder**

- Manic Episode (Mania) is a distinct period during which there is an abnormally and constantly elevated, expansive, or irritable mood, lasting at least 1 week.
- Hypomanic Episode (Hypomania) is a milder form of mania that lasts at least 4 days.

- Major Depressive Episode (Depression) is a period during which there is either depressed mood or the loss of interest or pleasure in nearly all activities, lasting for at least 2 weeks.
- Mixed Episode is a period of time during which a person experiences both manic and major depressive symptoms nearly every day for at least 1 week.

#### **5 Associated disorders**

Bipolar disorder in young people can co-exist with several problems.

- Substance abuse. Both adults and kids with bipolar disorder are at risk of drinking or taking drugs.
- Attention deficit/hyperactivity disorder, or ADHD. Children with bipolar disorder and ADHD may have trouble staying focused.
- Anxiety disorders, like separation anxiety. Children with both types of disorders may need to go to the hospital more often than other people with bipolar disorder.
- Other mental illnesses, like depression. Some mental illnesses cause symptoms that look like bipolar disorder. Tell a doctor about any manic or depressive symptoms your child has had.

Sometimes behavioral problems accompany mood episodes. Young people may take a lot of risks, like driving too fast or spending too much money. Some young people with bipolar disorder think about suicide. Watch out for any sign of suicidal thinking. Take these signs seriously and call your child's doctor.

#### **6 Causes of bipolar disorder**

Several factors may contribute to bipolar disorder, including:

- Genes, because the illness runs in families. Children with a parent or sibling with bipolar disorder are more likely to get the illness than other children.
- Abnormal brain structure and brain function.
- Anxiety disorders. Children with anxiety disorders are more likely to develop bipolar disorder.

#### **7 Symptoms of bipolar disorder**

Very common

- Separation Anxiety
- Rages & Explosive Temper Tantrums (lasting up to several hours)
- Marked Irritability

- Oppositional Behavior
  - Frequent Mood Swings
  - Distractibility
  - Hyperactivity
  - Impulsivity
  - Restlessness/ Fidgetiness
  - Silliness, Goofiness, Giddiness
  - Racing Thoughts
  - Aggressive Behavior
  - Grandiosity
  - Carbohydrate Cravings
  - Risk-Taking Behaviors
  - Depressed Mood
  - Lethargy
  - Low Self-Esteem
  - Difficulty Getting Up in the Morning
  - Social Anxiety
- Oversensitivity to Emotional or Environmental Triggers

#### Common

- Bed-Wetting (especially in boys)
- Night Terrors
- Rapid or Pressured Speech
- Obsessional Behavior
- Excessive Daydreaming
- Compulsive Behavior
- Motor & Vocal Tics
- Learning Disabilities

- Poor Short-Term Memory
  - Lack of Organization
  - Fascination with Gore or Morbid Topics
  - Hypersexuality
  - Manipulative Behavior
  - Bossiness
  - Lying
  - Suicidal Thoughts
  - Destruction of Property
  - Paranoia
- Hallucinations & Delusions

#### Less common

- Migraine Headaches
  - Bingeing
  - Self-Mutilating Behaviors
- Cruelty to Animals

## 8 Consequences of bipolar disorder

What happens when someone is diagnosed with bipolar disorder?

Patients diagnosed with bipolar disorder will be evaluated for treatment. The 3 basic elements of treatment for bipolar disorder are medication, psychotherapy and group support, and education.

A patient diagnosed with bipolar disorder will be started on medication to stabilize his or her moods and address acute symptoms. Most people are aware of

the role that medication plays, but often underestimate the importance of psychotherapy. In order to accept the diagnosis of bipolar disease and manage it in the long run, patients must learn how to cope in healthier ways. Such awareness is difficult to gain without the professional help of psychotherapy. Psychotherapy, also known as "talk therapy" permits a patient to identify the impact of the disorder on his or her life and to begin recognizing events and thinking patterns that may lead or have led to episodes of illness. This process of therapy occurs within a safe and private setting that is difficult to create otherwise.

Prescription medication is important in treating bipolar disorder. Prescription medication may help control the number of episodes a person experiences. The older a person gets, the more frequent their episodes become. If a person experiences 4 or more episodes a year the disorder can become more difficult to treat, so it is important to get treatment as early as possible.

Effective treatment is available for bipolar disorder. Without treatment, marital breakups, job loss, alcohol and drug abuse, and suicide may result from the chronic, episodic mood swings. The most significant treatment issue is noncompliance with treatment. Most individuals with bipolar disorder do not perceive their manic episodes as needing treatment, and they resist entering treatment. In fact, most people report feeling very good during the beginning of a manic episode, and don't want it to stop. This is a serious judgment problem.

As the manic episode progresses, concentration becomes difficult, thinking becomes more grandiose, and problems develop. Unfortunately, the risk taking behavior usually results in significant painful consequences such as loss of a job or a relationship, running up excessive debts, or getting into legal difficulties. Many individuals with bipolar disorder abuse drugs or alcohol during manic episodes, and some of these develop secondary substance abuse problems.

## 9 Treatment of bipolar disorder

The most important step is to consult a professional for an accurate diagnosis. Help is available and in most cases is effective in relieving symptoms. Both medication and psychotherapy are used in treating bipolar disorders, although a combination of both is recommended.

It is important to get treatment for bipolar disorder as early as possible.

Many people with bipolar disorder do not know they have it. Some do not seek treatment because they are ashamed of what they feel, while, as mentioned above, others are incorrectly diagnosed with other illnesses, such as depression, anxiety, or schizophrenia. Without the appropriate treatment the disorder could become more difficult to treat.

Getting the appropriate treatment for bipolar disorder can help alleviate the following risks:

- Suicide

- Alcohol and substance abuse
- Problems at school/falling out of school
- Divorce
- Not being able to function at work
- Alienating oneself from friends and family

How is bipolar disorder treated?

Right now, there is no cure for bipolar disorder.

Doctors often treat children who have the illness in a similar way they treat adults. Treatment can help control symptoms. Treatment works best when it is ongoing, instead of on and off.

**Medication.** Different types of medication can help. Children respond to medications in different ways, so the type of medication depends on the child. Some children may need more than one type of medication because their symptoms are so complex. Sometimes they need to try different types of medicine to see which are best for them.

Children should take the fewest number and smallest amounts of medications as possible to help their symptoms. A good way to remember this is "start low, go slow". Always tell your child's doctor about any problems with side effects. Do not stop giving your child medication without a doctor's help. Stopping medication suddenly can be dangerous, and it can make bipolar symptoms worse.

**Lithium: The first mood stabilizer for bipolar disorder**

Mood stabilizers are medications that help control the highs and lows of bipolar disorder. They are the cornerstone of treatment, both for mania and depression. Lithium is the oldest and most well-known mood stabilizer. It is highly effective for treating mania. Lithium can also help bipolar depression, particular when combined with another medication such as an antidepressant. However, it is not as effective for mixed episodes or rapid cycling forms of bipolar disorder. Lithium takes from one to two weeks to reach its full effect.

**Therapy.** Different kinds of psychotherapy, or "talk" therapy, can help children with bipolar disorder. Therapy can help children change their behavior and manage their routines. It can also help young people get along better with family and friends. Sometimes therapy includes family members.

**What can children and teens expect from treatment?**

With treatment, children and teens with bipolar disorder can get better over time. It helps when doctors, parents, and young people work together. Sometimes a child's bipolar disorder changes. When this happens, treatment needs to change too. For example, your child may need to try a different medication. The doctor may also recommend other treatment changes. Symptoms may come back after a while, and more adjustments may be needed.

Treatment can take time, but continuing with it helps many children and teens have fewer bipolar symptoms.

You can help treatment be more effective. Try keeping a chart of your child's moods, behaviors, and sleep patterns. This is called a "daily life chart" or "mood chart." It can help you and your child understand and track the illness. A chart can also help the doctor see whether treatment is working.

### **How can I help my child or teen?**

Help your child or teen get the right diagnosis and treatment. If you think he or she may have bipolar disorder, make an appointment with your family doctor to talk about the symptoms you notice.

If your child has bipolar disorder, here are some basic things you can do:

- Be patient
- Encourage your child to talk, and listen to him or her carefully
- Be understanding about mood episodes
- Help your child have fun
- Help your child understand that treatment can help him or her get better.

### **How does bipolar disorder affect parents and family?**

Taking care of a child or teenager with bipolar disorder can be stressful for you too. You have to cope with the mood swings and other problems, such as short

tempers and risky activities. This can challenge any parent. Sometimes the stress can strain your relationships with other people, and you may miss work or lose free time.

If you are taking care of a child with bipolar disorder, take care of yourself too. If you keep your stress level down you will do a better job. It might help your child get better too.

### **10 Suggested reading**

<http://www.cpementalhealth.com/content/3/1/21>

**The Bipolar Child: The Definitive and Reassuring Guide to Childhood's Most Misunderstood Disorder by Demetri Papolos**

**A Beautiful Mind**

**A Mood Apart: Depression, Mania, and Other Afflictions of the Self - Peter C. Whybrow, M.D.**

**Tracy Anglada, Brandon and the Bipolar Bear: A Story for Children with Bipolar Disorder. A story for pre-adolescent children with bipolar disorder. Anglada has also written other books for children with bipolar disorder, and their friends and family. Highly recommended for parents.**

**Rosalie Greenberg, M.D., Bipolar Kids: Helping Your Child Find Calm in the Mood Storm. Hardback, Da Capo Press, 2007, 294 pages. ISBN: 0738210803. Read the Blurb.**

**David J. Miklowitz, The Bipolar Disorder Survival Guide: What You and Your Family Need to Know. Paperback, The Guilford Press, 2002, 322 pages. ISBN: 1572305258.**