

Bipolar Disorder (Manic-Depressive illness) in teens

American Academy of Child & Adolescent Psychiatry

Teenagers with Bipolar Disorder may have an ongoing combination of extremely high (manic) and low (depressed) moods. Highs may alternate with lows, or the person may feel both extremes at the same time.

Bipolar Disorder usually starts in adult life. Although less common, it does occur in teenagers and even rarely in young children. This illness can affect anyone. However, if one or both parents have Bipolar Disorder, the chances are greater that their children will develop the disorder. Family history of drug or alcohol abuse also may be associated with Bipolar Disorder in teens.

Bipolar Disorder may begin either with manic or depressive symptoms. The manic symptoms include:

- severe changes in mood compared to others of the same age and background - either unusually happy or silly, or very irritable, angry, agitated or aggressive,
- unrealistic highs in self-esteem - for example, a teenager who feels all powerful or like a superhero with special powers,
- great increase in energy and the ability to go with little or no sleep for days without feeling tired,
- increase in talking - the adolescent talks too much, too fast, changes topics too quickly, and cannot be interrupted,
- distractibility - the teen's attention moves constantly from one thing to the next, and
- repeated high risk-taking behavior; such as, abusing alcohol and drugs, reckless driving, or sexual promiscuity.

The depressive symptoms include:

- irritability, depressed mood, persistent sadness, frequent crying,
- thoughts of death or suicide,
- loss of enjoyment in favorite activities,
- frequent complaints of physical illnesses such as headaches or stomach aches,
- low energy level, fatigue, poor concentration, complaints of boredom, and
- major change in eating or sleeping patterns, such as oversleeping or overeating.

Some of these signs are similar to those that occur in teenagers with other problems such as drug abuse, delinquency, attention-deficit hyperactivity disorder, or even schizophrenia. The diagnosis can only be made with careful observation over an extended period of time. A thorough evaluation by a child and adolescent psychiatrist can be helpful in identifying the problems and starting specific treatment.

Teenagers with Bipolar Disorder can be effectively treated. Treatment for Bipolar Disorder usually includes education of the patient and the family about the illness, mood stabilizing medications such as lithium and valproic acid, and psychotherapy. Mood stabilizing medications often reduce the number and severity of manic episodes, and also help to prevent depression. Psychotherapy helps the teenager understand himself or herself, adapt to stresses, rebuild self-esteem and improve relationships.