

BIPOLAR DISORDER



About Bipolar Disorder

While changes in mood, even when somewhat spontaneous, are considered a normal part of childhood and adolescence, the variations associated with bipolar disorder are more severe. Elements of a bipolar diagnosis may include manic, hypomanic, and depressive symptoms. As with other mental health diagnoses, the symptoms of bipolar disorder cause significant impairment or distress in everyday functioning. As detailed by the National Institute of Mental Health,¹ bipolar disorder may be caused by differences in brain development or genetics. Further, children diagnosed with an anxiety disorder are more likely to experience bipolar disorder than the general population.

While it can be treated with the use of medication and therapy, the disorder itself is usually experienced over the course of one's lifetime. For children who have been diagnosed with bipolar disorder, other concerns that may exist in tandem include drug or alcohol abuse, sadness, anxiety, or ADHD. It should be noted, however, that among others, drug and alcohol abuse, ADHD, schizophrenia, conduct disorder, and oppositional defiant disorder can present with similar symptoms, making a diagnosis difficult. Accurate diagnosis is critical to effective treatment.

Lastly, suicidal thoughts and actions are a potential symptom of bipolar disorder and should, therefore, be taken seriously if observed or discussed. Please refer to the sections on Suicide and Nonsuicidal Self-Injury for additional resources and information.

What Does It Look Like?

Depressive Characteristics

- Sadness
- Loss of enjoyment in activities
- Changes in weight or appetite
- Difficulty with sleep (too much or too little)
- Struggle with concentration or decision-making
- Suicidal thoughts
- Loss of energy

Manic/Hypomanic Characteristics

- High energy
- Easily distracted
- Unusual variation in mood (e.g., being very joyful or irritated)
- Talking quickly or excessively
- Requires less sleep without feeling tired
- Engagement in behaviors that are considered risky
- Increased self-esteem

Symptoms and Interventions

	Symptoms	Interventions
Classroom	<ul style="list-style-type: none"> Experiences difficulties with attention Experiences unusual changes in emotion (such as being very animated or angry) Struggles with interactions with peers 	<ul style="list-style-type: none"> Maintain a structured routine or provide student with advanced notice of changes Take notice of any patterns in behavior that may indicate a forthcoming change in emotion Use social skills groups and work with an SMHP to help the student monitor and manage emotions and behaviors Provide the student with space to de-escalate if necessary
School Work	<ul style="list-style-type: none"> Struggles with completion of work May demonstrate change in processing based on mood Becomes easily frustrated 	<ul style="list-style-type: none"> Consider modification of assignments (e.g., smaller portions of work) when needed Use checklists Identify instructional or learning methods that the student responds to positively (e.g., using technology or frequent breaks) and embed in daily work when possible Practice positive support and praise for student successes
Desk	<ul style="list-style-type: none"> Engages in restless movement Struggles to stay on task 	<ul style="list-style-type: none"> Consider having items at desk to use for movement (collaborate with school staff such as occupational therapists) Assist student in developing and maintaining an organized work area
Outside the Classroom	<ul style="list-style-type: none"> Engages in behavior that is considered risky or dangerous Experiences changes in appetite Reports physical complaints such as headaches or stomachaches Demonstrates lack of interest in usual activities 	<ul style="list-style-type: none"> Communicate with parents or caregivers to identify patterns in behaviors or events at home that may impact the student's behavior (e.g., lack of sleep) Work with school nurse to monitor physical concerns Consider a crisis plan to use for when student is experiencing a manic episode (e.g., staff members who should interact with student)
Transitions	<ul style="list-style-type: none"> Experiences difficulties moving from one task to the next Struggles with transitional stressors (e.g., loud hallways, distractions) 	<ul style="list-style-type: none"> Provide student with additional notice of upcoming transitions or allow extra time to finish a task Modify transitions to accommodate student's needs (before or after other students), or allow for quiet breaks if needed

Student Strengths

- Energetic
- Bright
- Creative
- Sensitive
- Adaptable
- Leader

References

- 1 National Institute of Mental Health. (2015). *Bipolar disorder in children and teens* (NIH Publication No. QF 15-6380). Retrieved from <http://www.nimh.nih.gov/health/publications/bipolar-disorder-in-children-and-teens-qf-15-6380/index.shtml#pub1>

Resources

- **National Institute of Mental Health**
<http://www.nimh.nih.gov/health/publications/bipolar-disorder-in-children-and-adolescents/index.shtml>
✓ *Easy to Read:* <http://www.nimh.nih.gov/health/publications/bipolar-disorder-in-children-and-teens-easy-to-read/index.shtml>
- **National Alliance on Mental Illness (NAMI)**
<https://www.nami.org/Learn-More/Mental-Health-Conditions/Bipolar-Disorder>
- **Child Mind Institute**
<http://www.childmind.org/en/health/disorder-guide/bipolar-disorder>
- **American Academy of Child & Adolescent Psychiatry**
http://www.aacap.org/AACAP/Families_and_Youth/Facts_for_Families/FFF-Guide/Bipolar-Disorder-In-Children-And-Teens-038.aspx
- **Depression and Bipolar Support Alliance**
<http://www.dbsalliance.org/site/PageServer?pagename=home>
- **The Balanced Mind Parent Network**
<http://www.thebalancedmind.org/>