

BIPOLAR DISORDER Q & A



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Question: Is Bipolar genetic?

Dr Antoinette Miric: Yes it does run in families. If you have an affected family member your chances of developing a mood disorder are higher. It is not purely genetic though - it involves an inter-play of environmental and genetic factors. If you have a close family member diagnosed with Bipolar Disorder your risk of developing Bipolar Disorder increase about 10 %. Therefore if you experience an unusual swings in mood and have a family member affected it is good to see a doctor in order to investigate it.

Question: Is there an overlap between ADHD and Bipolar? Are many people miss diagnosed? What are the main differences?

Dr Antoinette Miric: Great question - there is a link between them.

About 10% of people with Bipolar Disorder are thought to have ADHD as well. It requires a careful interview by a mental health professional to determine the difference. The main differences are that the mood shifts in Bipolar are more episodic with episodic impulsiveness and hyper activeness whereas with ADHD it is a day to day occurrence.

Question: Are there differences in the way bipolar is treated vs major depressive disorder? The medication has changed slightly but what differences are there between CBT for depression and bipolar?

Dr Antoinette Miric: Yes - there are different medications used. CBT for both is similar but CBT for Bipolar disorder focuses largely on what things stabilise Bipolar, watching for relapses,

and understanding thought and behavioural process in either depressions or highs.

Question: How is the brain effected by bipolar disorder?

Dr Antoinette Miric: There are physical changes seen in the brains with people with Bipolar Disorder on MRIs and scans. Certain parts of the brain which work with mood, sleep, thoughts have some changes. Every relapse we think alters the brain in some way and can cause damage to certain areas - especially those involved in memory and concentration.

Question: I felt like my meds weren't doing much for me. I also feel they are harming my health. I recently tried to reduce my dosage and it had terrible consequences. I don't know if it was withdrawal

symptoms or my bipolar.

Dr Antoinette Miric: Your concerns are common and the side effects and benefits of medication also need to be looked at. In my experience withdrawing from these medications need to be done carefully in conjunction with a doctor - or else it can feel awful. Its hard to know in that initial phase if it is Bipolar symptoms or just withdrawal. That being said withdrawing certain medications for example, Lithium to quickly can cause a Bipolar relapse within days.

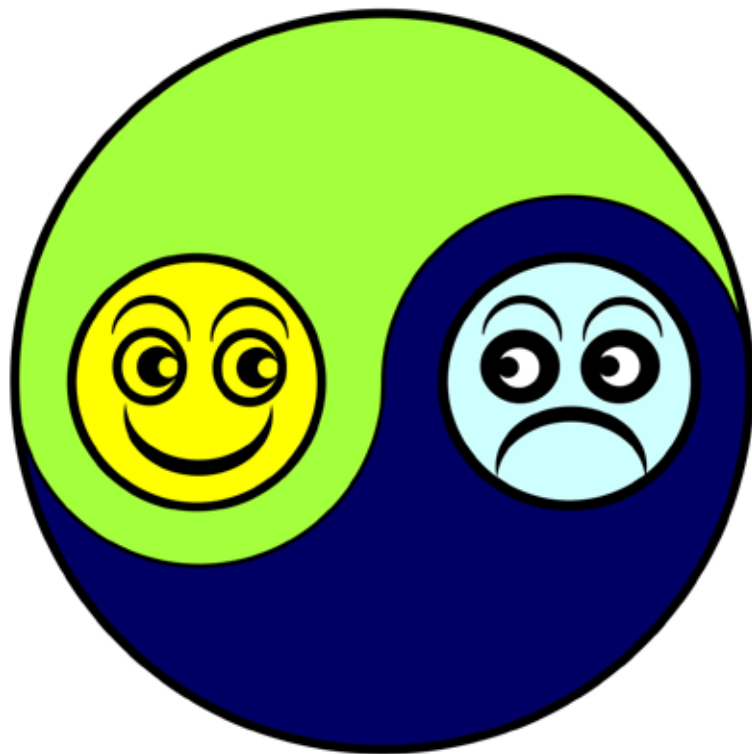
Question: Is it safe to take my medication if I am pregnant or nursing?

Dr Antoinette Miric: That's a really good question and an important one, there are some medications that are safer than others and there are some which shouldn't be used at all. When planning a pregnancy it's really important to discuss it with your doctor before- hand if possible so you can discuss which options are best for you. It depends on so many factors whether it's better to stay on medication or not.

Question: I think someone I care about might have Bipolar or Depression. What can i do?

Dr Antoinette Miric: It's so hard sometimes to know what to do. If you have a good relationship with the person it may be useful to say that you are worried about them, and that maybe the symptoms they have such as sleeping too much or sleeping too little may be a sign that somethings not quite right. Advise that they see their GP or doctor and go with them to explain to the doctor your concerns. Remind them that you are there to support them and that you don't think that they are mad or crazy but that you think they may benefit from some support and investigations. Medical conditions can also cause depressive symptoms - so you can advise that they need to get that looked at.

Question: How real is the threat of suicide in bipolar disorder, and what can be done to reduce the risks?



Dr Antoinette Miric: The threat is real. Suicide attempts made by people with Bipolar Disorder are more than 10 x as likely to succeed than those without Bipolar Disorder. Rates of completed suicide range from about 15%. Preventing suicide is such a complicated topic - and I know that SADAG have some articles on their website that can help. Specifically in Bipolar Disorder, the risk of completed suicides are higher in males, higher in a mixed episode (they have energy but also feel very depressed) and are higher when leaving hospital.

Question: If I am diagnosed with bipolar disorder, will I be on medication for the rest of my life?

Dr Ryola Singh: Bipolar Disorder is considered a lifelong condition, just like diabetes or hypertension. Sometimes, as things change over time, you may need to be on less or more medication depending on how you feel.

Question: Hi Dr Ryola, how do I explain to my 10yr old son that I have Bipolar Disorder? I just need him to understand me without confusion.

Dr Ryola Singh: Hi. This is a really important question. Remember that children are intuitive and do pick up on our body language, what we say

and do etc. It is important not to hide your illness from your son as he probably already knows something is not ok. It is best to not let him make assumptions about what you are going through. At the same time, you don't want to scare him with too much details or information. Rather let him know that sometimes your mood is not ok and when this happens it affects your ability to sleep, do things etc. But also reassure him that you are getting the help that you need and that he should feel free to ask you if he has any questions about it.

Question: Hi. I think my daughter may have Bipolar? Are Psychiatrists able to diagnose her at 13 years old?

Dr Ryola Singh: Hi. Bipolar Disorder is much more difficult to diagnose in childhood and adolescents as there are many other conditions that can mimic Bipolar. For example ADHD, Epilepsy, Oppositional Defiant Disorder etc. Also, Bipolar Disorder doesn't in adolescents don't present in exactly the same way as it does in adults - it may present more with irritability, not last as long etc. That being said, it does not mean that it cannot be diagnosed at age 13 years. It would be best to consult with a psychiatrist or child psychiatrist who would be best able to make the diagnosis. **MHM**