Abnormal Psychology

Bipolar Disorder

[[Causes]]
The exact cause of bipolar disorder is unknown but genetic factors are said to play a large role in the development of the disorder. Neurotransmitters are credited with causing bipolar disorder. A link is known to exist between neurotransmitters and mood disorders, because drugs, which alter these transmitters, also relieve mood disorders. Some studies hypothesize that a low or high level of a specific neurotransmitter such as serotonin, norepinephrine or dopamine is the cause.

[[Symptoms]]
The “highs” – Increased physical and mental activity and energy; Heightened mood, exaggerated optimism and self-confidence; Excessive irritability, aggressive behavior; Decreased need for sleep without experiencing fatigue; Grandiose delusions, inflated sense of self-importance; Racing speech, racing thoughts, flight of ideas; Impulsiveness, poor judgment, distractibility; Reckless behavior. In the most severe cases, delusions and hallucinations.
The “lows” – Prolonged sadness or unexplained crying spells; Significant changes in appetite and sleep patterns; Irritability, anger, worry, agitation, anxiety; Pessimism, indifference; Loss of energy, persistent feelings of guilt, worthlessness; Inability to concentrate, indecisiveness; Inability to take pleasure in former interests, social withdrawal; Unexplained aches and pains; Recurring thoughts of death or suicide.

[[Stressors]]
Environmental stressors such as sexual abuse, stressful situations or traumatic events, lack of confidence before they developed bipolar disorder, more hospitalizations due to depression, depression accompanied by suicidal thoughts, and cluster B personality disorder are present.

[[Treatment]]
Interpersonal therapy – Helps you to change the way you relate to people.
Cognitive-behavioral therapy – You examine how your thoughts affect your emotions, plus you learn to change your reactions to situations.
Medications- Each person usually has his/her own mixture of medications customized for their particular symptoms that are prescribed. In general, mood stabilizers are prescribed with anti-depressants such as Benzodiazepine or antipsychotic drugs.

[[Facts]]
Occurs in 1 – 2% of the population; sex ratio is equal; onset in adolescence; personality features include hyperactivity and ADHD; episodes are briefer and more frequent; has a stronger genetic component;