

Bipolar Disorder in Children and Adolescents

Everyone experiences mood swings, the common ups and downs of everyday life. However, children and teens with Bipolar Disorder, otherwise known as manic-depression, experience these mood swings in extremes. "Normal" mood swings can be compared to gently rolling hills while the mood swings of Bipolar Disorder can be compared to riding a roller coaster. Imagine one moment having so much energy that you can't sit still, barely sleep, talk nonstop, and feel as if you could conquer the world and then in the next moment crashing down to such depths that you feel hopeless, sad, and can't even get out of bed. That is life as children and teens with Bipolar Disorder experience it.

What to Look for:

Bipolar Disorder is marked by significant changes in mood, energy, and behavior that adversely affect a child's academic, social, and familial functioning. Diagnosis is based upon a child's symptoms, family history of mental illness, developmental level, and current research and scientific knowledge. Look for...

Manic symptoms:

- Overly happy or silly or overly irritable or angry
- Lots of energy, just "can't stop"
- Seems to go with little or no sleep
- Easily distracted, constantly shifting focus
- Physical agitation or hyperactivity
- Inflated sense of self-esteem
- Talking too much, too fast, changing topics
- Impulsive, risky behaviors such as reckless driving or attempting to jump out of a moving car
- Sexual promiscuity
- Substance abuse
- Hallucinations or delusions

Depressive symptoms:

- Sadness or hopelessness
- Sleep changes: increase or decrease
- Appetite changes: increase or decrease
- Loss of interest in pleasurable activities
- Social withdrawal or isolation
- Difficulty concentrating
- Fatigue and low energy level
- Physical complaints or poor hygiene
- Feelings of worthlessness or guilt
- Hallucinations or delusions
- Thoughts of death or suicide

Bipolar Disorder is often difficult to diagnosis in children and teens. First, it looks different than Bipolar Disorder in adults. Whereas adults often experience manic or depressed moods for days or even weeks at a time, children and teens most often cycle more rapidly, experiencing mood swings or mixed symptoms continuously. Second, Bipolar Disorder looks similar to other childhood disorders such as Depression, Attention-Deficit / Hyperactivity Disorder or Oppositional Defiant Disorder.

Treatment Options:

Early intervention is paramount in decreasing the severity of symptoms and the adverse affects on a child or teen's life. Comprehensive treatment can stabilize mood and help a child and family cope with and manage symptoms. Given that symptoms of Bipolar Disorder are similar to that of other disorders and that Bipolar disorder often co-occurs with other disorders, a comprehensive evaluation, taking into particular account family history, should be conducted by a psychiatrist, psychologist, or clinical social worker with expertise in both mood disorders and childhood disorders.

- **Psychotropic Medication**, particularly mood stabilizers. Anti-depressants or stimulants have been shown to trigger manic or even psychotic symptoms. Unfortunately, given the difficulty of diagnosis, this is often how Bipolar Disorder is correctly diagnosed. Therefore, effects of medication should be closely monitored. Once an effective medication regimen is developed, adherence should be strictly followed.
- **Individual Therapy** to help the child or teen to develop anger management skills, communication skills, and relaxation techniques to manage symptoms and to cope with the adverse academic, intrapersonal, and interpersonal consequences.
- **Family Therapy** to address the negative parent/child and siblings interactions that often arise as a result of symptoms.
- **Parenting Support and Education** to enhance understanding of the disorder and to develop a supportive home environment tailored to these children's unique challenges.
- **School Interventions** to implement classroom based accommodations to diminish symptoms hindering academic progress and peer relations.

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