

# Bipolar Disorder

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## Background

Bipolar disorder, bipolar disorder is a common, severe, and persistent mental illness. This condition is a serious lifelong struggle and challenge.<sup>[1]</sup> Other mental disorders and general medical conditions are more prevalent in patients with bipolar disorders than in patients in the general population.<sup>[5]</sup> Among the general comorbid conditions, cardiometabolic conditions such as cardiovascular disease, diabetes, and obesity are a common source of morbidity and mortality for persons with bipolar disorder.

Bipolar disorder is characterized by periods of deep, prolonged, and profound depression that alternate with periods of an excessively elevated or irritable mood known as mania. This pattern of alternating severe depression and periods of mania is characteristic of bipolar disorder type I (BPI), although in rarer cases, persons may only experience episodes of mania. In practice, symptoms of mania and depression can also occur together in what is termed a mixed state as the illness evolves. By contrast, bipolar disorder type II (BP II) is diagnosed when episodes of severe depression are punctuated with periods of hypomania, a less severe form of mania that does not include psychosis or lead to gross impairment in functioning. A diagnosis of cyclothymic disorder is given to individuals with periods of both hypomanic and depressive symptoms without meeting the full criteria for mania, hypomania or major depression.

The symptoms of mania include decreased sleep time accompanied by a decreased need for sleep, pressured speech, increased libido, reckless behavior without regard for consequences, grandiosity, and severe thought disturbances, which may or may not include psychosis. Between these highs and lows, many patients, if adequately medicated, usually experience periods of higher functionality and can lead a productive life.

Unipolar (major depressive) disorder and bipolar disorder share depressive symptoms, but bipolar disorder is defined by episodes of mania or hypomania. A community lifetime prevalence of 1.8%–4% for BPI and BP II disorder combined has been suggested. The costs of bipolar disorder include the direct costs of treatment along with the even more significant indirect costs of excess unemployment, decreased productivity, and excess mortality; it is a severely impairing illness that affects many aspects of patients' lives.<sup>[6]</sup>

In the *Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition, Text Revision (DSM-5-TR)*, bipolar disorder constitutes a spectrum of mood disorders that includes BPI, BP II, and cyclothymia and are thought to be a “bridge” between schizophrenia spectrum disorders and depressive disorders in terms of the symptomology, family history and genetics.<sup>[2]</sup> See the table below for changes in the criteria for BPI and BP II from *DSM5* to *DSM-5-TR*.

Changes from the *DSM-5* to the *DSM-5-TR* for Bipolar I and II Disorders (Open Table in a new window)

Criteria/Specifiers	DSM-5	DSM-5-TR (2022)
<b>Bipolar I Disorder</b>	B. The manic episode is not better explained by schizoaffective disorder, and is not superimposed on schizophrenia, schizophreniform disorder, delusional disorder, or other psychotic disorder.	B. At least one manic episode is not better explained by schizoaffective disorder and is not superimposed on schizophrenia, schizophreniform disorder, delusional disorder, or other specified or unspecified schizophrenia spectrum and other psychotic disorder.
<b>Bipolar II Disorder</b>	C. The occurrence of the hypomanic episode(s) and major depressive episode(s) is not better explained by schizoaffective disorder and is not superimposed on schizophrenia, schizophreniform disorder, delusional disorder, or other	C. At least one hypomanic episode and at least one major depressive episode are not better explained by schizoaffective disorder and are not superimposed on schizophrenia, schizophreniform disorder, delusional disorder, or other specified or unspecified
		other psychotic disorder.
<b>Specifiers for Severity of Episodes</b>	The definitions for the bipolar severity specifiers (mild, moderate, severe) are mainly for major depressive episodes.	<p>For Manic episodes:</p> <p>Mild: Minimum symptom criteria are met for a manic episode.</p> <p>Moderate: Very significant increase in activity or impairment in judgment.</p> <p>Severe: Almost continual supervision is required to prevent physical harm to self or others.</p>