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Bipolar disorder takes center stage

Sufferers of the illness must deal with the stigma, but it can be treated

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Actress Catherine Zeta Jones entered a mental health facility for treatment recently after being diagnosed with bipolar II disorder.

By Jill Carroll

May 26, 2013

The news last month of actress Catherine Zeta Jones' diagnosis of bipolar II disorder

has given a very public face to a mental health issue with a history of stigma. Jones, according to reports, began to suffer the mood swings that characterize the disease within the past year, as her husband, Michael Douglas, fought throat cancer and engaged in a court battle with his ex-wife. In April, she checked herself into a mental health facility for a brief stay to receive treatment.

A couple of years ago, singer, actress and "X Factor" judge Demi Lovato had a breakdown and claimed she was undergoing treatment for personal issues. She later revealed she has bipolar disorder as well as eating disorders.

According to the National Institute of Mental Health, bipolar disorder - also called manic-depressive disorder - is a brain disorder characterized by dramatic shifts in mood, energy and activity levels that negatively impact a person's ability to carry out day-to-day tasks. These shifts in mood are severe, much more so than the regular ups and downs of life common to everyone.



Annually, 2.6 percent of the U.S. adult population suffers from bipolar disorder, and nearly 83 percent of those cases are considered severe. Lifetime prevalence of the disorder among adults reaches to nearly 4 percent, just under 1 million people. Children can suffer from the disorder as well, but the disorder usually begins in adolescence or adulthood.

The term "bipolar" refers to the two poles of mood and behavior between which sufferers cycle: mania and depression. The duration and severity of the manic and depressive episodes separate the four forms of bipolar disorder. Bipolar I involves at least seven days of mania, or mania severe enough to require hospitalization, and severe depressive periods of at least two weeks.

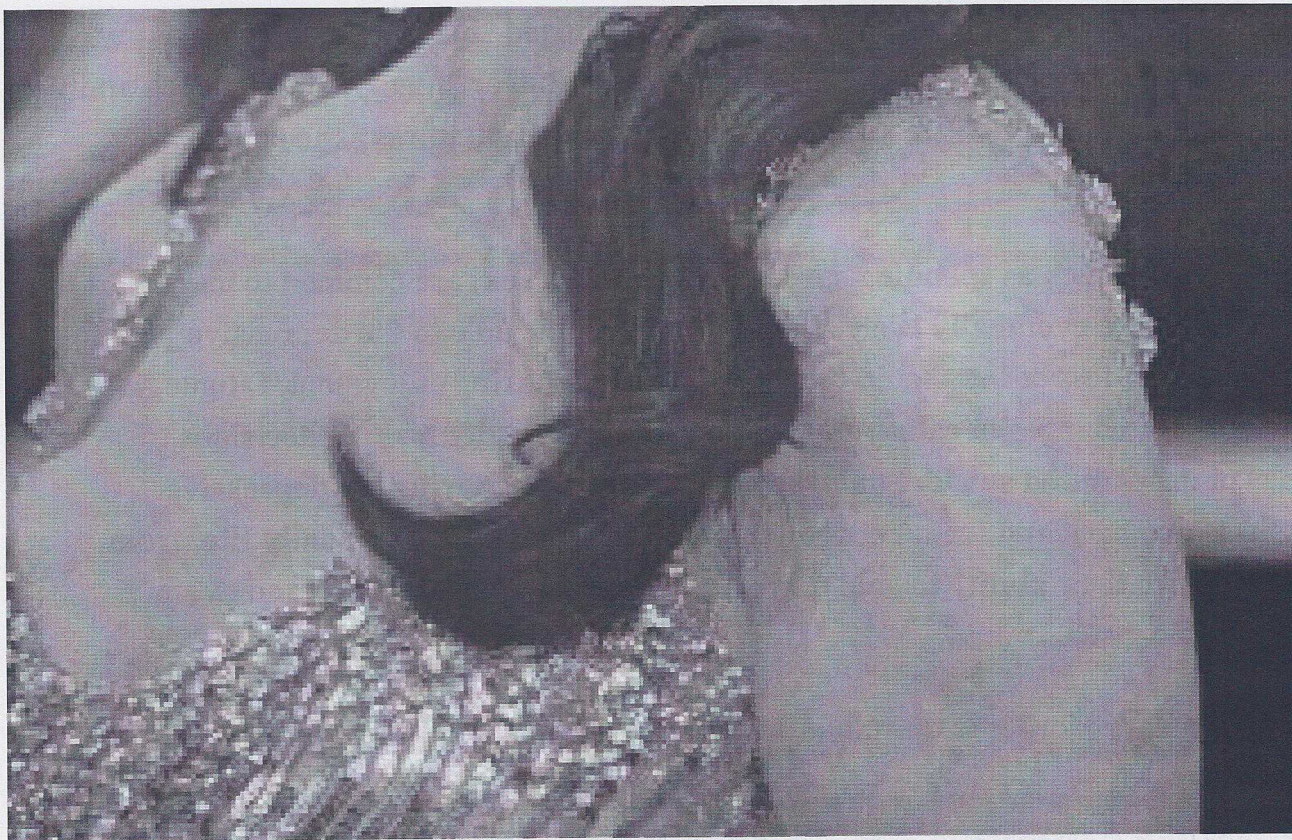
Bipolar II involves a pattern of depressive periods and hypomania, less severe than a true mania. Two other forms of bipolar - Bipolar Disorder Not Otherwise Specified (BP-NOS) and cyclothymia (sometimes called bipolar III) - define sets of symptoms that match those of bipolar disorder but do not meet the criteria for diagnosis.

During manic episodes, people may experience prolonged "highs" and feelings of joy, plenitude and energy. They may become highly excitable or "jumpy," racing back and forth between ideas, have little need for sleep and may have unrealistic notions of their abilities.

Risky behaviors, such as spending sprees and high-risk sex, are common to manic periods. Sufferers eventually cycle away from the manic pole to the depressive pole, characterized by loss of interest in things that normally bring enjoyment, fatigue, lack of mental focus, changes in eating and sleeping, and difficulty making decisions. Feelings of despair and suicidal thoughts also are common during the depressive stage. Swinging back and forth between these poles wreaks havoc on daily life, from interfering with their ability to hold down a job, maintain relationships and even manage simple tasks.

Although bipolar disorder is treatable, it's hard to diagnose for a number of reasons.





Jason Merritt, Staff

FILE - APRIL 29: Actress Catherine Zeta-Jones has entered a treatment center for bipolar disorder and is scheduled to complete a 30-day program. Zeta-Jones previously received treatment for bipolar disorder in 2011. HOLLYWOOD, CA - FEBRUARY 24: Actress Catherine Zeta-Jones arrives at the Oscars at Hollywood & Highland Center on February 24, 2013 in Hollywood, California. (Photo by Jason Merritt/Getty Images)

"It would be nice if everyone presented symptoms as they are laid out in the DSM 4, but they don't," said Dr. Blake Haren, associate professor in the department of psychiatry at Baylor College of Medicine and a psychiatry internist at Baylor's Menninger Clinic, referring to the diagnostic manual professionals use to diagnose mental illnesses. "Bipolar itself is the great imitator of all the things we see because it has bits and pieces of other illnesses built into it. There's lots of symptom overlap. Someone comes in with lots of depression, say, and this is their main symptom - this isn't in itself going to give us a bipolar diagnosis."

In other words, people who suffer from a primary symptom, such as depression or anxiety, may spend years receiving treatment that won't address the bipolar disorder that may be at the root of their symptoms.

Cultural factors also make bipolar hard to diagnose, said Jennifer Strich, program director for the Houston chapter of the Depression and Bipolar Support Alliance

(DPSA), which provides free support to people who suffer from these particular mental health issues.

"The culture, especially in Texas, is to pull yourself up by your bootstraps, just get over it. This doesn't encourage people to take their symptoms seriously and seek professional help," Strich said.

Also, people still have fear about mental illnesses and those who suffer from them.

"Taking medications doesn't make you crazy. It just means that you are treating your illness just like any other disease, like diabetes or heart disease, that you take medicine for," she said. "Both depression and bipolar disorder are very treatable, and it is possible to live a normal life with this disease if it's being treated."

The prevalence of suicide among those with bipolar disorder gives proper diagnosis and treatment a particular urgency, Haren said. About 15 percent of people who have either type of bipolar disorder will take their lives. Up to half will attempt suicide and not complete it.



Jordan Strauss, INVL

In this Dec. 20, 2012 photo, Demi Lovato attends the "The X Factor" season finale results show at CBS Television City in Los Angeles. Fox network says Lovato is returning as a judge of "The X Factor." The singer-songwriter will be back alongside series creator Simon Cowell when the singing competition begins its third season this fall. (Photo by Jordan Strauss/Invision/AP)

"If we know that the No. 8 killer of men and No. 11 of women is suicide, and if we

know that bipolar is one of the modifiers for this, we need to get people seen by professionals so they can get treatment," Haren said.

Information

If you suspect that you or a loved one may suffer from bipolar disorder, or if you have suicidal thoughts, please use these resources to seek professional help:

A National Institute of Mental Health: www.nimh.nih.gov

A Depression and Bipolar Support Alliance of Greater Houston: 713-600-1131 or www.dbsahouston.org

A Menninger Clinic, Baylor College of Medicine: 800-351-9058 or www.menningerclinic.com

A Crisis Intervention of Houston (suicide hotline): 713-HOTLINE, 713-526-TEEN or 713-526-8088 (Espanol)

Bipolar disorder symptoms

Manic episodes

A A lengthy "high" or overly happy and outgoing mood.

A Extremely irritable mood or feeling of being "jumpy" or "wired."

A Talking very fast, jumping from one idea to another.

A Taking on new projects, but being easily distracted.

A Being restless and sleeping little.

A Behaving impulsively and engaging in pleasurable high-risk acts.

Depressive episodes

A A long period of worry or emptiness.

A Loss of interest in activities you usually enjoy.

A Having problems concentrating and making decisions.

A Being restless or irritable

A A change in daily habits

A Thoughts of death or suicide

Source: National Institute of Mental Health (www.nimn.nih.gov)

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A therapy program concentrating on making decisions.

A being restless or irritable.

A change in daily habits.

A thoughts of death or suicide.

Source: National Institute of Mental Health (www.nimh.nih.gov)

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