

**An  
Introduction  
To Bipolar  
Disorders**

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## *Life Motivations*

### MOOD QUESTIONNAIRE - MDQ

1. Has there ever been a period of time when you were not your usual self and...

...you felt so good or so hyper that other people thought you were not your normal self or you were so hyper that you got into trouble?  Yes  No

...you were so irritable that you shouted at people or started fights or arguments?  Yes  No

...you felt much more self-confident than usual?  Yes  No

...you got much less sleep than usual and found you didn't really miss it?  Yes  No

...you were much more talkative or spoke much faster than usual?  Yes  No

...thoughts raced through your head or you couldn't slow your mind down?  Yes  No

...you were so easily distracted by things around you that you had trouble concentrating or staying on track?  Yes  No

...you had much more energy than usual?  Yes  No

...you were much more active or did many more things than usual?  Yes  No

...you were much more social or outgoing than usual, for example, you telephoned friends in the middle of the night?  Yes  No

...you were much more interested in sex than usual?  Yes  No

...you did things that were unusual for you or that other people might have thought were excessive, foolish, or risky?  Yes  No

...spending money got you or your family into trouble?  Yes  No

Total YES answers \_\_\_\_\_ (Leave Blank)

2. If you checked YES to more than one of the above, have several of these ever happened during the same period of time?  Yes  No

3. How much of a problem did any of these cause you -- like being unable to work; having family, money or legal troubles; getting into arguments or fights?

Please circle one response only:

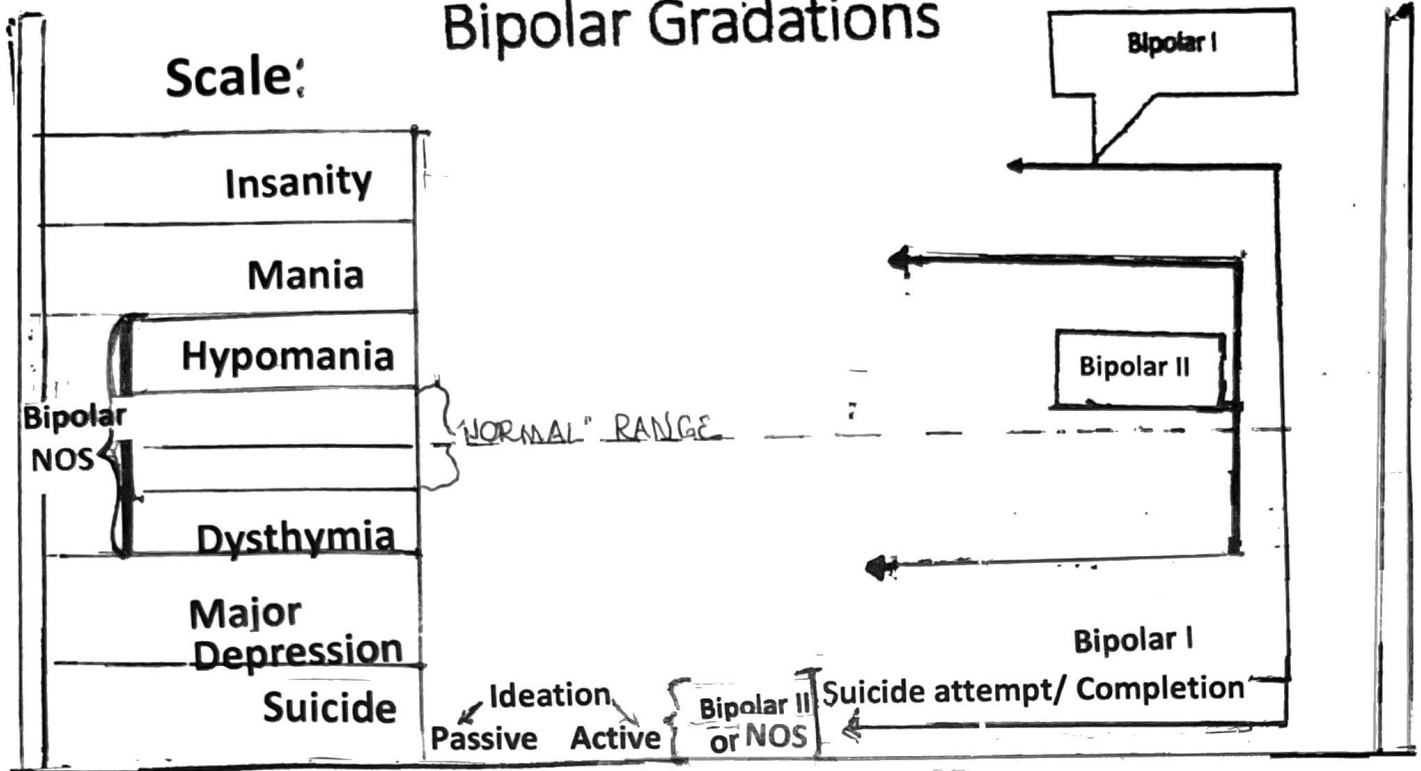
No Problem      Minor Problem      Moderate Problem      Serious Problem

4. Have any of your blood relatives (i.e. children, siblings, parents, grandparents, aunts, uncles) had manic-depressive illness or bipolar disorder?  Yes  No

5. Has a health professional ever told you that you have manic-depressive illness or bipolar disorder?  Yes  No

Patient Initials: \_\_\_\_\_ Page 6 of 10

# Bipolar Gradations



## Definitions:

**Hypomania:** a mild form of mania

**Dysthymia:** A mild form of chronic depression

## Mania: High Energy

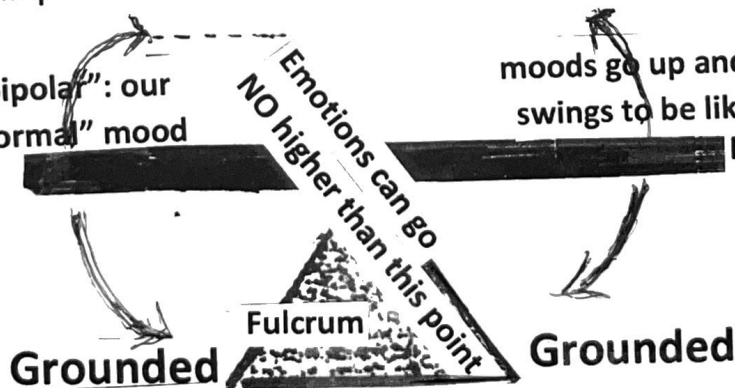
- ↳ Insane—Psychotic features
- ↳ Euphoria—very attractive, super happy
- ↳ Angry/outrage/furious
- ↳ Anxious-panic attacks
- ↳ Energizer Bunny

## Depression: Low Energy (See the SIGECAPS handout)

A mood stabilizer: is a type of psychiatric medication that gives a person an "artificial", "imported" fulcrum.

Note: Everyone is "bipolar": our You might picture the "normal" mood

moods go up and down, all the time. swings to be like the see-saw: Plane



Emotions can go NO lower than this point

On Both Ends

A fulcrum acts as a mood stabilizer to keep things in balance (like the bottom on each side of a see-saw).

Name: \_\_\_\_\_

# 3 Levels of Bipolar Disorders

F26.80 (ICD-10 DIAGNOSTIC CODE)

① BIPOLAR, NOS: unspecified bipolar of any level but usually referring to mildest form: I call it: "Baby Bipolar" or pediatric bipolar (children with bipolar behaviors)

② BIPOLAR II: severity is significant enough to DAMAGE/impair on life processes & relationships

▷ Usually no history of suicide attempts;

▷ AND usually no history of psychiatric hospitalization.

Suicidal Ideation occurs @ all levels of bipolar - including "normal" people.

③ Bipolar I <sup>severe</sup> Most intense form -  
F31.9 Very wide range of emotions  
The Mania may lead to psychotic features

Possible signs of BIPOLAR I:

Hx of suicide attempts (common)  
cutting / MORE than 7 tattoos

(Hx = history)

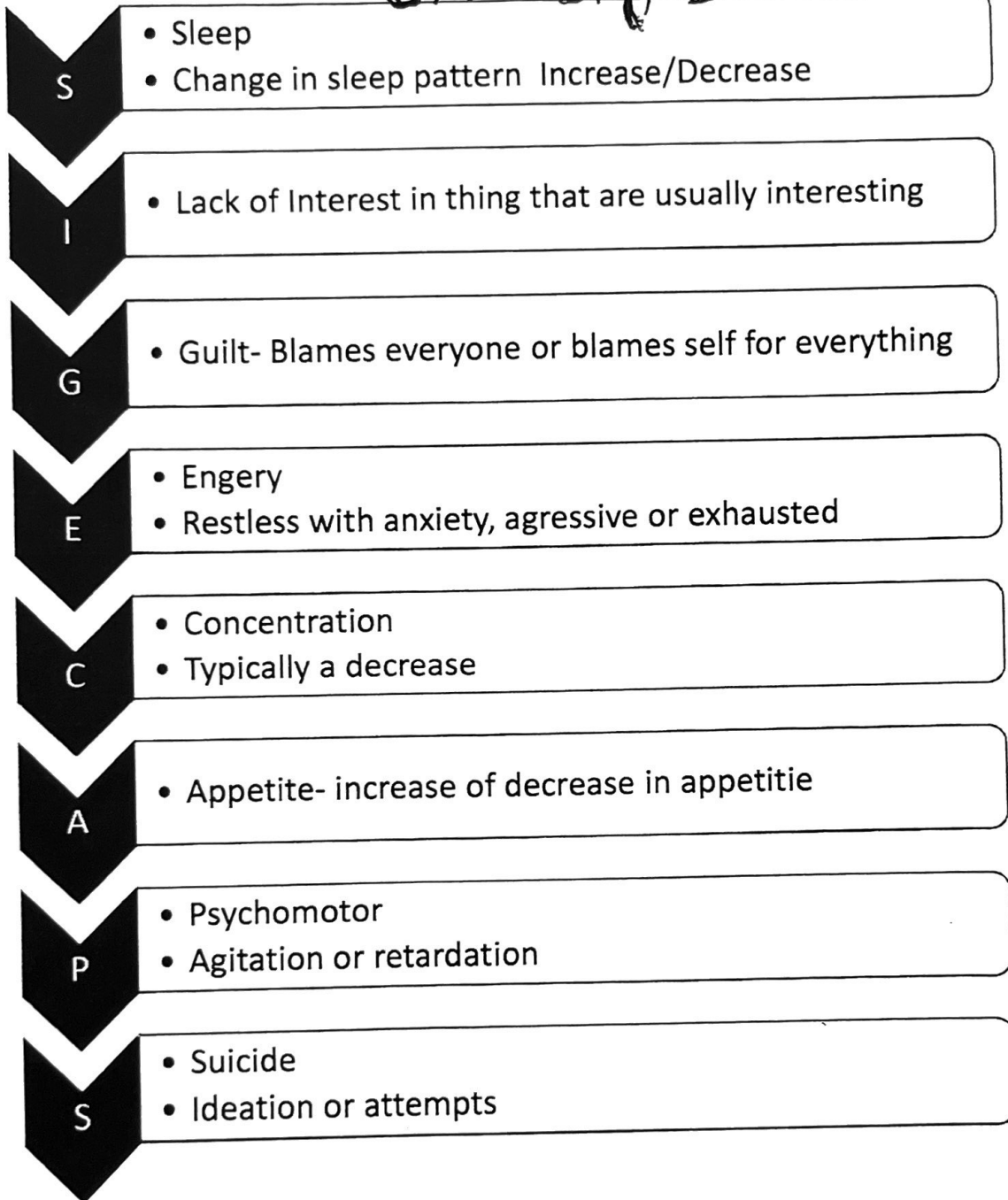
3+ intimate relationships  
Severe substance abuse

BEWARE -

Note:- A severe Manic Bipolar I with psychotic features is OFTEN misdiagnosed in psychiatric hospitals as "schizophrenic" or "schizoaffective". This misnomer may follow a person around for the rest of their life - if not corrected to Bipolar I with history of psychotic features - once the person has his/her mood properly stabilized.

# Signs & Symptoms of Depression

## SIGECAPS



# An Introduction to Bipolar Disorders (cont)

**A fulcrum acts as a mood stabilizer to keep things in balance**

**(like the bottom on each side of a see-saw).**

**(See the SIGECAPS handout) A mood stabilizer: is a type of psychiatric medication that gives a person an "artificial", "imported" fulcrum.**

**This biochemical combination of neurotransmitters works to stabilize the mood swings of the bipolar disorder.**

**Note: Everyone is "bipolar": our moods go up and down, all the time. You might picture the "normal" mood swings to be like the see-saw below:**

**A see-saw has a flat plane balanced evenly on top of a fulcrum. The fulcrum GROUNDS the emotions on either side of the see-saw.**

**"Normal" people have mood swings within a very functional limit: the fulcrum.**

**People with a bipolar disorder have an impaired fulcrum: no Natural Fulcrum in place.**

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## **An Introduction to Bipolar Disorders** (cont)

### **Mood Stabilizers:**

A mood stabilizer defined: Any medication, supplement, diet, function, activity or situation which provides for the generation of neurotransmitters needed in the brain for the healthy function of mood control. (See diagram on page 2). In terms of this presentation, any substance or experience that strengthens the “fulcrum” which will ground the “see-saw” of mood swings.

There are many things that can be external contributions to a lack of the biochemistry required for mood stabilization. Consider the following list of possibilities:

- Music, soothing, uplifting, usually without WORDS, can transport a mental state to tranquility. A classic example: reported in the Old Testament of the Bible: David’s harp soothed the extreme uncontrollable rages exhibited by King Saul, who, from a diagnostic observation, probably had a significant bipolar I mood disorder!
- A Loving Environment. Love makes all things perfect. Ms. Marianne Williamson said: Consider all human behavior as either an act of Love, or a cry for Love.
- Exercise: Strenuous physical activity generates endorphins which will in turn will optimize brain balance/tranquility.
- Prayer. All things are possible with God. Prayer is the mightiest power in existence; you need not take anyone’s word for it: try it for yourself and see. In prayer it is God who works, divine action takes place. Generally speaking, we call these results: “miracles”.

- A fish aquarium, a sunset, the ocean waves, a sky of brilliant stars, a full moon, etc....any influence in the natural world that calls forth a peace beyond our understanding. We know that the Unspoken communicates on profound levels to heal OR the harm. When we seek out those influences that bring us peace, we often do not understand the how or why, we just FEEL the difference. One example concerning the fish aquarium: It has been observed that fish swim in a figure 8 pattern. This is unusually peculiar to fresh water fish. The figure 8 is a symbol representative of “eternity”/infinite in advanced mathematics and physics. Curiously, this figure, brings us peace...an perspective beyond an individual with a disease, a transcendence that can be touched in our common daily experience.
- A good psychotherapist/ hypnotherapist, spiritual counselor. The practice of human interaction, communication, conversation if wisely applied , can create a transformational experience in a human mind.
- Meditation. The neuroplasticity of the human brain is vastly greater than our science has previously considered. The practice of meditation, which trains a mind to re-fashion a brain, and empower the spirit, can accomplish transcendental states that supercede genetic history/expression.

The pharmaceutical medications available for mood stabilization include:

### Nueroleptics

Medications utilized in neurology for seizure control have also been appropriated in psychiatry to establish the NT fulcrum. In particular: This genre includes Trileptal (oxcarbazepine), Lamictal (lamotrigine). And Topamax (topiramate). Depakote (valporoic acid).



### Antipsychotics

Abilify (aripiprazole), Seroquel (quetiapine), Zyprexa, olanzapine, Geodon (ziprasidone)

Other Compounds prescribed for bipolar conditions:

Lithium carbonate, discovered to control depression in tuberculosis patients, is very useful in bipolar depression.

### **Over the Counter Alternatives for Mood Stabilization:**

Lithium orotate: A supplement, over the counter, of a substance found in the water supply, also stabilizes mood, and has anti-aging properties.

Herbal supplements that assist in sleep: Catnip, hops, passion flower, And amino acids such as L-theanine.

# Bipolar Disorder: Brief Bibliography

1. 'Bipolar Disorder : (By Frances Mark Mondimore )

A Guide for Patients and Families"

2. 'Loving Someone with Bipolar Disorder.' (Julie Fast )

3. 'The Bipolar Disorder Survival Guide 2<sup>nd</sup> Ed :

What you and your family need to know."

(David<sup>By</sup> J. Miklowitz )

4. "Living with Someone who is living with Bipolar Disorder : A practical guide for family , friends, & coworkers". ( Chelsea Lowe & Bruce Cohen M.D. )

5. "When Someone you Love is Bipolar :

Help & Support for you and your partner."

(Cynthia<sup>By</sup> Last)

6. 'Break the Bipolar Cycle : A Day by Day Guide to Living Bipolar Disorder.' ( Elizabeth<sup>By</sup> Brandon )

7. 'The Bipolar Workbook : Tools for Controlling your Mood Swings.' (Monica<sup>By</sup> Ramirez Basco )

8. 'Bipolar Disorder : The Ultimate Guide.' ( Sarah<sup>By</sup> Owen , Amanda Saunders )