

What is Bipolar Disorder?

Bipolar disorder is a mental illness defined by extreme emotional highs (mania) and lows (depression). Treatment usually includes a combination of psychotherapy and medication.

↓ Depression (the “lows”)	↑ Mania (the “highs”)
Typically lasts at least 2 weeks Symptoms must cause impairment	Typically lasts at least 1 week Symptoms must cause impairment
Depressed mood Social withdrawal Loss of interest or pleasure Recurring thoughts of death Fatigue nearly every day	Increase in goal-directed behavior Inflated self-esteem and euphoria Racing Thoughts Pleasure-seeking without regard for consequences Decreased need for sleep

⚠ What does mania really look like?

During mania, people lose the ability to make rational decisions. Common behaviors include emptying bank accounts for an immediate thrill, leaving a loving spouse, or using dangerous drugs. Imagine your body has a motor—which you can’t turn off—that’s pushing you through bad decision after bad decision. When the motor finally shuts off, the damage has already been done.

 **Psychotherapy**

Therapy for bipolar disorder often includes learning to recognize episodes of mania and depression before they get out of hand.

Cognitive Behavioral Therapy (CBT) is a common and well-supported treatment for BPD

 **Medication**

Medication is a normal part of treatment for bipolar disorder. It can be very effective.

A type of medication referred to as “mood stabilizers” are often used to manage emotional swings.

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A combination of both psychotherapy and medication has been found to be the most effective treatment for bipolar disorder.

📌 Common Misconceptions

“I sometimes feel really sad one minute, then happy the next. Is this bipolar disorder?”

The ups-and-downs of bipolar disorder are *usually* longer lasting than people think. Periods of depression typically last two weeks or more, while mania lasts a week or more. The symptoms of bipolar disorder are also much more extreme than regular mood swings.

“People are happy when they’re manic.”

Sometimes, but mania is usually a scary experience. Mania often comes with feelings of irritability and being unable to stop or slow down. Plus, mania almost always ends poorly.

“Someone with bipolar disorder shouldn’t use anti-depressants because they’ll become manic.”

The decision to use anti-depressants should be made on a case-by-case basis by a doctor. Oftentimes, the benefits of anti-depressants far outweigh the risks, and they are an essential part of treatment.