

A Brief Note on Bipolar Disorder

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DESCRIPTION

Bipolar disorder is maybe a mood disorder distinguished by periods of depression and periods of abnormally-elevated mood that last from days to weeks each. If the elevated mood is severe or related to psychosis, it's called mania; if it's less severe, it's called hypomania. During mania, a person behaves or feels abnormally energetic, euphoria, or bad-tempered, and that they often create emotional, spontaneous decisions with no regard for the reaction. In general, there's also a decrease in the requirement for sleep during manic phases. During the time of depression, the person may experience crying and have contradictory opinions on life and inferior eye contact with others. The chance of suicide is high; over a period of 20 years, 6% of those with emotional disturbance died by suicide, while 30%-40% engaged in self-injury. Other psychological state problems, like anxiety disorders and substance use disorders, are commonly related to manic depressive illness.

Symptoms can cause indefinite alternatives in mood and behavior, leading to significant distress and problems in life.

Bipolar I disorder: An individual may undergo a minimum of one manic episode which will be originated from or go together with hypomanic or major depressive episodes. In some cases, mania may bring on an opportunity from reality (psychosis).

Bipolar II disorder: Someone may undergo a minimum of one major depressive episode and a minimum of one hypomanic episode but haven't had a manic episode.

Cyclothymic disorder: A person may undergo a minimum of two years or one year in youngsters of the many times of hypomania symptoms and of depressive symptoms.

Other types-includes, as an example, bipolar and other associated disorders influenced by specific drugs or alcohol or because of a medical disorder, like glandular disease, MS, or stroke.

Bipolar II disorder isn't a benign kind of bipolar I disorder, but a special diagnosis. While the manic episodes of bipolar I disorder

are extreme and dangerous, people with bipolar II disorder are depressed for an extended period of their time, which can cause serious disability.

Although the affective disorder can occur at any age, typically it's diagnosed within the teenage years or early 20s. Symptoms can vary from person to person, and symptoms may vary over time.

The exact explanation for the manic depressive illness is indefinite, but various factors are also involved, such as:

Biological difference: People with manic depression seem to own physical changes in their brains. The importance of those changes continues to be unknown but may someday help in pinpoint causes.

Genetics: manic-depressive psychosis is more common in those who have a first-degree relative, like a sibling or parent, with the condition.

Risk factors that will increase the event of major affective disorder or initiate for the primary episode include:

A person having a first-degree relative, like a parent or sibling, with manic depressive illness.

Periods of high stress, like the death of love or other traumatic events.

Drug or alcoholism abuse.

Bipolar disorder is treated with three main classes of medication: mood stabilizers, antipsychotics, and, while their safety and effectiveness for the condition are sometimes controversial, antidepressants.

Mood stabilizers like the antiepileptic drug are employed within the treatment of mania together with anti-epileptic drugs also suggested with psychotherapy.

Lithium is additionally employed in the treatment of emotional disturbance which helps in reducing mania which is additionally employed in the prevention of recurrence of depression so employed in the treatment of depression.

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