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Tel: +27 11 783 1474 Fax: +27 11 884 7074 E-mail: anxiety@iafrica.com website: www.anxiety.org.za

Bipolar mood disorder: The Illusive disorder

Melancholia was a common disorder in days gone by. It was accepted that men, the dominant gender, had their bouts of raisin' hell and hitting the bottle harder than a mule's kick. Melancholia covered a host of sins. It may also have covered real mental disorders.

Who's to say what the real disorder was back then. But there's no reason to think it's any less prevalent today - probably in fact more common than we care to believe. Today periods of almost manic high lasting weeks or days and followed by plunges into the depths of depression can be clinically diagnosed and more recently the diagnosis is Bipolar Mood Disorder (BMD) (Previously called Manic Depression). It is a persistent illness. Without treatment, people with bipolar disorder face long periods of serious life disruption and distress.

"The problem is that once the condition has been switched on, it cannot be switched off,,"says Durban psychiatrist Dr Catherine Maud". But with treatment often a combination of medication and psychotherapy people can live fulfilling and happy lives.

Bipolar is a life-threatening condition and the risk of suicide is very real. Although violence is rare, manic states can lead to rash decisions with dire consequences in business, finances and relationships. Bipolars often have a history of failed marriages, bankruptcy, huge debts, not to mention substance abuse problems.

"Although psychiatrists estimate that as many as one person in every 100 has the genetics for BMD, the actual disorder is not as common" said Maud ". However, it can be triggered by highly stressful incidents or major hormonal changes. Post-natal depression in women can also be the trigger."

BMD is caused by interference with the chemical transmitters in the brain. Mood stabilisers such as lithium can correct chemical imbalances and restore normal function.

"The medication controls the brain's neurological functions, and a natural tendency to fall out of kilter. Without medication the neurological problems recur. That's why it is so dangerous," says Maud.

Susan a successful banker in Durban, says that a combination of medication and therapy have helped keep her stable and symptom free for four years now. Although initially the stress of getting a diagnosis took forever with many different medications, initially for depression. My husband was very supportive and as we tried to understand my spending sprees and working all night, we eventually understood that it was a real illness. As a teenager I was an over achiever, intelligent and talented, but there was another side of me that was angry and confused and had major problems. Luckily when I found the right medication I felt normal again very quickly and got the balance and control of my life back which I desperately wanted. Sometimes at 4am in the morning I would send out bizarre emails to family and friends, at one stage my husband had to unplug phones and internet to stop me sending them out and trying to talk to people at all hours of the night. Only my immediate boss knows of my illness and he has been very understanding".

Due to the similarities with major or chronic depression, BMD is frequently misdiagnosed. When symptoms first arise, patients normally seek the help of their GPs as Susan did. Luckily she was referred eventually to a psychiatrist who was able to diagnosis Bipolar.

An additional hurdle, says Maud, is the high cost of medication. "Pharmaceutical companies invest millions in the development of drugs and have to recoup their investment from sales. Drug companies have a 10-year window of protection during which no generic drugs can be made available.

"Once that is over, generics flood the market forcing prices down. With BMD having only fairly recently been recognised, there are no generics and treatment costs are high," she adds.

"Because bipolar patients must stay on treatment and treatment is expensive this makes it imperative that they receive chronic medication support from medical schemes."

South Africans, and especially those suffering from mental illnesses, will have to continue to wait and see how individual medical schemes deal with new requirements. Lingering stigmatisation will undoubtedly become more entrenched if early signs vindicate the popular view that medical schemes are indeed unsympathetic towards sufferers.

Signs and symptoms of Bipolar Disorder

1. Manic episode

Often begins with a pleasurable sense of heightened energy, creativity, and social ease. Can quickly escalate out of control into a full-blown manic episode. People with mania typically lack insight, deny anything is wrong, and angrily blame anyone who points out a problem. Symptoms are present for at least one week, to the point where the person has trouble functioning in a normal way:

- Feeling unusually "high", euphoric or irritable (or appearing this way to those who know you well)
- Plus at least four of the following:

- Needing little sleep yet having great amounts of energy
- Talking so fast others can't follow your thinking (motor-mouth)
- Having racing thoughts
- Being so easily distracted your attention zips between many topics in just a few minutes
- Having an inflated feeling of power, greatness or importance
- Doing reckless things such as spending too much money, inappropriate sexual activity, making foolish business investments.
- Drug or alcohol abuse
- In severe cases, there may be symptoms such as hallucinations or delusions.

2. Hypomanic episode

Hypomania is a milder form with similar, but less severe symptoms and less impairment. You may have an elevated mood, feel better than usual, and be more productive. These episodes often feel good to the extent people stop their medication to get a "high". However, there is a severe price to pay - either escalating to mania or crashing to depression.

3. Major depressive episode

Symptoms are present for at least two weeks and make it difficult to function:

- Feeling sad, blue, down in the dumps or losing interest in things you normally enjoy
- Plus at least four of the following:
- Trouble sleeping or sleeping too much
- Loss of appetite or eating too much
- Problems concentrating or making decisions
- Feeling slowed down or too agitated to sit still
- Feeling worthless, guilty or having very low self-esteem
- Loss of energy or feeling tired all the time
- Thoughts of suicide or death.

For more information on Bipolar visit SADAG,s website at www.anxiety.org.za or contact them on 011 783-1474