

Bipolar Disorder in Children

Many children and especially adolescents experience mood swings as a normal part of growing up, but when these feelings persist and begin to interfere with a child's ability to function in daily life, bipolar disorder could be the cause. Bipolar disorder, also known as manic-depression, is a type of mood disorder marked by extreme changes in mood, energy levels and behavior.

Symptoms can begin in early childhood but more typically emerge in adolescence or adulthood. Until recently, young people were rarely diagnosed with this disorder. Yet up to one-third of the 3.4 million children and adolescents with depression in the United States may actually be experiencing the early onset of bipolar disorder according to the American Academy of Child and Adolescent Psychiatry. Doctors now recognize and treat the disorder in both children and adolescents, but it is still an under-recognized illness.

Children with bipolar disorder usually alternate rapidly between extremely high moods (mania) and low moods (depression). These rapid mood shifts can produce irritability with periods of wellness between episodes, or the young person may feel both extremes at the same time. Parents who have children with the disorder often describe them as unpredictable, alternating between aggressive or silly and withdrawn. Children with bipolar disorder are at a greater risk for anxiety disorders and Attention-Deficit Hyperactivity Disorder (ADHD). These "co-occurring" disorders complicate diagnosis of bipolar disorder and contribute to the lack of recognition of the illness in children.

Signs and Symptoms

Bipolar disorder begins with either manic or depressive symptoms. The lists below provide possible signs and symptoms. Not all children with bipolar disorder have all symptoms. Like children with depression, children with bipolar disorder are likely to have a family history of the illness. If a child you know is struggling with any combination of these symptoms for more than two weeks, talk with a doctor or mental health professional.

Manic Symptoms

- Severe changes in mood—from unusually happy or silly to irritable, angry or aggressive.
- Unrealistic highs in self-esteem. May feel indestructible or believe he or she can fly, for example.
- Great increase in energy level. Sleeps little without being tired.
- Excessive involvement in multiple projects and activities. May move from one thing to the next and become easily distracted.
- Increase in talking. Talks too much, too fast, changes topics too quickly, and cannot be interrupted.
- This may be accompanied by racing thoughts or feeling pressure to keep talking.
- Risk-taking behavior such as abusing drugs and alcohol, attempting daredevil stunts, or being sexually active or having unprotected sex.

Depressive Symptoms

- Frequent sadness or crying
- Withdrawal from friends and activities
- Decreased energy level, lack of enthusiasm or motivation
- Feelings of worthlessness or excessive guilt

- Extreme sensitivity to rejection or failure
- Major changes in habits such as over-sleeping or over-eating
- Frequent physical complaints such as headaches and stomachaches
- Recurring thoughts of death, suicide, or self-destructive behavior

Many teens with bipolar disorder abuse alcohol and drugs as a way to feel better and escape. Any child or adolescent who abuses substances should be evaluated for a mental health disorder. If an addiction develops, it is essential to treat both the mental health disorder and the substance abuse problem at the same time.

Bipolar disorder is treatable.

What Should Parents and Caregivers Do?

Early identification, diagnosis, and treatment help children reach their full potential. Children who exhibit signs of bipolar disorder should be referred to and evaluated by a mental health professional who specializes in treating children. The evaluation may include consultation with a child psychiatrist, psychological testing, and medical tests to rule out an underlying physical condition that might explain the child's symptoms. A comprehensive treatment plan should include psychotherapy and, in most cases, medication. This plan should be developed with the family, and, whenever possible, the child should be involved in making treatment decisions.

For More Information:

For a free and confidential mental health screening, go on-line to www.mhacolorado.org

National Mental Health Association	800-969-NMHA	www.nmha.org
American Academy of Child and Adolescent Psychiatry		www.aacap.org
American Psychiatric Association	888-357-7924	www.psych.org
American Psychological Association	800-964-2000	www.apa.org
Children and Adults with Attention Deficit/Hyperactivity Disorder	800-233-4050	www.chadd.org
Child and Adolescent Bipolar Foundation	847-256-8525	www.bpkids.org
Federation of Families for Children's Mental Health	703-684-7710	www.ffcmh.org
Knowledge Exchange Network	800-789-2647	www.mentalhealth.org
National Association of School Psychologists	301-657-0270	www.nasponline.org
Depression and Bipolar Support Alliance	800-826-3632	www.ndmda.org