

Acta Psychopathologica

ISSN: 2469-6676

Open access Short Communication

A Mental Illness Bipolar Disorder Erratic Changes in a Person's Energy, and Level of Activity

Mathew Chiang*

Department of Behavioral Health, Stony Brook University Hospital, USA

INTRODUCTION

A mental determination for the most part requires both a record of the individual's emotional experience/side effects e.g., sentiments and considerations and depictions of the individual's way of behaving/signs either self-explained or given by a source. A mental symptomatic assessment is an incorporated bio psychosocial evaluation that incorporates the elicitation of a total clinical history to incorporate past, family, and social, mental history, a total mental status test, foundation of a speculative conclusion, and an assessment of the patient's capacity and Such problems incorporate chemical imbalance, consideration shortfall hyperactivity jumble ADHD, bipolar turmoil, significant sadness and schizophrenia. It can be hard to tell these five major psychiatric syndromes apart because symptoms can overlap. The fact that current psychiatric classification systems are based on clinical syndromes is a fundamental issue. Measurements that are directly related to brain function and pathology are not used in diagnosis; rather, descriptive data that are elicited from clinical observation are used instead [1,2].

DESCRIPTION

Anxiety disorders, depression, and post-traumatic stress disorder PTSD are the three most prevalent diagnoses. In the United States, these three conditions account for approximately 30% of all mental illness diagnoses. A diagnosis is used by doctors and therapists to advise you on treatment options and health risks for the future. A diagnosis is important because it tells health insurance companies that you have a condition that needs treatment. Any medication or surgical treatment you may receive is based on your diagnosis. To avoid wasting time on the wrong treatment, an accurate diagnosis is essential. When assisting in making the appropriate diagnosis, the patient plays a crucial role. Any patient receiving care from a consultant in one of the psychiatric specialties 700-715 is considered a psychiatric patient. These specialties include mental

rensic psychiatry, psychotherapy, or old age psychiatry. A psychiatrist uses a diagnostic tool called a psychiatric evaluation. It can be used to diagnose memory, thought, and behaviour problems. Anxiety, bipolar disorder, depression, schizophrenia, and addiction are all possible diagnoses. One or more of the following five symptoms will be present during a psychotic episode or disorder: Negative symptoms, disorganized thought, disorganized behaviour, and hallucinations post-horrendous pressure issue PTSD is a psychological wellness issue you might foster subsequent to encountering horrible mishaps. War veterans were the first to be diagnosed with the condition. Schizophrenia's exact causes are unknown. Research recommends a mix of physical, hereditary, mental and natural elements can make an individual bound to foster the condition. A stressful or emotional life event may cause a psychotic episode in some people who are at risk for schizophrenia [2-4].

CONCLUSION

Consideration shortage/hyperactivity jumble ADHD is perhaps of the most widely recognized mental problem influencing youngsters. Side effects of ADHD incorporate heedlessness not having the option to remain on track, hyperactivity abundance development that isn't fitting to the setting and impulsivity hurried acts that happen at the time without thought. Previously known as manic-depressive illness or manic depression, bipolar disorder is a mental illness that causes erratic changes in a person's mood, energy, level of activity, and ability to concentrate.

ACKNOWLEDGEMENT

None.

CONFLICT OF INTEREST

The authors declare that they have no conflict of interest.

handicap, mental illness, child and adolescent psychiatry, fo- **REFERENCES**

Received:30-January-2023Manuscript No:IPAP-23-16683Editor assigned:01-February-2023PreQC No:IPAP-23-16683 (PQ)Reviewed:15-February-2023QC No:IPAP-23-16683Revised:20-February-2023Manuscript No:IPAP-23-16683 (R)

Published: 27-February-2023 DOI: 10.36648/2469-6676-9.2.11

Corresponding author Mathew Chiang, Department of Behavioral Health, Stony Brook University Hospital, USA, E-mail: chiang. mathew@gmail.com

Citation Chiang M (2023) A Mental Illness Bipolar Disorder Erratic Changes in a Person's Energy, and Level of Activity. Act Psycho.

Copyright © 2023 Chiang M. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

- 1. Benedetti F, Barbini B, Campori E, Colombo C, Smeraldi E (1998) Patterns of mood variation during antidepressant treatment. Clinical Trial. 49(2):133-9.
- Dubreucq v, Plasse J, Franck N (2021) Self-stigma in serious mental illness: A systematic review of frequency, correlates, and consequences. Schizophr Bull. 47(5):1261-
- 1287.
- 3. Nielsen RE, Banner J, Jensen SE (2019) Cardiovascular disease in patients with severe mental illness. Nat Rev Cardiol. 18(2):136-145.
- 4. Chiang M, Varley WBR, Fan X (2019) Creative art therapy for mental illness. Psychiatry Res. 275:129-136.