



A Detailed Note on Management and Prognosis of Bipolar Disorder

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INTRODUCTION

Bipolar disorder is an affective disorder which is identified by depression and unusual periods of happiness. If the condition is severe or associated with difficulty in distinguishing what is real and not real, then it is known as Mania. When the mood is not severe it is known to be hypomania. In a maniac syndrome, the person feels unusually excited, happy or disappointed and they also take decisions without a second of the consequences that would occur. During phases of maniac syndrome, there is decrease in the necessity for sleep. When the person experience depression, they make less eye contact with people and consider all the aspects of life in a negative manner. Over 20 years, most people suffering from bipolar disorder engaged in self-injury and upto 6% people committed suicide. Persons with bipolar disorder also experience anxiety disorder and drug use disorder. The mechanism of the bipolar disorder is not well known. Depending on the experiences mentioned by the person, behaviors observed by the family or friends and signs assessed by clinician the person with bipolar disorder is diagnosed. Certain disorders show similar signs as that of bipolar disorder such as emotionally unstable personality disorder, Schizophrenia, depressive disorder, attention deficit hyperactivity disorder. The biological tests are performed to check whether other illnesses which mimic as bipolar disorder are present. Medical illnesses such as intracranial injury, brain tumors, encephalomyelitis disseminate, focal seizures, Wilson's disease, Huntington's chorea and migrane are known to mimic bipolar disorder. Niacin deficiency, cobalamine deficiency, vitamin B9 deficiency, thiamine deficiency may also cause mania. In early centuries the bipolar disorder among children is not found in the first half. The management goal is to treat the relapses with medication and help the person suffering from bipolar disorder for long term to prevent any future relapses to occur. Psychotherapy is performed to help the people to

accept and acknowledge their diagnosis, overcoming all different kinds of stress, identifying the prodrome symptoms and increasing the interpersonal relations. Reducing symptoms of depression or anxiety, development of relationship among the families and psychoeducation have more efficiency in preventing the relapse episodes. Medications are generally prescribed to overcome bipolar disorder symptoms. Antidepressants, antipsychotics and mood stabilizers are given to treat bipolar disorder. Usually two or different medicines are prescribed as a combination to treat bipolar disorder individuals. Lithium and anticonvulsants tegretol, lamictal and valproic acid are considered as mood stabilizers as they have efficient effect on the state of the mood in the individuals suffering from bipolar disorder. This is said to be the most effective diagnosis with the best evidence for the manic episodes and also reduces the relapses to occur and the depression caused by the bipolar disorder. This also decreases the suicide risk, harming and death in the individuals suffering from bipolar disorder. This also causes serious side effects to thyroid and kidney functioning if the treatment is done for long time periods. Other medications such as benzos is used as short term course in addition to other drugs used in treatment of bipolar disorder as they provide calming effect until the mood stabilizers show effectiveness. Recognition of the early symptoms and providing treatment at the early stages improves the condition as the signs are less harmful and better responsive to the diagnosis.

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CONFLICT OF INTEREST

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