

## Chapter One Excerpt

# What is Bipolar Disorder and How Can You Tell If You Have It?

### Bipolar I and Bipolar II

So far, we've discussed the range of different symptoms and the different mood states found on the bipolar continuum. There's one more important distinction to make: it's the difference between Bipolar I Disorder and Bipolar II Disorder.

Bipolar I disorder corresponds with what used to be called manic depression: it's when a person has experienced a major depressive episode and a full manic episode in no particular sequence. With Bipolar II a person has had a major depressive episode and a hypomanic episode, but *has not* progressed further into a full manic episode.

Bipolar II tends to be viewed as a mild or more functional form of the disorder. However, it's also important to note that sometimes Bipolar II can be a precursor of Bipolar I. In other words, a major depressive episode that occurs before or after hypomanic symptoms can represent an early phase of Bipolar I.

Just as a volcanic eruption can be heralded by the less explosive venting of a volcano, Bipolar II can be a sign that Bipolar I is about to develop. There is no way of knowing whether someone

diagnosed as Bipolar II will ever develop full manic symptoms and thus cross over into Bipolar I, just as there is no way of knowing whether a volcano's venting of smoke and ash means it is about to erupt. But what we do know is that the sooner hypomanic symptoms can be stabilized, and the longer a person's mood can be kept stable, the less likely it is that symptoms of full mania will suddenly emerge at some point in the future. If the volcano quiets down or only vents with mild to moderate force, then, we hope, we won't see a full eruption.

You now have an overview of most of the symptoms related to the diagnosis of bipolar disorder. If you're not absolutely clear as to whether or not you fit the criteria for the disorder, that's fully understandable. If you had 100 people in a room, all diagnosed with bipolar disorder, you'd find each person's experience would be different from everyone else's. There would be some recurrent themes, but still, expressions of mood, range of emotions, and the frequency and intensity of mood changes would be different for each person.

The important thing to keep in mind is that our checklists and discussion of the different aspects of the disorder are not in any way meant to replace a full diagnostic assessment. If anything, they are meant to give you a clear enough idea of the symptoms and patterns involved in the disorder so that you can determine whether additional consultation is needed. Bipolar disorder can be quite serious; serious enough to land you in a hospital and even affect much of your unfolding future. It's not something to ignore or minimize. It's certainly not something to run from, though we understand that that might be exactly what you want to do. If you're simply unsure about yourself or someone else, it's important to seek professional help.