



Different Types of Bipolar Disorder and its Treatment and Prognosis

Manmak Dong*

Department of Neurology, University of Tohoku, Sendai, Japan

DESCRIPTION

Rapid swings in mood, energy levels, thought patterns, and behaviour are symptoms of bipolar disorder, a chronic mood illness and mental health condition. The ability to complete daily duties may be interrupted by these shifts, which may persist for several hours, days, weeks, or even months.

Bipolar disorder can take several different forms, all of which are characterised by intense mood swings known as hypomanic/manic and depressed episodes. However hypomanic/manic or depressed states are not always present in patients with bipolar disorder. They also go through euthymic episodes or times of chronic state.

TYPES OF BIPOLAR DISORDERS

Bipolar I disorder

Mania episodes have occurred during one or more manic episodes in people with bipolar I illness. The majority of people will experience periods of both mania and depression although a depressive episode is not required for diagnosis. The depressive bouts typically persist for two weeks or longer. Manic episodes should indeed endure at least seven days or be so severe that hospitalisation is required in terms of diagnosis as bipolar I. Bipolar I patients may also go through mixed state or bouts where they exhibit both manic and depressed signs.

Bipolar II disorder

Hypomanic and depressed episodes are common in those with bipolar II. However, they never go through a full manic episode, which is a sign of bipolar I disease. Bipolar II disorder is frequently more incapacitating than bipolar I illness because of chronic depression, even if hypomania is less severe than manic episodes and being more common in bipolar II.

Cyclothymic disorder (Cyclothymia)

Manic-depressive disorder is characterised by a persistently unstable mood. Euthymia, or brief episodes of normal mood can develop in individuals with cyclothymia but they seldom endure average of 8 weeks.

Other specified and unspecified bipolar and related disorders

If a person has endured times of significant clinical aberrant mood elevation but does not fulfil the clinical definition for bipolar I, II, or cyclothymic disorder it is regarded to have other stated or undefined bipolar illness.

TREATMENT

Electro Convulsive Therapy (ECT)

With Electro Convulsive Treatment (ECT) a brief electrical charge is applied to scalp and sent through the brain to cause a seizure. People with severe depression are the ones who most frequently utilise it. For acute life-threatening mania or medication-resistant depression, ECT is extremely safe and highly effective. It is the most effective treatment for mania in expectant women because of any discomfort as ECT uses general anaesthetic and causes sleepy throughout the operation.

Transcranial Magnetic Stimulation (TMS)

The technique known as Transcranial Magnetic Stimulation (TMS) uses a small electromagnetic coil to deliver electrical currents to the brain. It is occasionally used by medical professionals to treat drug-resistant depression. ECT can be substituted with it. TMS is not uncomfortable and it doesn't call for general anaesthesia.

Correspondence to: Manmak Dong, Department of Neurology, University of Tohoku, Sendai, Japan, E-mail: manmakdongmd@gmail.com

Received: 1-Nov-2022, Manuscript No. BDT-22-18950; **Editor assigned:** 4-Nov-2022, PreQC No. BDT-22-18950 (PQ); **Reviewed:** 18-Nov-2022, QC No BDT-22-18950; **Revised:** 25-Nov-2022, Manuscript No. BDT-22-18950 (R); **Published:** 2-Dec-2022 DOI: 10.35248/2168-975X.22.S7.179.

Citation: Dong M (2022) Different Types of Bipolar Disorder and its Treatment and Prognosis. Brain Disord The. S7:179.

Copyright: © 2022 Dong 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.

PROGNOSIS

A person with bipolar disorder has an average nine-year loss in life expectancy and up to one in five of them commit suicide. An estimated 60% of all bipolar disorder sufferers are dependent on drugs or alcohol. The regular and on-going use of

medicine can aid in lowering manic and depressive episode frequency. By being able to identify the signs and causes of these episodes one has a better chance of receiving successful therapy and discovering coping mechanisms that could prevent protracted sickness, lengthy hospital visits and death.