QUICK GUIDE FOR PROVIDERS

Addressing Common Myths About Bipolar Disorder



There are many misconceptions about bipolar disorder. These misconceptions can lead to delayed diagnosis and treatment, inappropriate treatment, or negative patient outcomes.¹ Identifying and correcting common myths about bipolar disorder is an important step to ensuring patients receive the right diagnosis and treatment, which can give them a better chance at living fuller, healthier, more productive lives.

Learn how to address some of the more common myths about what bipolar disorder is and what it is not.

WHAT ARE SOME COMMON MISPERCEPTIONS ABOUT BIPOLAR DISORDER?

Myth #1: "Bipolar disorder" is just another way of saying someone is "moody."

Fact: Bipolar disorder is not just a condition in which someone has "mood swings."^{2,3}

Being "moody" does not in and of itself mean someone has bipolar disorder. Depressive symptoms in bipolar disorder are different from typical deviations from euthymia that all of us experience from time to time. Bipolar depressive symptoms are far more serious and complex than changes in mood.⁴ Moreover, bipolar disorder includes symptoms of mania or hypomania as well as non-mood symptoms, like engaging in risky behaviors or experiencing impairment in functioning.⁴ Normal fluctuations in mood or affect, on the other hand, are not usually accompanied by mania, hypomania, or functional impairment.⁴

Myth #2: Bipolar disorder is a rare condition.

Fact: Millions of people have bipolar disorder.^{5,6}

Bipolar disorder is not rare. In fact, millions of Americans live with bipolar disorder.⁶⁷

- An estimated 1.5% of U.S. adults had bipolar disorder within the past year, and 2.1% will have bipolar disorder at some point in their lives.⁶
- About 45 million people worldwide have bipolar disorder.⁵
- Bipolar is often misdiagnosed or can take many years to diagnose.⁸⁹
 This suggests that the number of people living with bipolar might even be slightly higher than current prevalence estimates suggest.

Myth #3: Manic episodes are actually fun and help people with bipolar disorder to be more creative and productive.

Fact: Manic episodes are serious and are not enjoyable.⁴

Manic episodes are not positive and productive.^{2,10} Although some patients

with bipolar disorder can sometimes find manic episodes productive for a period of time, these mood states are often associated with: $\!\!\!^4$

- Feeling distracted
- Not sleeping
- Making poor (and potentially dangerous) decisions
- Having racing thoughts

Myth #4: Bipolar disorder cannot be treated.

Fact: Many pharmacologic and nonpharmacologic interventions are available that are effective for treating bipolar disorder.^{9,11}

Bipolar disorder is treatable. Many treatments are available to help reduce bipolar disorder symptoms, improve functioning, and optimize quality of life.^{9,11} These include:

- Several effective medications⁹
- Nonpharmacologic interventions like cognitive-behavioral therapy, psychoeducation, and peer support¹¹

Myth #5: People with bipolar disorder are extremely impaired and cannot function in society.

Fact: With appropriate treatment, many people with bipolar disorder are able to manage their symptoms well.

Although challenges exist,¹² people with bipolar disorder can function and live fulfilling lives.¹⁰ For example:

- Many people with bipolar disorder get married.¹³
- It is estimated that about 40% to 60% of people with bipolar are employed.¹⁴
- People with bipolar disorder may regain adequate psychosocial functioning when in disease remission.¹⁵

References

- Rolin D, Whelan J, Montano CB. Is it depression or is it bipolar depression? J Am Assoc Nurse Practition. 2020;32(10):703–713.
 Fuller K. Psychology Today. March 30, 2021. Accessed August 26, 2021. https://www.psychologytoday.com/us/blog/happiness-is-state-minid/202013/4-common-misconception-about-bipolar disorder
- The Cleveland Clinic. 4 Myths You Shouldn't Believe About Bipolar Disorder. March 13, 2018. Accessed August 26, 2021. https://health. clevelandClinic.org/4-myths-you-shouldn't-Believe-about-bipolar-disorder/
- American Psychiatric Association. American Psychiatric Association Diagnostic and Statistical Manual of Mental Disorders, 5th Edition: DSM-5; Arlington, VA: American Psychiatric Publishing 2013.
- American Psychological Association. Myths and Realities About Bipolar disorder. 2012. Accessed August 26, 2021. https://www.apa.org/ news/press/releases/2012/to/bipolar-disorder
- Global Burden of Disease 2017 Disease and Injury Incidence and Prevalence Collaborators. Global, regional, and national incidence, prevalence, and years lived with disability for 354 diseases and injuries for 195 countries and territories, 1990-2017. a systematic analysis for the Global Burden of Disease Study 2017. Lancet: Cost392:1789-1888.
- Blanco C, Compton WM, Saha TD, Goldstein BI, Ruan WJ, Huang B, Grant BF. Epidemiology of DSM-5 bipolar I disorder: results from the National Epidemiologic Survey on Alcohol and Related Conditions–III. J Psychiatric Res. 2017;84:310–317.
- McCormick U, Murray B, McNew B. Diagnosis and treatment of patients with bipolar disorder: A review for advanced practice nurses. J Am Assoc Nurs Pract. 2015;27(9):530-542.
- McIntyre RS, Berk M, Brietzke E, Goldstein BI, López-Jaramillo C, Kessing LV, Malhi GS, Nierenberg AA, Rosenblat JD, Majeed A, Vieta E. Bipolar disorders. *Lancet.* 2020;36(10265):1841-1856.
 Olsson R. Myths About Bipolar Disorder. June 22, 2020. Accessed August 26, 2021. https://www.bannerhealth.com/healthcareblog/ better-me/myths-about-bipolar-disorder
 - Novick DM, Swartz HA. Evidence-based psychotherapies for bipolar disorder. FOCUS. 2019;17(3):238-248.
- 12. Bobo WV. The diagnosis and management of bipolar I and II disorders: clinical practice update. Mayo Clin Proc. 2017;92(10):1532-1551.
- Jackson D, Kolikonda MK, Yeruva RR, El-Mallakh RS. Sexual behavior in patients with bipolar illness. Ann Clin Psychia. 2018;30(4):289-295.
 Marvaha S, Durrani A, Singh S. Employment outcomes in people with bipolar disorder: a systematic review. Acta Psychiatr Scand. 2013;28179-93.
- 2013;128:179-93.
- Lomastro MJ, Valerio MP, Blasco MB, Tagni MF, Martino DJ. Predictors of High Psychosocial Functioning in Bipolar Disorder. J Nerv Ment Dis. 2020;208(11):904-907.

This handout is intended for your education and is not intended to replace a clinical evaluation by a healthcare provider. This is not a diagnostic tool. © NP Psych Navigator 2024



np psych navigator Sponsored by AbbVie Medical Affairs