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# [Exploring the Various Bipolar Disorders](#)

Do you ever feel like you know just enough about Bipolar to be dangerous? Let's see if we can fill in some of the gaps with the latest info from Bipolar experts.

Bipolar disorders are not all alike. There are even specialized categories for the bipolar disorders which doctors use to distinguish one kind from another. This makes it easier for them to discuss the particular types of problems a patient might be having. A fairly benign and often overlooked member of the family of bipolar disorders is hypomania. It is overlooked for good reason. It is seldom a problem for the person who has it. It may even increase his chances for success by making him more outgoing, quick thinking, and optimistic. Treatment is rarely sought and seldom needed.

The most common disorder to be thought of as one of the bipolar disorders is bipolar I. This encompasses all those who suffer from alternating manic and depressed states. Those with bipolar I go from having the highest opinion of themselves to having little regard for their own well being. They go from periods of fast and outlandish activity to times of desperation and thoughts of death.

Of all the bipolar disorders, bipolar I is perhaps the most difficult to treat. Mood stabilizers such as lithium or anticonvulsants are useful. If depression, or especially mania, turns into psychosis, an antipsychotic medication is called for to bring the patient back to reality.

The difficulty comes in treating simple depression in bipolar I. An antidepressant would seem to be in order but, for the person who may become manic, it may be dangerous. It could start a cycle of rapid changes from depression to mania and back again in relatively short order. In the bipolar disorders this problem is most prevalent in bipolar I.

Think about what you've read so far. Does it reinforce what you already know about Bipolar? Or was there something completely new? What about the remaining paragraphs?

Dual diagnosis is another of the bipolar disorders. This is the combination of any bipolar disorder with alcohol and/or drug abuse. Most often, the abuse, in this case, of alcohol or drugs comes after the onset of one of the bipolar disorders.

These substances are used by the person with bipolar disorder to alleviate the symptoms of the illness. A stimulant may seem to help a person to overcome depression, and a depressant, such as alcohol may be thought to lessen the over activity of mania, for example. In reality, the abuse of drugs and/or alcohol only makes the episodes more severe in the end. This is not an answer for those with bipolar disorders.

Less obvious, but also considered one of the bipolar disorders, is MDD, or major depression. People with MDD spend most of the time that they are ill being depressed. They may have minor and short manic episodes, but the depression dominates. For these people, life is grim, unsatisfying, and perhaps seems unbearable. Episodes of depression for these people may last for months or sometimes years.

Treatment for these people is usually less complicated. They may respond well to antidepressants, talk therapy, and even to something as simple as exercise. There is less chance of triggering a manic episode, so treatment is less risky in these bipolar disorders.

There are many bipolar disorders. There are also many ways to treat these bipolar disorders. The trick is to match a disorder to the correct treatment and to encourage the patient to follow that treatment to the best of his or her ability. Having words to describe the different bipolar disorders makes it that much easier for the doctors and others to do their parts.

About the Author

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