

HEALTH MANAGEMENT INSIGHTS

Bipolar disorder

Bipolar disorder, which used to be known as manic depression, is a long-term mental health condition which affects people's moods, causing extreme mood swings.

People with bipolar often have episodes of depression. They can feel low or hopeless and lack energy, losing interest or pleasure in many activities.

They also typically experience episodes of mania or hypomania — which means feeling high, highly energetic or unusually irritable. Hypomania can noticeably change mood or behaviour, but is less severe than mania

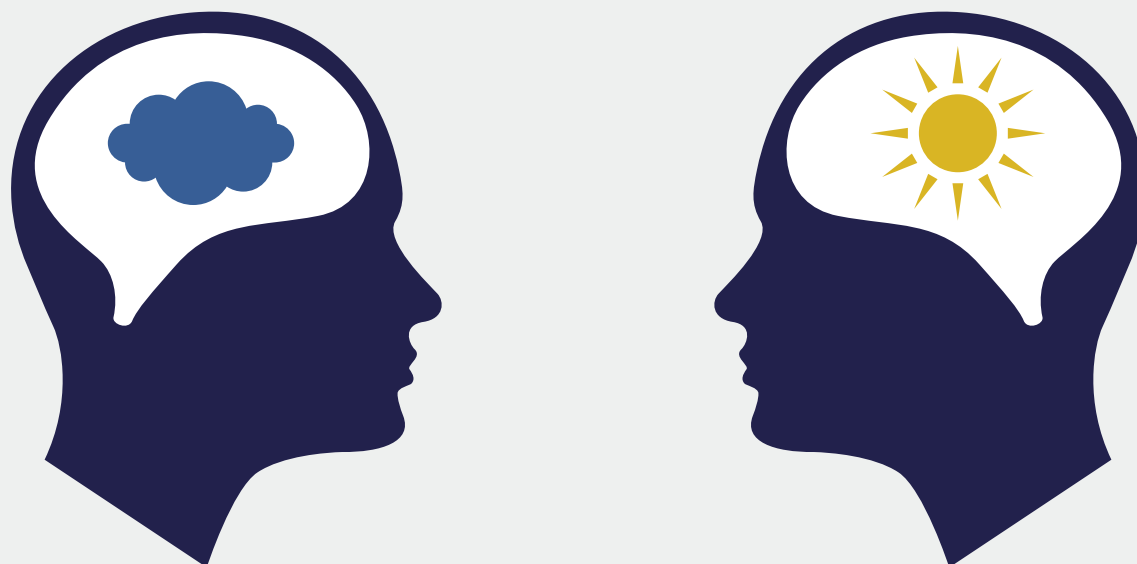
One in every 100 people will be diagnosed with bipolar at some point in their life. It can occur at any age, although it often develops between the ages of 15 and 19 — and rarely develops after 40. Men and women from all backgrounds are equally likely to develop bipolar disorder.

Key takeaways

- > People with bipolar experience severe mood swings of depression and mania
- > Depressive episodes usually involve low mood and energy, with loss of self-confidence
- > Manic episodes can involve euphoria, chattiness, grandiose plans and impulsive spending
- > The high and low phases of bipolar disorder are often so extreme that they interfere with everyday life
- > Treatments aim to prevent or control the effects of episodes, helping people live life as normally as possible
- > Mood-stabilising drugs are usually prescribed to prevent episodes from occurring, but other treatments, including psychological talking therapy, can also be helpful
- > Lifestyle measures, such as healthy eating and exercise, can also be helpful with respect to controlling the condition
- > Those with bipolar can have highly successful careers, but may benefit from adjustments to support them at work — and not just at times of relapse
- > Stress can trigger relapse, so it is important to try to alleviate sources of work stress
- > Consider occupational health referral for bespoke workplace advice, particularly for safety critical roles or if an employee has indicated workplace factors might be a trigger for relapse
- > Equality legislation is likely to apply to an employee diagnosed with bipolar disorder
- > Those diagnosed with bipolar must inform the DVLA of their diagnosis and should not drive during an acute episode of mania or very severe depression, following medical advice at all times

Symptoms

Bipolar is chiefly characterised by episodes of depression and mania/hypomania. These episodes can last for several weeks or months, and symptoms depend on which episode is being experienced.



Depression:

- > Feeling sad, hopeless or irritable
- > Lethargy
- > Lack of focus and memory issues
- > Loss of interest in everyday activities
- > Feeling empty, worthless or guilty
- > Pessimism, despair and self-doubt
- > Delusions, hallucinations or disordered thinking
- > Lack of appetite
- > Sleep issues
- > Suicidal thoughts

Mania:

- > Feeling euphoric and energetic
- > Talking very quickly
- > Having important plans and big ideas
- > Getting easily distracted, agitated or irritated
- > Not eating and not feeling like sleeping
- > Delusions, hallucinations or disordered thinking
- > Doing things with disastrous consequences, such as spending large amounts of money
- > Making decisions or saying things which others feel are out of character

Some people with bipolar disorder have more manic episodes, while others have more depressive episodes.

Patterns vary and some people cycle quickly between the two states with no “normal” period in between.

Some people also experience a “mixed state” where the symptoms of depression and mania are combined. For example, being overactive while feeling low.

Treatment and recovery

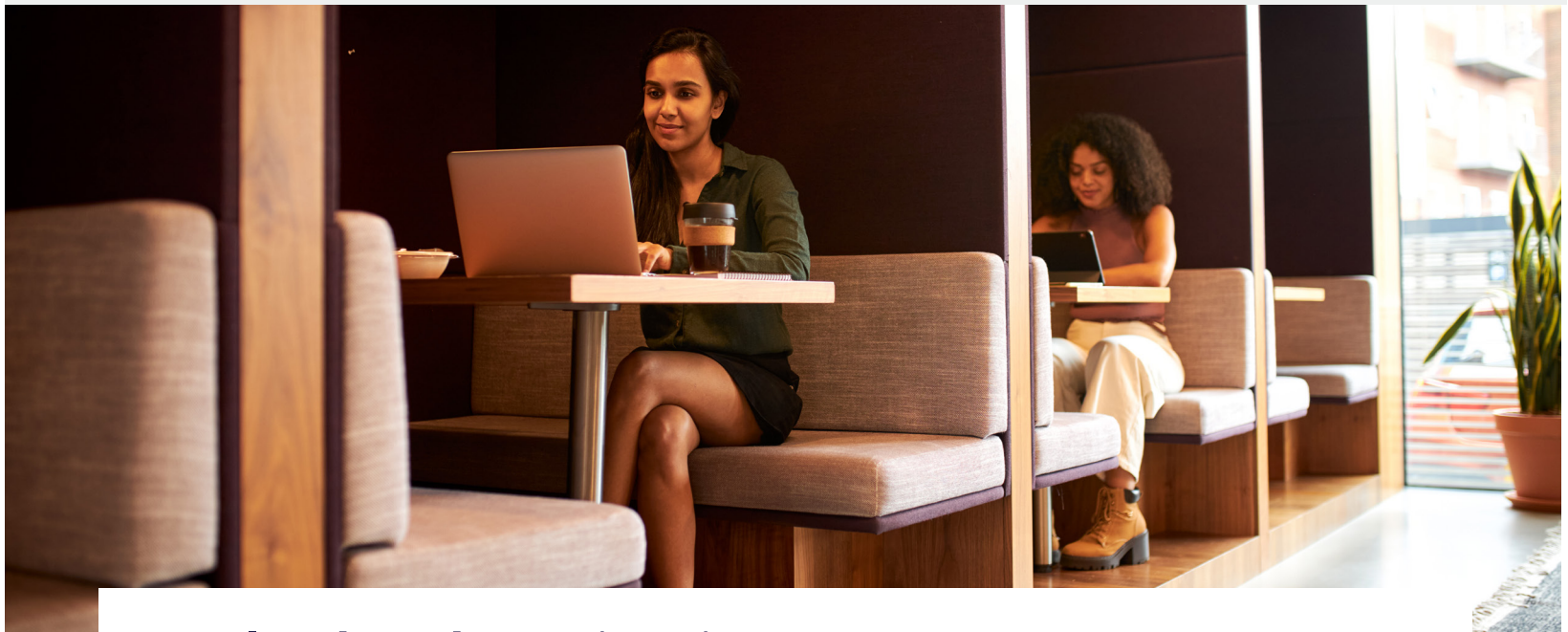
With effective treatment, episodes of depression or mania tend to improve within around three months.

It's usual for people with bipolar to receive a combination of treatments, which might include:

- > Medicines known as "mood stabilisers" which are taken on a daily basis, and which prevent manic or depressive episodes
- > Medicines to treat the symptoms of depression or mania when they occur
- > Help to recognise the triggers or signs of an episode
- > Psychological therapies, such as cognitive behaviour therapy or family therapy, to help individuals cope with depression and improve relationships
- > Lifestyle advice on matters such as exercise, hobbies, healthy eating and sleep hygiene

Most people with bipolar disorder are treated on an outpatient basis, but some may be admitted to hospital if symptoms are severe.

Self-help techniques can also be useful for people living with bipolar; eating well, staying active, maintaining social networks and finding interests to focus on.



Bipolar disorder and work

It is important for organisations to follow good practice around mental health and employment generally.

This means providing and encouraging a culture which destigmatises mental health issues, while ensuring that mental wellbeing policies and procedures are in place and implemented effectively.

Mental health awareness training should be provided to managers and employees,

with managers encouraged to understand the importance of dialogue and early intervention.

If sickness absence occurs, action planning should be implemented early to support a positive return to work.

Having good occupational health support in place will ensure advice and assistance on the implementation of the above measures.



What line managers can do

Managers should take an interest in employees as individuals, not just being concerned with their output.

There are a range of supportive measures which can help employees with underlying bipolar disorder maintain their performance and attendance at work.

These include:

- > Offering flexibility to work from home, to minimise stress or fatigue due to commuting
- > Providing a quiet area within the workplace, if required
- > Review of shift patterns, if these are a triggering factor or causing difficulty with medication timings, etc — night shifts can be particularly problematic due to disrupted sleep patterns
- > Support to attend medical appointments
- > Ensuring workload is achievable and that employees feel adequately trained to undertake roles
- > When a person is experiencing the early symptoms of a possible episode, discuss whether temporary adjustments might help
- > If symptoms are significant, your employee may require time off work and their sickness absence should be managed in line with relevant policies
- > If an employee reports work stress, a stress risk assessment can be a useful tool to help explore this and identify solutions
- > If an employee undertakes safety-critical or business-critical work, they are likely to require restriction from this work when acutely unwell — and occupational health can offer guidance on suitable time frames for a return
- > Those with BPD should report their diagnosis to the DVLA and follow medical advice around driving during or after any acute relapse
- > The Government-run Access to Work scheme can financially assist employers with costs of measures such as specialist awareness training or work-based support and tools

Please note this is not an exhaustive list of supportive measures, and occupational health can offer detailed bespoke advice for specific situations.

Contact us to find out more

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 healthmanagement.co.uk



Useful resources

[NHS – Bipolar disorder](#)

[Bipolar UK](#)

[Mind – What is bipolar disorder](#)

[Access to Work](#)