

Researchers identify early signs of bipolar disorder

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Other mental illness diagnoses, taking psychotropic medication prescribed to treat those illnesses, and specific health service use patterns are strong indicators of bipolar disorder, show researchers from

the University of Manchester and Keele University.

The findings—published in the *British Journal of General Practice*—will enable doctors to carry out quicker referral, assessment, and treatment of the debilitating and risky condition that used to be known as manic depression.

The early warning signs, identifiable over a number of years before diagnosis, include previous depressive episodes, sleep disturbance, substance misuse, receipt of three or more different types of psychotropic medications in a year, escalating self-harm episodes, frequent primary care consultations and missed scheduled GP appointments.

The findings could help improve delays between the early manifestations of bipolar disorder and its diagnosis and effective treatment, currently estimated to be around six years on average.

The research team was based in the NIHR Greater Manchester Patient Safety Research Collaborations. The investigators analyzed routinely collected electronic primary health care data between January 2010 through to July 2017.

They identified 2,366 people with and 47,138 people without a bipolar disorder diagnosis in England.

The work supports the remit of the recent Bipolar Commission Report "[Bipolar Minds Matter](#)," which is calling for major reform to develop a dedicated health care pathway for specialist treatments and lifetime support for people with bipolar disorder.

Up to 3% of the U.K. population experience bipolar disorder at some point during their lives.

Many affected people who are undiagnosed experience a range of adverse health and social outcomes including poor social adjustment, multiple hospital admissions, poor physical health, interpersonal violence, and increased risk of self-harm and suicide.

Dr. Catharine Morgan, a Research Fellow at The University of Manchester, said, "Bipolar disorders are serious mental illnesses characterized by instability in mood. They can impact on the lives of patients and their families to a seriously detrimental degree.

"Early treatment, however, can be crucial in averting years of hardship and elevated risk for patients; our study provides crucial information that could help GPs to consider a diagnosis of bipolar much earlier to enable timely effective treatment and referral on for specialist assessment."

Anya Francis, a University of Manchester researcher who facilitated the lived experience [advisory panel](#) (LEAP) for the research and has experienced bipolar II disorder said, "This work was inspired by sharing my [personal experience](#) of missed opportunities to spot the early warning signs of bipolar and receive a timely diagnosis.

"The early warning signs included such as sleep disturbances, anxiety, irritability, and high energy levels). My personal hope is that the findings from this study can be used in primary care settings to encourage clinicians to 'Think Bipolar' and outcomes for others."

Carolyn Chew-Graham, Professor of General Practice Research at Keele University and who also sits on the Bipolar UK Advisory group said, "Better referral pathways from primary to specialist care are desperately needed both for patients and GPs, when a diagnosis of bipolar is suspected, if patient are to receive the timely help they need. 'Think bipolar' is a strong message to send out to GPs. The findings from our study support the recent call from the [Bipolar Commission Report](#) for

dedicated care for people with [bipolar disorder](#).

"There is evidence that a delay in diagnosis of bipolar can be up to nine years, with a third of people who are eventually diagnosed with bipolar will have attempted to take their own lives because of the distress that they feel and the delay in getting appropriate care."

More information: Catharine Morgan et al, Identifying prior signals of bipolar disorder using primary care electronic health records, *British Journal of General Practice* (2023). [DOI: 10.3399/BJGP.2022.0286](https://doi.org/10.3399/BJGP.2022.0286)

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