

**What is juvenile bipolar disorder?**

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Bipolar disorder is a biological brain disorder causing severe fluctuations in mood, energy, thinking, and behavior. It was previously known as manic depression, as it causes moods to shift between mania and depression. Children, whose symptoms present differently than those of adults, can experience severe and sudden mood changes many times a day. Symptoms of mania and depression can occur simultaneously. Young people with the disorder are frequently anxious and have very low frustration tolerance. Children with bipolar disorder are at risk for suicide, school failure, and substance abuse.



Depressed children may not appear to be sad. Instead they may withdraw, not want to play, need more sleep, display chronic irritability, or cry for no obvious reason. Children may also talk of wishing to die... Symptoms of mania may include elation, grandiose thinking, racing thoughts, pressured speech, hypersexuality, and decreased need for sleep. *(from the Child and Adolescent Bipolar Foundation)*

**Commonly seen behaviors of juvenile bipolar disorder**

Crying for no apparent reason, an expansive or irritable mood, depression, rapidly changing moods lasting a few minutes to a few days, separation anxiety, defiance of authority, sleeping too little or too much, night terrors, excessive involvement in multiple projects and activities, dare devil behaviors, inappropriate or precocious sexual behavior, delusions and hallucinations, extreme irritability, grandiose belief in personal abilities that defy the laws of logic. Also explosive, lengthy, and often destructive rages; hyperactivity, agitation, and distractibility; strong and frequent cravings, often for sweets and carbohydrates; impaired judgment, impulsivity, racing thoughts, and pressure to keep talking. *(from the Child and Adolescent Bipolar Foundation)*

**Interventions**

To help develop appropriate patterns of behavior and learning be prepared with a variety of approaches, respond in a caring and calm manner, focus on quality not quantity in homework, change to a stress-reducing environment, assist and support for transitions, use hands-on projects, allow movement and breaks, do not engage in power struggles, be consistent and offer positive choices, use positive behavioral support interventions, "think younger" (dysmaturity), learn all you can to help this student flourish and learn. Work effectively to prevent and diminish secondary behaviors.\*

**Resources...**

Child & Adolescent Bipolar Foundation [www.bpkids.org](http://www.bpkids.org) 847-256-8525  
 The Advocacy and Learning Center [www.talconline.net](http://www.talconline.net) \*e-mail: [ourorhskids@yahoo.com](mailto:ourorhskids@yahoo.com)  
 Juvenile Bipolar Research Foundation [www.bpchildresearch.org](http://www.bpchildresearch.org) e-mail: [info@jbrf.org](mailto:info@jbrf.org)

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