

Evidence based practice-Bipolar disorder

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Bipolar disorder is a mental disorder that is classified as a person having extreme highs (manic phase) and extreme lows (depressive phase) (Shah et al., 2017). Patients typically get diagnosed with Bipolar disorder in adolescence or early adulthood and occur in about 2% of the population (Shah et al., 2017). This disorder has extreme effects on the patient and the patient's families and can lead to other conditions like depression and possible suicide (Shah et al., 2017). Psychological and psychosocial aspects of this person's life are changed, affecting their job, relationships, and daily life (Shah et al., 2017). According to DSM-5, bipolar disorder has a category of their own under axis 1 (Truschel, 2020). During the manic period, the patient experiences extreme grandiosity, insomnia or hyperactivity, increased speech that is often disorganized, racing thoughts, easily distracted, and participating in risky behavior like gambling away their life savings (Truschel, 2020). During the depressive state, the patient will experience symptoms similar to those of depression. They might have a loss of interest in daily activities, fatigue, a significant change in weight, inability to concentrate, or even suicidal thoughts (Truschel, 2020). This paper will review treatment settings, treatment options, and management of the bipolar disorder through evidence based practice.

The primary purpose of this article is to identify the best treatment and management of bipolar disorder through evidence-based practice. Some key questions that will be answered in this paper include: How each patient is diagnosed with bipolar disorder, how treatment options are decided, what the best options for patients in the manic or depressive state are, how effective these treatments are, and how it affects the patient's daily life. Each patient is different, which means that the course of treatment will be different as well. Also, if the patient is in the manic phase of bipolar disorder, they may not respond to treatment as well as they

would if they were in the normal or depressive state (Shah et al., 2017). Patients with bipolar disorder are typically treated in an outpatient setting, but some patients may require inpatient care (Shah et al., 2017). There are many treatment options for bipolar disorder, and they include Mood stabilizers, antidepressants, antipsychotics, Electroconvulsive therapy, psychosocial interventions, and counseling (Shah et al., 2017). Treatment for bipolar disorder depends entirely on the patient and diagnosis. Typically, the drug of choice for bipolar disorder is lithium, a mood stabilizer (Shah et al., 2017). If a patient experiences Bipolar II (mainly in a depressive state), they may be prescribed an antidepressant along with a mood stabilizer. The goal of treatment for bipolar disorder patients is to participate in daily life as naturally as possible. Part of the goals included in the treatment plan includes: stabilizing daily routines, minimize or remove interpersonal problems, and being able to function as normally as possible (Shah et al., 2017). When assessing a patient with bipolar disorder, a complete history needs to be done, a physical assessment is done, and their mental state is evaluated (Shah et al., 2017). Through this assessment, a diagnosis is completed. This will determine the course of treatment for that patient (Shah et al., 2017). Lithium is typically prescribed for patients if their labs come back normal. These labs would include renal, thyroid, and cardiac conduction (Shah et al., 2017). Some medications that can also be used to manage bipolar disorder include Valproate, Carbamazepine (an anticonvulsant), or antipsychotics (Shah et al., 2017). Patients who have a more severe case of bipolar disorder often participate in combination therapy. In this case, the patient is prescribed a mood stabilizer (lithium) and an antipsychotic (Shah et al., 2017). Electroconvulsive therapy is used to treat patients who are in acute mania, bipolar depression, or a mixed episode (Shah et al., 2017). Psychosocial treatment is also necessary for a patient

with bipolar disorder. This would include family therapy, psychosocial interventions, and cognitive behavior therapy. This would reduce the risk of relapse and help the patient continue daily life (Shah et al., 2017). With bipolar disorder, it is a priority to help the patient live as normally as possible. The main interference of bipolar disorder is that many patients do not fully respond to treatment (Fountoulakis et al., 2020). When a patient does not respond to treatment, they have a greater risk for relapse and episodes (Fountoulakis et al., 2020). The key concepts include treatment options, bipolar disorder management, and treatment resistance. The main assumptions of bipolar disorder are that someone who has this mental illness can't have a normal life. The implication behind this assumption is false. Someone who is diagnosed with bipolar disorder can have a normal life if the disorder is adequately managed. Failure to use concern can cause neglect of this disorder. Bipolar disorder is a severe condition in which the patient's life is altered, but it can be managed healthily with proper awareness. In conclusion, each patient diagnosed with bipolar disorder has a different diagnosis, which can change the course of their treatment. There are interventions for manic and depressive states, and treatment options are continually expanding.

In conclusion, bipolar disorder is a mental disorder in which a patient can go from a manic phase to a normal and depressive phase. A patient diagnosed with bipolar disorder is forever changed, and it is something they must learn to cope with having. A patient who undergoes proper treatment can manage bipolar disorder well and continue to their everyday life. With medications, psychotherapy, psychosocial therapy, and adequate interventions, this disorder can be managed. Bipolar disorder is a manageable disease with proper treatment and is customized differently with each patient.

## Reference page

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