

Psychosocial Approach to

Treat Bipolar Disorder

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Abstract

Bipolar disorder is associated with episodes of depression and manic highs caused by a combination of genetics, environmental influences, and chemical brain imbalances. This is currently an incurable disorder and treatment mainly focuses on symptom management and supportive care. If those suffering from bipolar disorder are left untreated, it will significantly affect their daily life and interpersonal relationships due to more frequent episodic events. This analysis will focus on the psychosocial approach in treating bipolar disorder and why it is so important to implement in the treatment plan. Treatments such as psychoeducation, cognitive behavioral therapy, mindfulness based cognitive therapy, and family education have all proven to improve patient outcomes and decrease the number of manic/depressive episodes, allowing for more control in one's life. The purpose of all of these interventions is so that the patient and family is well educated and prepared to intervene before an episode or situation escalates.

Psychosocial Approach to Treat Bipolar Disorder

Bipolar disorder is a mental health disorder that is affecting millions of people around the world, and can be passed on through generations. People with this disorder experience recurrent episodes of severe depression and high levels of mania which could last for several days. This constant drastic change in mood can significantly hinder a person's ability to function in their daily life due to the physical and emotional toll it takes on their body. Not only is it draining but it also causes some dangerous risks such as suicidal thoughts and uncontrollable impulsivity that could lead to unfortunate consequences. This also directly affects family members who are involved in the person's life by disrupting their daily routine, creating emotional distress, and dealing with the consequences of their dangerous behaviors. Unfortunately, this disorder is not curable and requires continuous, life long treatment due to the high risk of relapse and comorbidities. This is why it is important to incorporate multiple varieties of treatment methods such as medication management and psychosocial interventions. The combination of psychoeducation, cognitive behavioral therapy, mindfulness based therapy, and family focused therapy have all shown to decrease the risk of relapse and improve outcomes in their own ways.

The first intervention that should be implemented is psychoeducation, which is a way to educate the patient and their family on their disorder in order to have better outcomes in the long run. Psychoeducation can be as simple as providing information on their medications, to intensive, complex interventions covering drug and illness information, stressors, coping strategies, lifestyle management, and personalized relapse plans (Bond, K., & Anderson, I. 2015). When proper education is provided, the patient and family will feel more in control of their life and future decision making skills. Feeling in control of the disorder allows the patient to adhere to the plan better and detect early signs of relapse, and intervene before it escalates into a full episode. Psychoeducation appeared to prevent hypomanic, full manic, and depressive relapses in those with bipolar disorder (Bond, K., & Anderson, I. 2015). Once the patient feels

comfortable and in control of their diagnosis through psychoeducation, they are able to benefit from other treatment methods.

The next step in treatment would be implementing cognitive behavioral therapy in a group setting or a one on one session. This type of psychotherapy helps patients manage their symptoms, prevent relapse, and learn alternate coping mechanisms by challenging existing negative thoughts and replacing them with more therapeutic ones. Patients are able to identify their problem and analyze their thoughts once a stressor occurs that precipitates a positive or negative reaction. By challenging those negative, or inaccurate thoughts and behaviors, the patient will be able to construct alternate thoughts and behaviors that are more productive. Kimura et al. 2020. was able to conclude that cognitive behavioral therapy allowed patients to be able to recognize their symptoms, mood, and behavioral patterns and actively reconstruct them into more functional patterns. When patients are able to develop this type of skill, they are able to stop the progression of a potential relapse which is essential for long term management. This type of skill is necessary because people with bipolar disorder are constantly exposed to triggers such as stressful life events, changes in medication, and inadequate sleep or nutrition. Although pharmacological interventions are used to stabilize mood fluctuations, it is best controlled when in conjunction with cognitive behavioral therapy.

Another type of cognitive therapy includes mindfulness based cognitive therapy which focuses on preventing negative thoughts which ultimately leads to depression. This teaches patients to be more aware of their thoughts in a neutral manner (not positive or negative), and process their reactions based on those feelings. Those dealing with bipolar disorder tend to be very impulsive and reactive to the immediate feelings they encounter, which could be potentially dangerous or self destructive. This type of therapy enhances the awareness of their emotions and how they react to that emotion. This change in cognitive function was correlated with increased mindfulness, non-judgemental observation and awareness of thoughts, feelings, and sensations,

and improved the ability to disengage from those distressing thoughts (Stange et al. 2015). This technique of being mindful allows patients to respond to their emotions rather than reacting.

Responding to a situation means that potential outcomes are weighed and the proper reaction to that situation is strategically chosen in order to produce a positive outcome. Being able to be aware of each action performed can prevent poor decisions and depressive episodes.

Lastly, in order to optimize all of these interventions is to make sure the family and the support system is well educated and able to appropriately intervene when needed. Family focused therapy is a combination of psychotherapy and psychoeducation meant specifically for the family in order to analyze their contributing factors that either help or hurt the illness. Family members may be highly critical, hostile, or overly involved following a relapse which could negatively affect the patient's recovery and cause another episode. In the initial orientation phase, family members are taught to recognize the signs and symptoms of bipolar disorder and how to develop strategies to intervene early, and assure consistency with medication regimens (Miklowitz, D. 2008). During each session that follows, different skills are taught to the family in order to improve the overall family dynamic such as communication skills, listening skills, and problem solving skills. These three skills combined can help family members identify specific problems, brainstorm solutions, and make positive requests for changes in one another's behaviors (Rea et al. 2013). When the family can appropriately intervene and be involved in the patient's care, longer delays between relapses, better medication adherence, and high levels of family communication can be achieved.

Managing a chronic condition such as bipolar disorder can become costly and exhausting, not only for the individual but for the entire support system (family and friends). The primary treatment is usually focused on a medication regimen that stabilizes the patient's mood so that they do not have a manic or depressive episode. Although this has been highly effective in many of the patients, it is increasingly optimized when combined with psychosocial interventions that

were previously mentioned. A strong foundation in cognitive and behavioral awareness results in a stronger adherence to their medications. The reason for the implementation of psychoeducation, cognitive behavioral therapy, mindfulness based therapy, and family focused therapy is to create that strong foundation that can support them through any triggering situations that medications can't control. All of those psychosocial interventions allows patients to feel more in control which allows for better long term management.

Resources

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