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“Functioning in Bipolar Disorder: Why Does It Matter? Which Factors Affect It? What Can We Do To Improve It?” *Bipolar Disorders*, vol. 20, Mar. 2018, pp. 15–16. EBSCOhost, doi:10.1111/bdi.04_12616.

In this academic article, the author states the way bipolar disorder can affect a person's life and its functions and how can it be improved. Bipolar disorder is a prevalent illness that conveys significant impairment in general functioning. People with bipolar disorder have lots of unemployment rates which makes them economically dependent. In social life, they have difficulties with personal relationships and social activities. Family, relatives, and even their caregivers feel such stress and a burden to this disorder. So, it is important to understand their functionality to help treat them in the proper way. Patients are taken into treatment and rehabilitation programs. The article also states the areas of functionality are usually more affected on independent living, occupational and educational achievement, cognitive domains, ability to establish interpersonal relationships, and recreational ability. The recovery is very important it helps those who are diagnosed determine how to function and live in a world or community with this chronic illness. Treatment for bipolar disorder to improve patient well-being would be cognitive therapy, interpersonal therapy, and social rhythms.

This article talked about bipolar disorder and how it can affect life physically, mentally, emotionally, and socially. Bipolar messes with your mind tremendously. People experience depression, mania, excitement or happiness. It's a lot of mood swings being diagnosed with bipolar disorder. The claims made in this article are legitimate because I witness bipolar disorder of a family member of mine. It messed her whole life up such as school, work, and relationships with friends and family, and delayed certain goals she had planned. Questions I have is what's going on in their mind? What makes you act and think the way you do? After a person heals from bipolar disorder can they remember what they felt inside and did? For better information, I would look up an interview with someone who is treated and that can explain their experience of bipolar disorder and how they felt. These articles helped with my research question about treatment and that you should know your patient's functionality and treat them the proper way.

Quotes that stood out to me were "Reducing the impact of BD on a person's functioning is critical to improving that person's well-being."

"Because of its chronic and episodic nature, the bipolar disorder (BD) is considered a disease that generates a great burden for the individuals and health systems so that it is the sixth leading cause of disability worldwide."

Bessonova, Leona, et al. "Antipsychotic Treatment Experiences of People with Bipolar I Disorder: Patient Perspectives from an Online Survey." BMC Psychiatry, vol. 20, no. 1, July 2020, pp. 1–12. EBSCOhost, doi:10.1186/s12888-020-02767-x.

Bessonova article about antipsychotic it's a drug that is mostly used to treat patients with bipolar disorder. Online surveys were taken by patients to help and examined this drug to consider a new one with less side effects to treat patients in a better safer way. While doctors are comparing and contrasting on which drug it better for patients. Most patients experienced side effects, and some were treated. The online survey was through a cross-sectional web-based survey was to characterize the experiences of people with bipolar disorder who had experience with an oral antipsychotic in the last year. Adults ages 18 and older could only take the drug with self-reported physician-diagnosed bipolar disorder who received oral antipsychotics during the prior year completed a survey on antipsychotic-related experiences, including side effects and their perceived burden on social functioning, adherence, and work. Also kept an eye on balancing symptom management and side effects when considering a hypothetical new antipsychotic. The perceived impact of specific, prevalent side effects on adherence, work, and preferences for a hypothetical antipsychotic were also examined. The results of the survey were almost all participants (98%) had experienced antipsychotic side effects. Common self-reported side effects were feeling drowsy or tired (83%), lack of emotion (79%), anxiety (79%), dry mouth (76%), and weight gain (76%). Weight gain was cited as the most bothersome side effect, rated by most participants (68%) as "very" or "extremely bothersome." Nearly half of participants (49%) reported that antipsychotic side effects negatively impacted their job performance; almost all (92%) reported that side effects – most commonly anxiety and lack of emotion – negatively impacted social relationships (e.g., family or romantic partners). The most commonly reported reason for stopping antipsychotic use was dislike of side effects (48%). Side effects most likely to lead to stopping or taking less of AP treatment included "feeling like a 'zombie'" (29%), feeling drowsy or tired (25%), and weight gain (24%). When considering a hypothetical new

antipsychotic, the most common side effects participants wanted to avoid included antipsychotic induced anxiety (50%), weight gain (48%), and “feeling like a ‘zombie’” (47%).

This article talked about a specific drug called antipsychotic that is used to treat patients who are diagnosed with bipolar disorder. This drug has both negative and positive effects but mostly negative. The negatives are the side effects it can cause while you're on it. These side effects have a huge impact on your life and that could be your weight gain/weight loss, exhausted, anxiety, dry mouth, sleeping a lot or less sleep and more. Other effects it had was social life during a job because either lack of sleep, emotion or tiredness. Patients dislike the side effects they considered to stop taking the medication. Positive were patients who dealt with least side effects they experienced that can handle it. They even tried a new antipsychotic drug to reduce the dosage, but patients still experience side effects. The claims made in this article are legitimate because I also witness medications to treat bipolar disorder and the side effects are really bad and it happens so quick you even notice until someone tells you. It really makes you want to stop taking them but then you don't want to have several episodes and become hospitalized again. Questions I have still is why side effects has to be included in drugs? This article helped with my research on treatment.

Quotes that stood out to me were “Bipolar I disorder is characterized by a life- time history of at least one manic episode as well as de- pressive episodes, which last 2 weeks or longer”

“In contrast, participants who either stopped or reduced antipsychotic did not as greatly differ as a function of their prior experiences of the side effect feeling drowsy or tired”

Parachin, Victor M. "Bipolar Disorder." Priest, vol. 70, no. 9, Sept. 2014, pp. 81–86.

EBSCOhost,

search.ebscohost.com/login.aspx?direct=true&db=a9h&AN=97284767&site=ehost-live&scope=site.

Parachin article is about bipolar disorder and how he answers frequently asked questions about bipolar. There is about 5.7 million adults in the United States dealing with this condition. That figure indicates that nearly 3 out of every 100 adults in the U.S. has some form of bipolar disorder. Of those, half are over 25 years of age when the disease is recognized.

Translated worldwide, those figures suggest more than 250 million people may have bipolar disorder according to National institute of Mental Health. The symptoms are basically maniac and depression. What causes bipolar disorder is may be a genetic vulnerability because the condition runs within families. If one parent has bipolar but the other parent does not, there is a 7.8 percent risk of an offspring developing the condition. Another theory suggests that the disorder comes as a result of an underlying defect in brain chemistry. This may be triggered by environmental or life-style factors such as high stress or drug or alcohol abuse. Most common types of bipolar disorder are 1 and 2. Bipolar 1 is his is considered the most severe condition with a high percentage of patients needing to be hospitalized in addition to a medication regime. Bipolar I patients may exhibit delusional psychosis, the inability to distinguish reality from fantasy. This may be accompanied by poor judgment, impulsive behavior and a complete lack of awareness that they have a mental illness. Bipolar 2 is defined by a pattern of mild depressive to mild manic episodes shifting back and forth. People around a person with bi-polar II disorder view him as extremely moody and given to mood swings. Bipolar disorder isn't curable but there are effective treatments such as medications and seeing a psychiatrist. Going off medications

would be great, but your doctor has to know that your fully ready to be off medications. Being diagnosed with bipolar disorder is high chance of suicidal thoughts.

This article talked about everything you should know about bipolar disorder for a beginner who doesn't know. The claims made in this article is legitimate because it talked about important information about bipolar disorder and questions you may have and its already answered for you.

A lot of the information are very true and detailed. Questions that I'm considering is what do patients go through during a maniac episode? This article helped with knowing there's still hope for people whose diagnosed with bipolar disorder and you just have to maintain it.

Quotes that stood out to me were "Ongoing counseling is a powerful companion to medication for helping bipolar people manage their lives"

"The prescription medication is not designed to cure bipolar disorder but to treat the physical side of the disorder in your brain so the rest of your being can function without the interference of mania or depression"