Bipolar Disorder Comorbidities

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Common Comorbid Disorders Among Bipolar Patients

Bipolar disorder is challenging on its own, but this illness is also likely to be accompanied by certain other physical and mental disorders in a situation known as comorbidity. In these cases, psychiatric treatment may become more complicated, and physical interventions may be necessary. Unfortunately, patients who suffer from both bipolar and other disorders may be faced with more obstacles on the road to wellness. Below are some of the most common comorbidities that are seen among bipolar patients.

Anxiety Disorders

Fifty percent of bipolar patients also have an anxiety disorder, with generalized anxiety disorder being the most common. However, panic disorder, obsessive-compulsive disorder, phobias, and post-traumatic stress disorder are also common in this group. In those with bipolar disorder, these symptoms are most likely to appear during mixed states that combine features of mania and depression.

ADHD

Up to one in five adults with bipolar disorder also has attention-deficit/hyperactivity disorder. The two disorders have several overlapping symptoms, including excessive talking, restlessness, and inability to concentrate. However, the two disorders can be hard to distinguish from each other because early symptoms of mania or mixed episodes may resemble classic ADHD symptoms. Furthermore, stimulant drugs used to treat ADHD are thought to trigger bipolar disorder in those who are vulnerable.

Substance Abuse

Three-fifths of bipolar patients abuse alcohol or drugs. Factors associated with substance abuse are early diagnosis, familial substance abuse history, and the presence of mixed episodes. The highs and lows of substance abuse and withdrawal can be mistaken for mania and depression, potentially complicating diagnosis and treatment.

Metabolic Syndrome

Metabolic syndrome, a combination of high triglycerides, low HDL, insulin resistance, and high blood pressure, affects between one in five and one in three people with bipolar disorder. The connection between bipolar disorder and metabolic syndrome is not clear. However, researchers do know that many of the medications used to treat bipolar disorder, such as atypical antipsychotics, raise blood sugar and increase the risk of metabolic syndrome.

Obesity

About three-quarters of people with bipolar disorder are overweight. This may, in part, be caused by high levels of cortisol, a hormone whose levels are raised by the stress of bipolar and other psychiatric disorders. However, the antipsychotic and antidepressant drugs used to treat bipolar patients are now also known to cause intense weight gain. Some patients have gained more than 100 pounds due to medication side effects.

Personality Disorders

About one out of three bipolar patients also have a personality disorder in cluster B with narcissistic, borderline, histrionic, or antisocial symptoms. These disorders are more common among individuals who have suffered some form of abuse as a child. Comorbidity of bipolar disorder with personality disorders increases lifetime suicide risk and complicates certain aspects of treatment, such as refinement of drug dosages.

Autistic Spectrum Disorders

Autistic spectrum disorders can be seen in about one out of three children diagnosed with bipolar I disorder. In relatives of children with autistic spectrum disorders, rates of bipolar disorder are significantly higher. Autistic spectrum disorders can isolate bipolar children by further reducing their social skills and development. Of the bipolar symptoms affecting patients with both disorders, grandiosity is especially common.

Comorbidities are major factors affecting the lives and treatment of people with bipolar disorder. In many cases, bipolar patients with comorbidities have greater obstacles to overcome. However, with a strong support system and long-term efforts by patients and their doctors, patients may be more likely to succeed in finding stability. As the connection between bipolar disorder and comorbid disorders continues to be studied by medical professionals, the diagnosis of bipolar comorbidities is likely to increase and lead to faster and more effective treatment.