

Bipolar Disorder

in Children
and Teens



National Institute
of Mental Health

Does your child go through extreme changes in mood and behavior?

Does your child get much more excited or much more irritable than other kids? Do you notice that your child goes through cycles of extreme highs and lows in mood and energy levels more often than other children? Do these mood changes affect how your child acts at school or home?

Some children and teens with these symptoms may have **bipolar disorder**, a mental illness that causes unusual shifts in mood, energy, activity levels, and day-to-day functioning. With treatment, children and teens with bipolar disorder can improve over time.

What is bipolar disorder?

Bipolar disorder (formerly called manic-depressive illness or manic depression) is a mental illness that causes people to experience noticeable, sometimes extreme, changes in mood and behavior. It is a common misperception that children cannot have bipolar disorder. Although most people are diagnosed with bipolar disorder in adolescence or adulthood, the symptoms can appear earlier in childhood.

Bipolar disorder is not the same as the typical ups and downs every child goes through. The mood changes in bipolar disorder are more extreme, often unprovoked, and accompanied by changes in sleep, energy level, and the ability to think clearly.

Children with bipolar disorder sometimes feel very happy or “up” and are much more energetic and active than usual. This is called a **manic episode**. Children with bipolar disorder sometimes feel very sad or “down” and are much less active than usual. This is called a **depressive episode**. Bipolar disorder is often episodic, but it usually lasts a lifetime.

Bipolar disorder symptoms can make it hard to perform well in school or get along with friends and family members. Some children and teens with bipolar disorder may try to hurt themselves or attempt suicide. Early diagnosis and treatment can lead to better functioning and well-being over the long term.

Signs and symptoms of bipolar disorder may overlap with symptoms of other disorders that are common in young people, such as attention-deficit/hyperactivity disorder (ADHD), conduct problems, major depression, and anxiety disorders.

Diagnosing bipolar disorder can be complicated and requires a careful and thorough evaluation by a trained, experienced mental health professional.

With treatment, children and teens with bipolar disorder can manage their symptoms and lead full, active lives.

What causes bipolar disorder?

The exact causes of bipolar disorder are unknown, but several factors may contribute to the illness.

For example, researchers are beginning to uncover genetic factors linked to bipolar disorder and other mental illnesses. Research shows that a person's chances of having bipolar disorder are higher if they have a close family member with the illness, which may be because they have the same genetic variations. However, just because one family member has bipolar disorder does not mean other family members will have it. Many genes are involved in the disorder, and no single gene causes it.

Research also suggests that people with a genetic risk of having bipolar disorder may be more likely to develop the disorder after experiencing trauma or other stressful life events.

Some research studies have found differences in brain structure and function between people with bipolar disorder and people without it. Researchers are examining these differences to learn more about possible causes and effective treatments.

What are the symptoms of bipolar disorder?

Mood episodes in bipolar disorder include intense emotions and significant changes in sleep habits, activity levels, thoughts, or behaviors. Children and teens with bipolar disorder may have manic episodes, depressive episodes, or "mixed" episodes. A mixed episode has both manic and depressive symptoms. These mood episodes cause symptoms that often last for several days or weeks. During an episode, symptoms occur every day and last for most of the day.

These mood and activity changes are very different from the child's usual behavior and the behavior of healthy children and teens.

Children and teens having a **manic episode** may:

- Show intense happiness or silliness for long periods of time.
- Have a very short temper or seem extremely irritable.

- Talk fast about a lot of different things.
- Have trouble sleeping but do not feel tired.
- Have trouble staying focused and experience racing thoughts.
- Seem overly interested or involved in pleasurable but risky activities.
- Do risky or reckless things that show poor judgment.
- Have an inflated sense of ability, knowledge, and power.

Children and teens having a **depressive episode** may:

- Feel frequent and unprovoked sadness.
- Show increased irritability, anger, or hostility.
- Complain a lot about physical pain, such as stomachaches and headaches.
- Start sleeping a lot more.
- Have difficulty concentrating.
- Feel hopeless and worthless.
- Have difficulty communicating or maintaining relationships.
- Eat too much or too little.
- Have low energy and no interest in activities they usually enjoy.
- Think about death or have thoughts of suicide.

Can children and teens with bipolar disorder have other problems?

Young people with bipolar disorder can have several problems at the same time. For example, they may also be at risk of misusing alcohol or drugs.

Sometimes extreme behaviors go along with mood episodes. During manic episodes, young people with bipolar disorder may take extreme risks that they wouldn't usually take or that could cause them harm or injury. During depressive episodes, some young people with bipolar disorder may think about running away from home or have thoughts of suicide.

If your child shows signs of suicidal thinking, take these signs seriously and call your child's health care provider.

If your child is struggling or having thoughts of suicide, call or text the 988 Suicide & Crisis Lifeline at **988** or chat at **988lifeline.org**. This service is confidential, free, and available 24 hours a day, 7 days a week.

How is bipolar disorder diagnosed?

A health care provider will ask questions about your child's mood, sleeping patterns, energy levels, and behavior. There are no blood tests or brain scans that can diagnose bipolar disorder. However, the health care provider may use tests to determine if something other than bipolar disorder is causing your child's symptoms. Health care providers may need to know about medical conditions in the family, such as depression or substance use.

Other disorders—such as ADHD, disruptive mood dysregulation disorder, oppositional defiant disorder, conduct disorder, and anxiety disorders—have symptoms like those of bipolar disorder. It can be challenging to distinguish bipolar disorder from depression that occurs without mania, referred to as “major depression.” A health care provider who specializes in working with children and teens can carefully evaluate your child's symptoms to provide an accurate diagnosis.

How is bipolar disorder treated?

Children and teens can work with their health care provider to develop a treatment plan to help them manage their symptoms and improve their quality of life. It is important to follow the treatment plan, even when your child is not currently experiencing a mood episode. Steady, dependable treatment works better than treatment that starts and stops.

Several types of medication can help treat symptoms of bipolar disorder. Children respond to medications in different ways. They may need to try different types of medication to find the one that works best for them. Some children may need more than one type of medication because their symptoms are complex. Health care providers usually try to prescribe the fewest number of medications and the smallest doses possible to help treat a child's symptoms. **Always tell your child's health care provider about any medication side effects.** Do not stop giving your child a prescribed medication without speaking to a health care provider. Stopping medication suddenly can be dangerous and can make symptoms worse.

Different kinds of psychosocial therapy can also help children and their families manage the symptoms of bipolar disorder. Therapies based on scientific research—including cognitive behavioral approaches and family-focused therapy—can provide support, education, and guidance to youth and their families. These therapies teach skills that can help people manage bipolar disorder, including skills for maintaining routines, enhancing emotion regulation, and improving social interactions.

What can children and teens expect from treatment?

With treatment, daily functioning and well-being can improve over time. Treatment is more effective when health care providers, caregivers, and young people work together.

Sometimes a child's symptoms may change or disappear and then come back. When this happens, your child's health care provider may recommend changes to the treatment plan. Treatment can take time but sticking with the treatment plan can help young people manage their symptoms and reduce the likelihood of future episodes.

Your child's health care provider may recommend keeping a daily life chart or mood chart to track your child's moods, behaviors, and sleep patterns. This may make it easier to track the illness and see whether treatment is working.

How can I help my child or teen?

Help begins with an accurate diagnosis and treatment. Talk to your child's health care provider about any symptoms you notice.

If your child has bipolar disorder, here are some basic things you can do:

- Be patient.
- Encourage your child to talk, and listen to your child carefully.
- Pay attention to your child's moods, and be alert to any major changes.
- Understand triggers and learn strategies for managing intense emotions and irritability.
- Help your child have fun.
- Remember that treatment takes time: Sticking with the treatment plan can help your child get better and stay better.
- Help your child understand that treatment can make life better.

How does bipolar disorder affect caregivers and families?

Caring for a child or teenager with bipolar disorder can be stressful for parents and families. Coping with a child's mood episodes and other symptoms—such as short tempers and risky behaviors—can challenge any caregiver.

It is important that caregivers take care of themselves, too. Find someone you can talk to or consult your health care provider about support groups. Finding support and strategies for managing stress can help you and your child.

Where do I go for help?

If you're unsure of where to get help, your doctor, pediatrician, or other family health care provider is a good place to start. A health care provider can refer you to a qualified mental health professional, such as a psychiatrist or psychologist, who has experience treating bipolar disorder and can evaluate your child's symptoms.

Learn more about getting help on the National Institute of Mental Health (NIMH) website at www.nimh.nih.gov/findhelp. The Substance Abuse and Mental Health Services Administration has an online tool at <https://findtreatment.samhsa.gov> to help you find mental health services in your area.

If you or someone you know is struggling or having thoughts of suicide, call or text the 988 Suicide & Crisis Lifeline at **988** or chat at 988lifeline.org. In life-threatening situations, call **911**.

What should I know about clinical trials?

NIMH supports a wide range of research, including clinical trials that look at new ways to prevent, detect, or treat diseases and conditions—including bipolar disorder. Although individuals may benefit from being part of a clinical trial, participants should be aware that the primary purpose of a clinical trial is to gain new scientific knowledge so that others may be better helped in the future.

Researchers at NIMH and around the country conduct clinical trials with patients and healthy volunteers. Talk to a health care provider about clinical trials, their benefits and risks, and whether one is right for you. For more information, visit www.nimh.nih.gov/clinicaltrials.

Reprints

This publication is in the public domain and may be reproduced or copied without permission from NIMH. We encourage you to reproduce and use NIMH publications in your efforts to improve public health. If you do use our materials, we request that you cite the National Institute of Mental Health. To learn more about citing NIMH publications, refer to www.nimh.nih.gov/reprints.

For More Information

NIMH website

www.nimh.nih.gov

www.nimh.nih.gov/espanol (en español)

MedlinePlus (National Library of Medicine)

<https://medlineplus.gov>

<https://medlineplus.gov/spanish> (en español)

ClinicalTrials.gov

www.clinicaltrials.gov

<https://salud.nih.gov/investigacion-clinica> (en español)

National Institute of Mental Health

Office of Science Policy, Planning, and Communications

6001 Executive Boulevard

Room 6200, MSC 9663

Bethesda, MD 20892-9663

Toll-free: 1-866-615-6464

Email: nimhinfo@nih.gov

Website: www.nimh.nih.gov



National Institute
of Mental Health

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
National Institutes of Health
NIH Publication No. 23-MH-8081
Revised 2023