



BIPOLAR DISORDER Factsheet

September 2021

How are symptoms of bipolar disorder and cognition related?

Bipolar disorder is characterised by episodes of depression and mania, which can include psychosis. Cognitive deficits are also a core feature of the disorder.

A major depressive episode is a period of at least two weeks in which a person has at least five of the following symptoms (including one of the first two): intense sadness or despair; feelings of helplessness, hopelessness or worthlessness; loss of interest in activities once enjoyed; feelings of guilt, restlessness or agitation; sleeping too little or too much; slowed speech or movements; changes in appetite; loss of energy; difficulty concentrating, remembering or making decisions; and/or thoughts of death or suicide.

A manic episode is a period of at least one week when a person is high spirited or irritable in an extreme way most of the day for most days. It involves changes in normal behaviour such as showing exaggerated self-esteem or grandiosity, less need for sleep, talking more than usual, talking more loudly and quickly, being easily distracted, doing many activities at once, scheduling more events in a day than can be accomplished, embarking on risky behaviour, uncontrollable racing thoughts, and/or quickly changing ideas or topics. Psychotic symptoms such as hallucinations and delusions most commonly occur during manic episodes.

What is the evidence for the relationship between cognition and symptoms?

High quality evidence finds small effects of greater impairment in global cognition, verbal and working memory, processing speed, and executive functioning in people with bipolar disorder and a history of psychosis compared to people with bipolar disorder with no history of psychosis. Moderate to high quality evidence also finds greater impairment in social cognition in people with a history of psychosis. There were no differences in visual memory or attention.

Moderate to low quality evidence finds an association between poorer overall cognitive functioning and more mood episodes, more hospitalisations, and longer duration of illness.

For more information see the technical table



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NeuRA (Neuroscience Research Australia) is one of the largest independent medical and clinical research institutes in Australia and an international leader in neurological research.

Diseases of the brain and nervous system pose the greatest health, economic and social burden of any disease group because they are chronic, debilitating and have no known cures.

Medical research is the cornerstone of efforts to advance the health and wellbeing of families and the community. Our dedicated scientists are focussed on transforming their research into significant and practical benefits for all patients.

While we hope you find this information useful, it is always important to discuss any questions about bipolar disorder or its treatment with your doctor or other health care provider.

HOW YOUR SUPPORT HELPS

We are able to make significant advances due to the generosity of countless people. Your donation allows us to continue to work towards transforming lives. For information on how you can support our research, phone **1300 888 019** or make a secure donation at neura.edu.au.