BIPOLAR DISORDERS Factsheet

September 2021

What are mixed states?

Bipolar disorder is characterised by recurrent episodes of depression and mania or hypomania. Some people with bipolar disorder also show episodes of mixed states. The Diagnostic and Statistical Manual of Mental Disorders (DSM-5) defines mixed states as having three or more manic or hypomanic symptoms within a depressive episode, or depressive symptoms within a manic or hypomanic episode.

A 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. A manic episode 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. These changes in behaviour are significant and clear to friends and family and are severe enough to cause major dysfunction.

A hypomanic episode is similar to a manic episode but the symptoms are less severe and need only last four days in a row. Hypomanic symptoms do not lead to the major problems that mania often causes, and the person is still able to function.

What is the evidence for mixed states in bipolar disorder?

Moderate quality evidence suggests the prevalence of mixed states in people with bipolar disorder is around 35%, which is significantly more prevalent than in people with major depression (around 24%). The prevalence of mixed states in children with bipolar disorder is around 55%. There were high rates of comorbidities in these children, particularly ADHD, oppositional defiant disorder, and anxiety disorders. The prevalence of mixed states during hypomania is around 27% and the prevalence of mixed states during bipolar depression is around 18%.

Compared to people with bipolar disorder without mixed features, those with mixed features report more unemployment, rapid cycling, anxiety, and suicide attempts. These were particularly apparent in people in a hypomanic or manic episode rather than a depressive episode.



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.

For further information see the technical table

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 **www.neura.edu.au**.

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