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BIPOLAR DISORDERS Factsheet

July 2020

How are bipolar and unipolar depression different?

Bipolar disorders are a group of disorders characterised by episodes of depression and mania or hypomania. Bipolar disorders described in the DSM-5 (Diagnostic and Statistical Manual of Mental Disorders, version 5) include bipolar I disorder involving severe depression and mania, bipolar II disorder involving depression and hypomania (less severe mania), and cyclothymic disorder involving many mood swings, with hypomania and depressive symptoms occurring often and fairly constantly.

Major depressive disorder characterised in the DSM-5 involves five (or more) of the following symptoms to be present and represent a change from previous functioning. At least one of the symptoms must be either depressed mood or loss of interest or pleasure, with no history of mania.

- Depressed mood most of the day, nearly every day
- Diminished interest/pleasure in all, or almost all, activities most of the day, nearly every day
- A change of more than 5% of body weight in a month or decrease/increase in appetite
- Insomnia or hypersomnia
- Fatigue or loss of energy
- Psychomotor agitation or retardation that is observable by others
- Feelings of worthlessness or excessive or inappropriate guilt
- Diminished ability to think or concentrate, or indecisiveness
- Recurrent thoughts of death or a suicide attempt or plan

What is the evidence for differences in treatment response between bipolar and unipolar depression?

Moderate to low quality evidence suggests no differences in depression severity between people with bipolar or unipolar depression after treatment with antidepressants. There are small, but clinically significant, effects of improved depressive symptoms with antidepressants for major depressive disorder. For bipolar disorder, the antidepressant paroxetine, antipsychotics aripiprazole, lurasidone, olanzapine, quetiapine, and ziprasidone, and mood stabilisers lithium, lamotrigine or divalproex also have small, but clinically significant effects for improving depression.

For further 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.