

Bipolar Journey

A PROJECT FROM THE CENTER FOR NEUROSCIENCE AND CELL BIOLOGY OF THE UNIVERSITY OF COIMBRA, PORTUGAL

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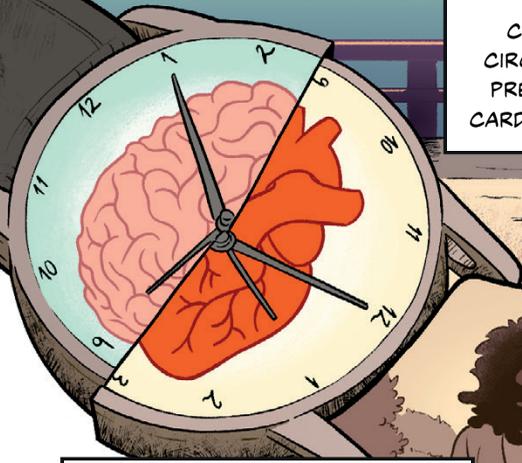
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BIPOLAR DISORDER IS CHARACTERIZED BY THE ALTERNATION BETWEEN DEPRESSIVE AND MANIC EPISODES. A PATIENT MAY FEEL VERY EXCITED AND ENTHUSIASTIC, AND THEN DEPRESSED, ANXIOUS, IRRITABLE OR SENSITIVE.

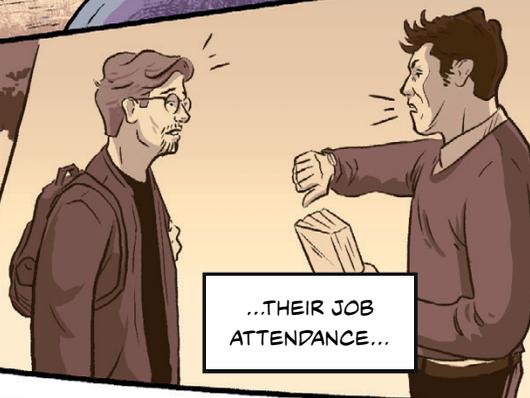
THEREFORE, IT CAN BE A VERY DISABLING CONDITION, RESULTING IN THE DISRUPTION OF CIRCADIAN RHYTHMS AND SLEEP, AND IN GREATER PREDISPOSITION FOR OTHER PATHOLOGIES (E.G. CARDIOVASCULAR AND NEUROLOGICAL DISORDERS).



MOREOVER, BIPOLAR DISORDER CAN NEGATIVELY INFLUENCE THE PATIENT'S PERSONAL AND SOCIAL RELATIONSHIPS...



...THEIR JOB ATTENDANCE...



...AND IT CAN PROMOTE ADDICTIVE BEHAVIORS, WHICH CAN BE DIFFICULT TO MANAGE BY ALL INVOLVED, WITH POTENTIALLY HARMFUL RESULTS.



Ernest Hemingway

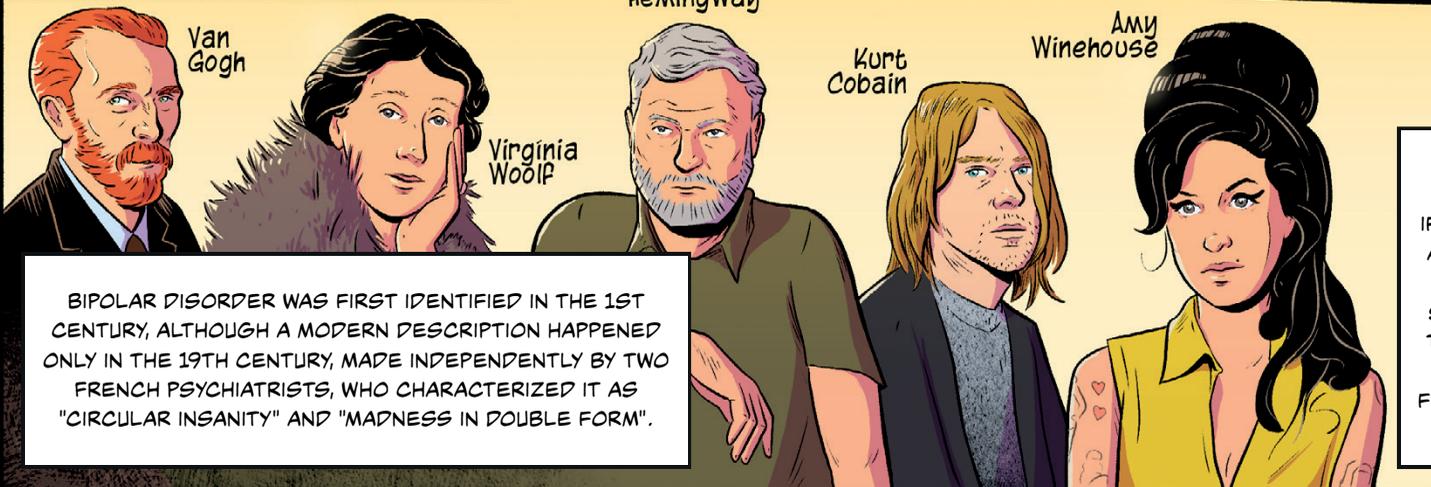
Van Gogh

Virginia Woolf

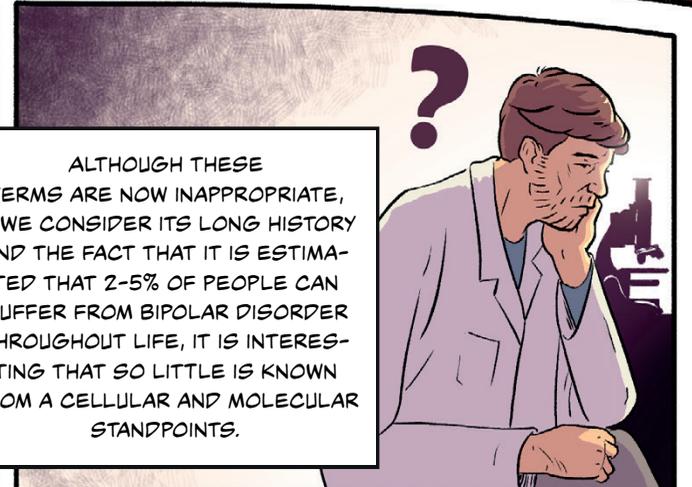
Kurt Cobain

Amy Winehouse

BIPOLAR DISORDER WAS FIRST IDENTIFIED IN THE 1ST CENTURY, ALTHOUGH A MODERN DESCRIPTION HAPPENED ONLY IN THE 19TH CENTURY, MADE INDEPENDENTLY BY TWO FRENCH PSYCHIATRISTS, WHO CHARACTERIZED IT AS "CIRCULAR INSANITY" AND "MADNESS IN DOUBLE FORM".



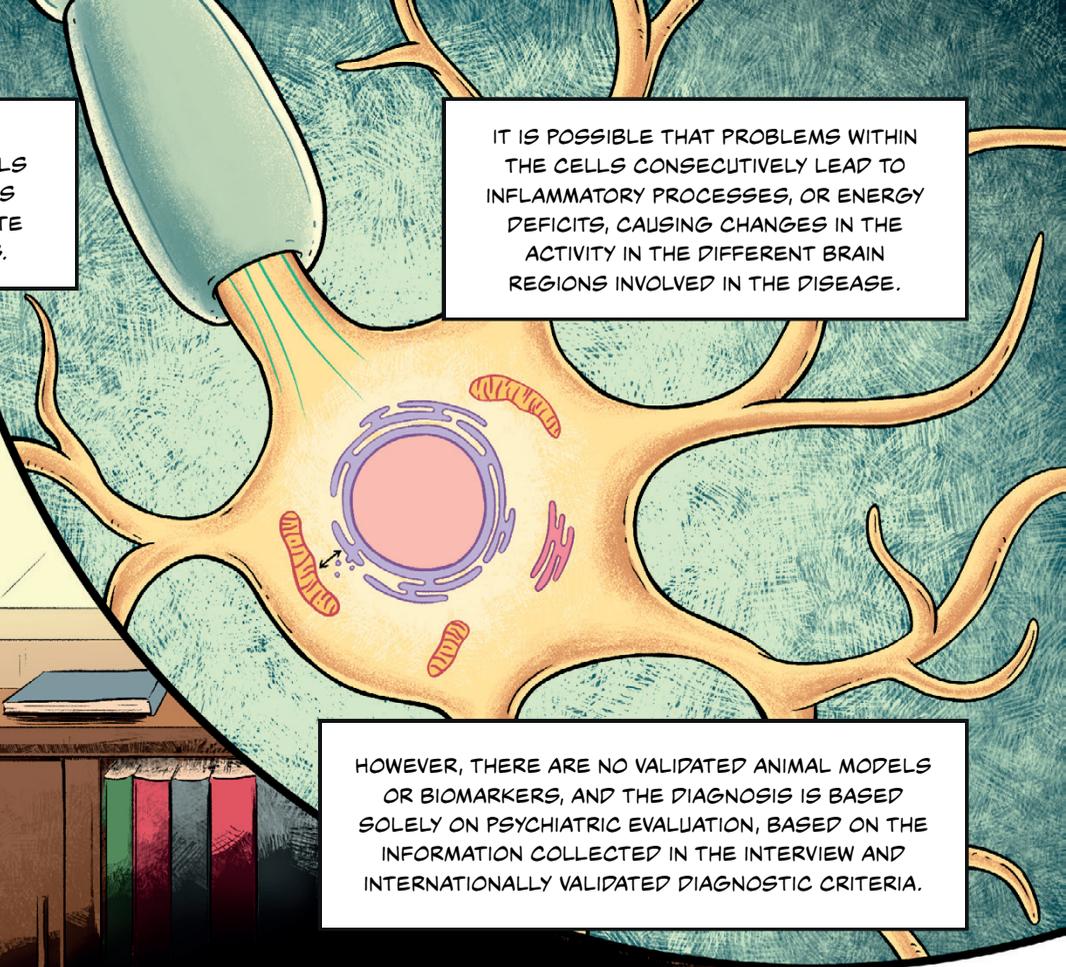
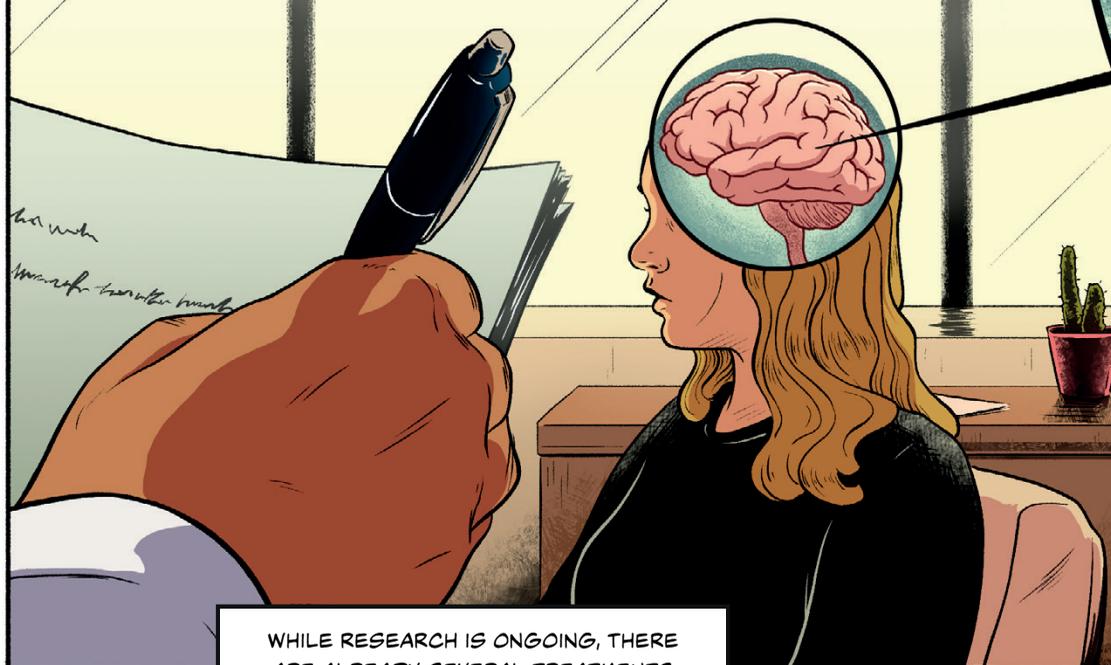
ALTHOUGH THESE TERMS ARE NOW INAPPROPRIATE, IF WE CONSIDER ITS LONG HISTORY AND THE FACT THAT IT IS ESTIMATED THAT 2-5% OF PEOPLE CAN SUFFER FROM BIPOLAR DISORDER THROUGHOUT LIFE, IT IS INTERESTING THAT SO LITTLE IS KNOWN FROM A CELLULAR AND MOLECULAR STANDPOINTS.



THERE IS AN IMPORTANT GENETIC COMPONENT, ONLY PARTIALLY UNDERSTOOD.

ON THE OTHER HAND, ONGOING RESEARCH USING MODELS PRODUCED FROM PATIENT CELLS FOCUS ON CHANGES IN THE WAY NERVE CELLS (NEURONS) WORK, AND HOW THEY COMMUNICATE WITH EACH OTHER AND RESPOND TO STRESS.

IT IS POSSIBLE THAT PROBLEMS WITHIN THE CELLS CONSECUTIVELY LEAD TO INFLAMMATORY PROCESSES, OR ENERGY DEFICITS, CAUSING CHANGES IN THE ACTIVITY IN THE DIFFERENT BRAIN REGIONS INVOLVED IN THE DISEASE.



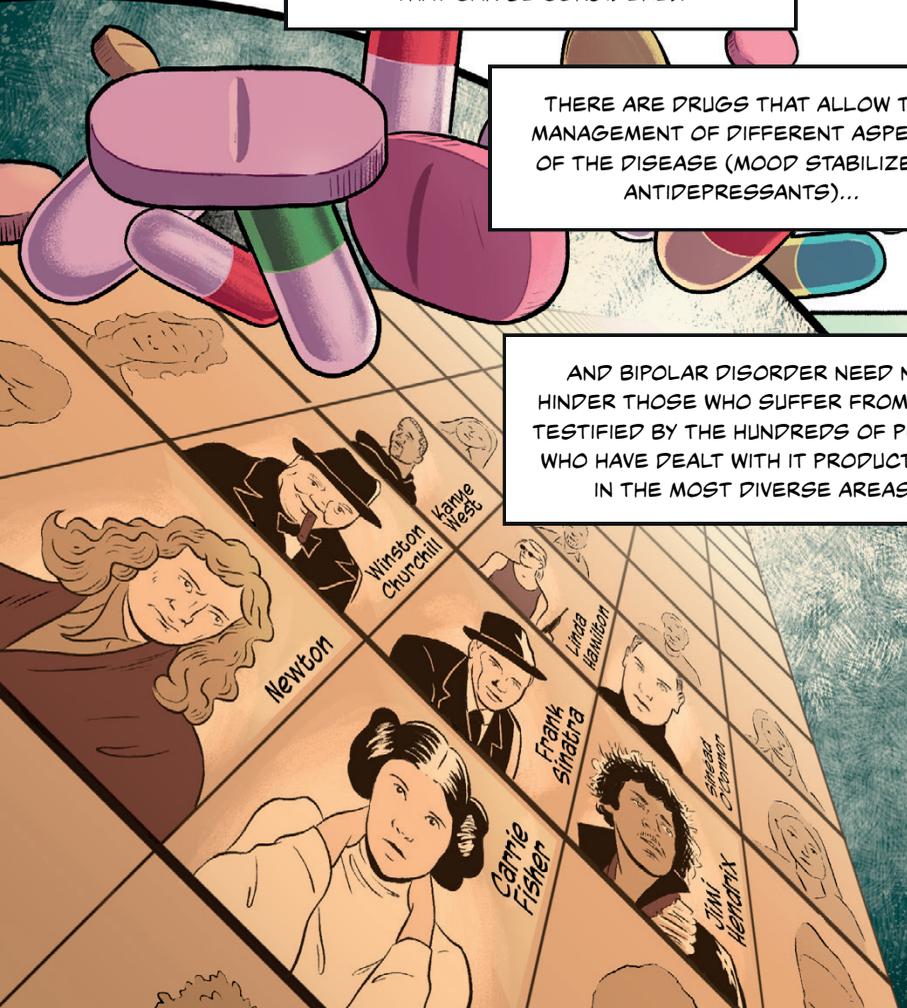
HOWEVER, THERE ARE NO VALIDATED ANIMAL MODELS OR BIOMARKERS, AND THE DIAGNOSIS IS BASED SOLELY ON PSYCHIATRIC EVALUATION, BASED ON THE INFORMATION COLLECTED IN THE INTERVIEW AND INTERNATIONALLY VALIDATED DIAGNOSTIC CRITERIA.

WHILE RESEARCH IS ONGOING, THERE ARE ALREADY SEVERAL TREATMENTS THAT CAN BE CONSIDERED.

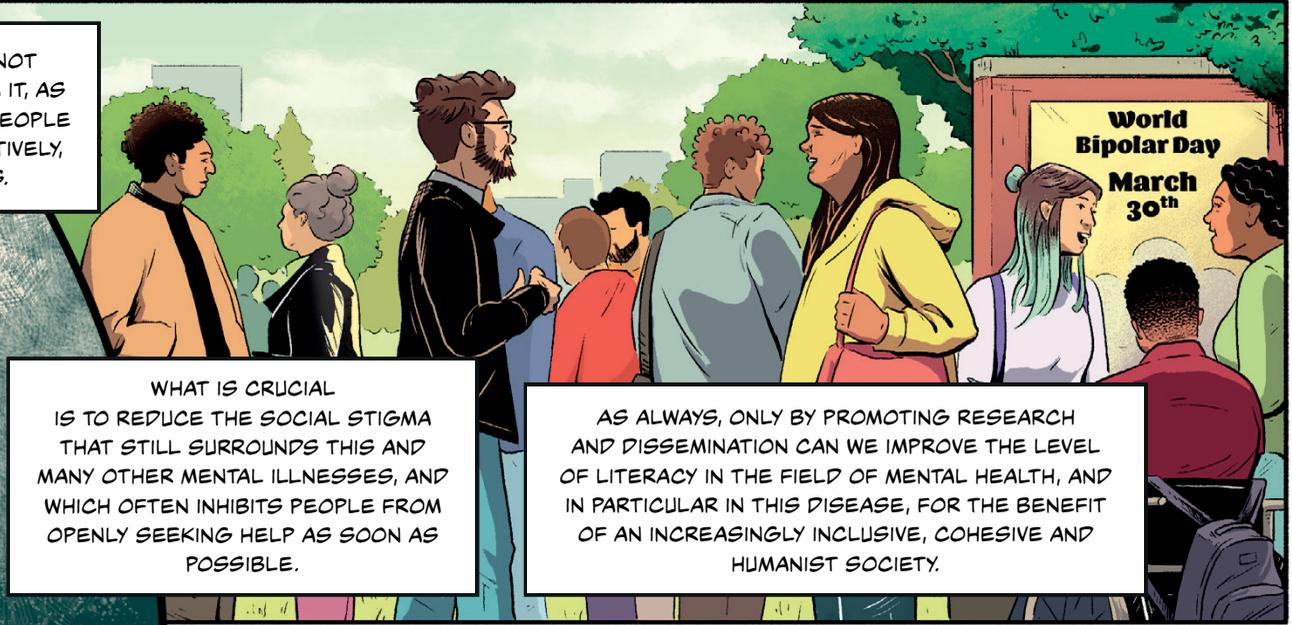
THERE ARE DRUGS THAT ALLOW THE MANAGEMENT OF DIFFERENT ASPECTS OF THE DISEASE (MOOD STABILIZERS, ANTIDEPRESSANTS)...



...AS WELL AS PSYCHOTHERAPY, PSYCHOEDUCATION, AND THE ADOPTION OF BEHAVIORS SUCH AS REGULAR PHYSICAL EXERCISE OR MEDITATION, AMONG MANY OTHER POSSIBLE APPROACHES.



AND BIPOLAR DISORDER NEED NOT HINDER THOSE WHO SUFFER FROM IT, AS TESTIFIED BY THE HUNDREDS OF PEOPLE WHO HAVE DEALT WITH IT PRODUCTIVELY, IN THE MOST DIVERSE AREAS.



WHAT IS CRUCIAL IS TO REDUCE THE SOCIAL STIGMA THAT STILL SURROUNDS THIS AND MANY OTHER MENTAL ILLNESSES, AND WHICH OFTEN INHIBITS PEOPLE FROM OPENLY SEEKING HELP AS SOON AS POSSIBLE.

AS ALWAYS, ONLY BY PROMOTING RESEARCH AND DISSEMINATION CAN WE IMPROVE THE LEVEL OF LITERACY IN THE FIELD OF MENTAL HEALTH, AND IN PARTICULAR IN THIS DISEASE, FOR THE BENEFIT OF AN INCREASINGLY INCLUSIVE, COHESIVE AND HUMANIST SOCIETY.