

Trying to understand more about bipolar 2 disorder

Thanks to people like Stephen Fry, most of us are much more aware of what a diagnosis of bipolar disorder means. What many people don't know, however, is that there are two types of bipolar disorder – and even though the second kind, bipolar 2, is more common, it is not nearly as well understood by researchers or mental health professionals.

Like people with bipolar 1, people with bipolar 2 experience episodes of depression, and also have periods of time when their mood is extremely high, or 'manic'.

But for people with bipolar 2, the 'highs' are much less severe and the symptoms of 'hypomania' less likely to interfere dramatically with their lives or demand admission to hospital. The depression they experience, however, can be much worse than the depression experienced by people with bipolar 1.

An estimated two in every 100 people have bipolar 2, and women are more likely to be given the diagnosis than men. However, there has been little research about bipolar 2 to inform decisions about treatment, and researchers have scant knowledge about how the illness develops.

'There is a large and growing body of research on bipolar 1 disorder and the best treatment options that may help in both the short term and longer term,' says Professor Nicol Ferrier at Newcastle University. 'Unfortunately, bipolar 2 is hardly ever the main focus of research studies, and so there are gaps in our knowledge of how the problem develops over time. There are no drugs specifically licensed for the treatment of bipolar 2 in the UK, and few evidence-based guidelines to inform treatment plans. We are unclear about the best treatment options.'

Professor Ferrier is now leading a research project that seeks to shed more light on bipolar 2 disorder. He and his colleagues are recruiting a group of 180 people in the north east of England who have been given the diagnosis and who are willing to tell researchers about their symptoms, and what sort of care they are offered by mental health professionals. People are being found through mental health services and primary care services with the help of staff employed by the Mental Health Research Network (see www.mhrn.info for more information about this organisation).

Initially, those who agree to participate are being asked to complete a daily mood diary for at least three months and meet with researchers regularly to talk to them about what it's like to live with bipolar 2.

Many of the people recruited to the ABC Study (A Bipolar Cohort Study) are agreeing to stay involved with research for three years (until 2012) and give information to other teams who are working on other studies about bipolar 2. All of the studies will aim to ultimately develop better services and treatment for bipolar 2 – they may test drugs and talking therapies, for example.

■ This article first appeared in *Mental health research can help all of us*, published by the National Institute for Health Research Mental Health Research Network (MHRN) in February 2011. To find out more about the work of the MHRN, or for a copy of the publication, visit www.mhrn.info

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