# Irritability, Depression & Differential Diagnosis of Bipolar Spectrum Disorders



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## Learning objectives

- Importance of comorbidities in differential diagnosis
- Diagnostic criteria & areas of possible confusion about irritability & depression
- Key concepts to differentiate bipolar spectrum
- Updates in DSM 5



### Why is it important to differentiate **Bipolar Spectrum Disorder in Youth**

**Actual ADHD** 

**Actual Unipolar Depressed** 



**Bad Side Effects** Don't get better

Actual **Bipolar** 

Misdiagnosed False -

**ADHD** 

Unipolar **Depressed**  **Stimulant** 

No **Antimanic** 

**Antidepressant** 

**Very costly Agitation Psychosis Mania** 

## **Diagnostic difficulties**

#### Difficult, time consuming, & problematic:

- Differentiate from other psychiatric disorders
  - Moody ADHD/Disruptive Behavior Disorders
  - Disruptive mood dysregulation disorder
  - Non-bipolar depression
  - High functioning autism spectrum disorders
- Differentiate subtle symptoms from developing child
- False statement: "Hey, she/he looks normal, she/he cannot be bipolar!"



#### Comorbid disorders are very common

	Mass General	WASH-U	Case Western	COBY BP-I Age Adjusted
Attention-Deficit Hyperactivity D/O	87%	87%	70%	69 %
Oppositional Defiant D/O	86%	79%	47%	46%
Conduct D/O	41%	12%	17%	12%
Anxiety D/O	54%	23%	14%	37%
Substance Use D/O	7%	0%	7%	5%



#### No patient is the same. Even for the similar symptoms



Manic

Depressed

**Intentional** 

And, no single treatment option fits to all...



# Several mood symptoms are not specific

Bipolar Disorder

Substance Use Disorders **ADHD** 

**DMDD** 

**Depression** 

Irritability Anger

Oppositional Defiant Disorder

Autistic Spectrum Disorders

**Anxiety Disorders** 

PTSD /
History of
Abuse

# **Mood Diagnosis**

Symptom → Episode → Disorder

\*\*Duration \*\* Duration \*\* Duration

Impairment

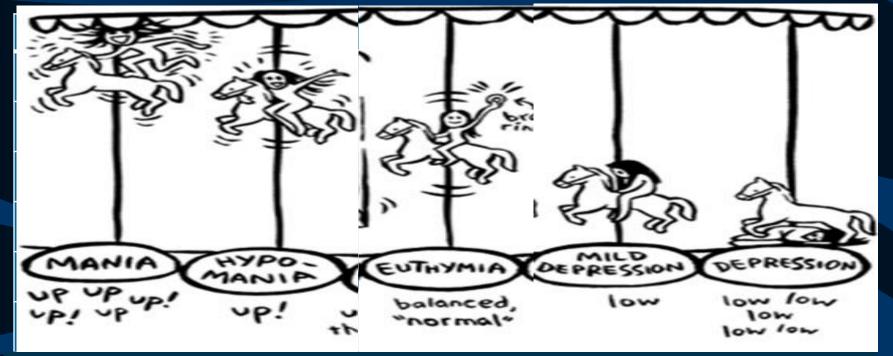
#### Identify episode first & then symptoms

#### ASSESSMENT TIMELINE Time: \_\_\_\_\_ Participant ID: Visit: Super High (Mania) Happy Mood Average Normal Mood Sad "Down" Mood Depressed "Pits" 0-4 6 8 9 12 13 14 15 16 17 Age 10 11 18 Grade

votes.	



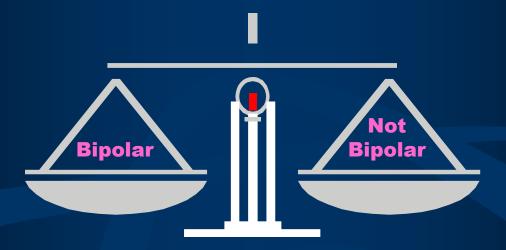
## Let's talk about mood episodes...



#### A hypomanic episode:

- milder symptoms for "<u>four days (DSM)</u> / <u>several days (ICD)</u>" (vs. 1 week in manic episode or inpatient admission in manic episode)
- have <u>a "distinct change"</u> from the baseline functioning (vs. impairment or psychosis in manic episode)
- & patients may like or dislike these changes
- How about shorter episodes that looks like manic?\*

## Pearls to help with diagnosis



- Mania-specific symptoms
- ✓ elation/euphoria
- ✓ grandiosity
- √ decreased need for sleep
- ✓ flight of ideas/racing thoughts
- hypersexuality (not due to sexual abuse/exposure)
- Distinct episodes within chronic problems
- \*\*Symptoms must cluster together & be abnormal for child's level of development and environment



## Bipolar vs ADHD: both can co-exist

#### **Bipolar Disorder**

#### Severe mood swings Rapid cycling

Elation; grandiosity
Racing thoughts
Rapid pressured speech
Risk-taking behavior;
Tantrums
Aggression; rages
Low need for sleep
Hypersexual

Irritability
Hyperactivity
Restlessness
Impulsivity
Oppositional
Increased energy

#### ADHD

#### Inattention Hyperactivity

Distractible
May have anger, rage is rare
Mood changes appropriate
Behavior can be redirected.

Continuous (always present)

Lethargic; sad; depressed Separation anxiety Suicidal thoughts

## **Changes in DSM5**

for manic/hypomanic episode

Increased energy or activity level is a "MUST"

 This is in addition to "elated/irritable mood" during the manic/hypomanic episode



## New DSM 5 mania criteria

#### Elevated/Expansive mood

**Irritability** 

 $\mathsf{or}\}$ 

Increased goal-directed activity\*

or}

#### Motor hyperactivity\*

PLUS ≥3 Sx (4 if irritable) Associated with A Elevated/Irritable Mood & Increased Activity/Energy:

Inflated self-esteem, grandiosity

Decreased need for sleep

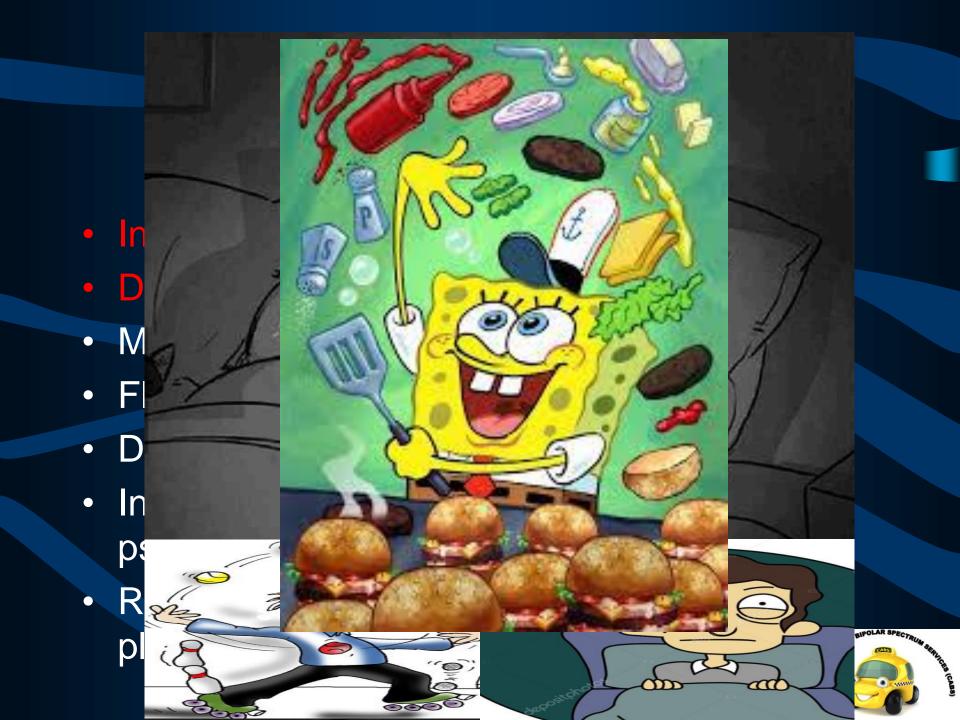
More talkative, pressured to keep talking

Flight of ideas or racing thoughts

Distractibility

Increased goal-directed activity or psychomotor agitation

Risky/dangerous behaviors done for pleasurable reasons



## Other changes in DSM5

for depressive & manic/hypomanic episodes

- No "mixed episode" anymore
- New "mixed features for manic episode" (≥3 depressive symptoms within manic episode)
- New "mixed features for major depressive episode" (≥3 manic symptoms within depressive episode)
- Medication induced mania
- = New "Medication/Substance induced bipolar and related disorder"

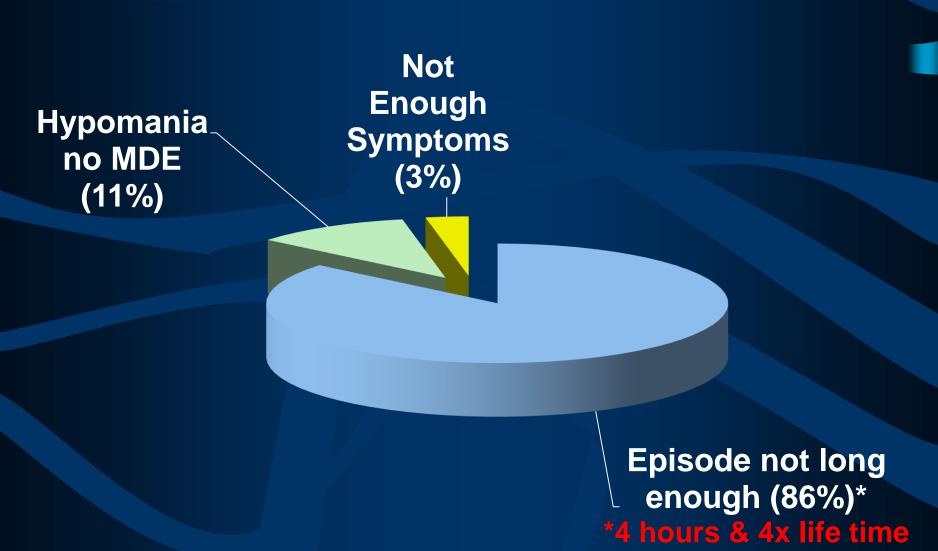


#### NEW DSM 5 diagnosis: \*Unspecified/Other Specified Bipolar and Related Disorder

Formerly "Bipolar Not Otherwise Specified (NOS)"

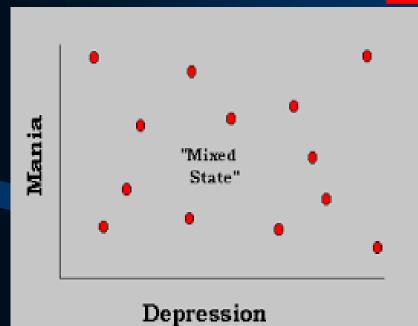


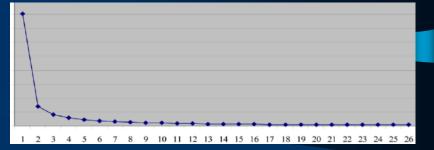
# Course and Outcome of Bipolar Youth (COBY) Study: reasons for other specified bipolar





# No more mixed episodes in DSM 5... Instead: "mixed features.."







Mixed Depression

Mixed Episode

# Disruptive Mood Dysregulation Disorder DMDD

- Starts before age 10, no later than 18 yo
- Developmental age at least 6
- Chronically irritable for at least 1 year,
   without any good mood more than 3 months
- + verbal/physical <u>anger outbursts</u> 3x/ week
- DMDD alone is rare in the clinics, many youth will have comorbid ADHD, opositonal defiant (ODD), and conduct diagnoses
- Exclusion: They cannot have mania (>1 day),
   ODD, or impulse control disorder