

#### **Bipolar Disorder Statistics**

#### Who is Affected by Bipolar Disorder?

Bipolar disorder affects approximately 5.7 million adult Americans, or about 2.6% of the U.S. population age 18 and older every year. (National Institute of Mental Health)

The median age of onset for bipolar disorder is 25 years (National Institue of Mental Health), although the illness can start in early childhood or as late as the 40's and 50's.

An equal number of men and women develop bipolar illness and it is found in all ages, races, ethnic groups and social classes.

More than two-thirds of people with bipolar disorder have at least one close relative with the illness or with unipolar major depression, indicating that the disease has a heritable component. (National Institute of Mental Health)

# Women and Bipolar Disorder

Although bipolar disorder is equally common in women and men, research indicates that approximately three times as many women as men experience rapid cycling. (Journal of Clinical Psychiatry, 58, 1995 [Suppl.15])

Other research findings indicate that women with bipolar disorder may have more depressive episodes and more mixed episodes than do men with the illness. (Journal of Clinical Psychiatry, 58, 1995 [Suppl.15])

## **Economic Factors**

Bipolar disorder is the sixth leading cause of disability in the world. (World Health Organization)

#### Suicide and Bipolar Disorder

Bipolar disorder results in 9.2 years reduction in expected life span, and as many as one in five patients with bipolar disorder completes suicide. (National Institute of Mental Health)

## **Children and Adolescents**

Bipolar disorder is more likely to affect the children of parents who have the disorder. When one parent has bipolar disorder, the risk to each child is 15 to 30%. When both parents have bipolar disorder, the risk increases to 50 to 75%. (National Institute of Mental Health)

Bipolar Disorder may be at least as common among youth as among adults. In a recent NIMH study, one percent of adolescents ages 14 to 18 were found to have met criteria for bipolar disorder or cyclothymia in their lifetime. (National Institute of Mental Health)

Some 20% of adolescents with major depression develop bipolar disorder within five years of the onset of depression. (Birmaher, B., "Childhood and Adolescent Depression: A Review of the Past 10 Years." Part I, 1995) Up to one-third of the 3.4 million children and adolescents with depression in the United States may actually be experiencing the early onset of bipolar disorder. (American Academy of Child and Adolescent Psychiatry, 1997)

When manic, children and adolescents, in contrast to adults, are more likely to be irritable and prone to destructive outbursts than to be elated or euphoric. When depressed, there may be many physical complaints such as headaches, and stomachaches or tiredness; poor performance in school, irritability, social isolation, and extreme sensitivity to rejection or failure. (National Institute of Mental Health).

## **Getting Treatment for Bipolar Disorder**

Success rates of 70 to 85% were once expected with lithium for the acute phase treatment of mania, however, lithium response rates of only 40 to 50% are now commonplace. (Surgeon General Report for Mental Health) Participation in a DBSA patient-to-patient support group improved treatment compliance by almost 86% and reduced in-patient hospitalization. (DBSA, 1999)

Consumers with bipolar disorder face up to ten years of coping with symptoms before getting an accurate diagnosis, with only one in four receiving an accurate diagnosis in less than three years. (DBSA, 2000)

A gender bias exists in the diagnosis of bipolar disorder: women are far more likely to be misdiagnosed with depression and men are far more likely to be misdiagnosed with schizophrenia. (DBSA, 2000)

Nearly 9 out of 10 consumers with bipolar disorder are satisfied with their current medication(s), although side effects remain a problem. (DBSA, 1999)

Consumers who report high levels of satisfaction with their treatment and treatment provider have a much more positive outlook about their illness and their ability to cope with it. (DBSA, 1999)