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12-16-10

Period 1

Annotated Bibliography

## **Bipolar Disorder**

United States. *Bipolar Disorder.* , Web. 5 Dec 2010.

<<http://www.nimh.nih.gov/health/publications/bipolar-disorder/complete-index.shtml>>.

1. This source is a compilation of questions and answers as well as facts. Each section is headed with questions containing pertinent and useful information including the answer. It is, in essence, a guidebook for both those who have Bipolar disorder and those who are onlookers. The first couple questions deal with identifying Bipolar disorder and its symptoms. The symptoms are listed, set on scales, and include both behavioral and mood changes for manic and depressive episodes. The different variations of the disorder and other illnesses that often coincide with it are discussed also.

The next question deals with the genetics of the disease and the brain structure and functioning that accompanies the disorder. The article then goes on to discuss, both in length and depth, how it is diagnosed and the various treatments that are available. The last few and final questions refer to what to do if and when a person would encounter Bipolar disorder in any way, shape, or form. This source is a lengthy, comprehensive, and suitable provider of background information of Bipolar disorder and it's occurrence in our society.

2. I found this source particularly interesting because it supplied lots of scientific

background information that I was formerly unaware of. Having grown up with a bipolar father, grandmother, aunt, cousin, and sister I consider myself an expert on Bipolar disorder; but only on matters of the mind and heart. I enjoyed learning facts and concrete information that are solid about something that affects me so copiously. It made me think about the science behind the disorder. It made me think about the how and what of Bipolar disorder. It gave me a backdrop for the scenery of my life.

3. This article is a booklet that is published and distributed throughout our entire country. It is reliable because it is published by the NIMH, the National Institute of Mental Health, and the U.S. Department of Health and Human Services. Although there is no definite author, the fact that it is composed, published, and distributed by our Nation's government implies that the booklet was the result of multitudinous doctors and research compiled and bound into this booklet. The article was last revised in 2008. It is still very relevant however because new drugs and research are not common in this field. Not to mention that it is monitored and published by our government so the information must be relevant in order for our government to also be relevant.

Insel, Thomas R. "Disruptive insights in psychiatry: transforming a clinical discipline." *American Society for Clinical Investigation* (2009): 700-705. Web. 16 Dec 2010.  
[<http://www.jci.org/articles/view/38832>](http://www.jci.org/articles/view/38832).

1. This is a very exciting article. It briefly discusses the past 30 years of psychiatry and its previous conceptions. But it goes on to reveal a revolution that is taking place right now in the understanding of mental disorders like Schizophrenia and Bipolar disorder. The article unveils a lot of new and exciting research that is currently taking place and slowly but surely transforming the medicine of mental disorders. The

foundation of psychiatry is shifting to find new meaning. In the past psychiatry has depended on theories and principles, but this article demonstrates examples of how psychiatry is changing to focus more on facts, research, and neuroscience. Diagnoses are reformulating to include imaging data and the genetics behind mental disorders like Bipolar disorder and Schizophrenia. Current medications are not helping people with these disorders and the research of new treatments in this area is advancing rapidly. Treatments that focus more on curing rather than improving mental disorders are likely to replace previous treatments. The times, they are a changing. To quote the author, “We are now at the forefront of a revolution in psychiatry, and one would be remiss to let it pass by unnoticed.”

2. This particular article hit a home run in my heart. It instilled in me hope for a better future, hope for social awareness, hope for a cure, and hope for my loved ones. This advancement in psychiatry means the possibility of a happy and carefree life for me and my family. It means that there will be fewer cases like that of my cousin. I lost my cousin last year because of medication mix ups, a toxic, accidental combo. She was severely bipolar.

This newfound information might mean that there could be no more kids subjected to the pain that accompanies mental disorders. It could mean that people like me could live without fear of becoming like their parents. Moreover, that their parent's disorders could be healed and that they might not be subject to such agony. It may not happen in my lifetime, but I pray to God that it will happen some day. Yes, this gave me hope, but more importantly it gave me facts to base my hope on. My hope is not empty. My hope is full to the brim and ready for the future.

3. This article was published in April of 2009 and refers to new advances in the research of mental illnesses and neuroscience. Because the article refers to such new advances it is important that it has a recent publication date since the article relates to new changes in the field of mental illnesses and a revolution of psychiatry. Having a publication date of only one year ago makes it very credible.

This article was published by the American Society for Clinical Investigation which is a scholarly scientific journal devoted to free access to all clinical research. According to the publishers the website and journal is an honor society of physician-scientists. This makes the source credible.

The author is a psychiatrist at the National Institute of Mental Health, NIH, in Bethesda, Maryland, which is a government association that is responsible for the publications that are available to the public regarding mental health. He has been in the psychiatry field for 30 plus years and has witnessed the transformation of ideas, research, and understanding. This makes him an extremely credible and reliable source for the topic because it refers to a revolution and change that is occurring in his field. Clearly this man is knowledgeable in his field and is therefore credible.

Mayo Clinic Staff. "Bipolar Disorder: Tests and Diagnosis." *Mayo Clinic* (2010): n. pag. Web. 16 Dec 2010. <<http://www.mayoclinic.com/health/bipolar-disorder/DS00356/DSECTION=tests-and-diagnosis>>.

1. The Mayo Clinic has provided parameters for Bipolar disorder. It has taken symptoms and signs a step further and informed the reader of what it means to be considered Bipolar. The article begins by listing and defining the four different types of

tests that are used to help diagnose Bipolar disorder. It then goes on to explain that in order to be diagnosed with bipolar disorder, a person must meet the criteria spelled out in the Diagnostic and Statistical Manual of Mental Disorders (DSM). This manual is published by the American Psychiatric Association and is used by mental health providers and insurance companies to provide aid. The Mayo Clinic briefly defined the different types of Bipolar disorders then continued on to discuss and list the criteria for a diagnosis. They examine the criteria for a manic episode, a hypomanic episode, a major depressive episode, and a mixed episode. It ends on a side note of diagnosis in children. This area however is rather gray and undefined due to insufficient research, to date, into the earliest age at which diagnosis is possible and definite.

2. The Mayo Clinic is a much respected clinic and I trust their information and believe that their resources are very useful. But I do have my own reservations. This article was useful in the sense that it informed me of how medical care clinics, providers, and insurance providers view Bipolar disorder. It gave me a sense of how it is received and perceived in the medical world both socially and medically. But I feel that all it did was list aspects of my life. It was a cut and dry approach, and let me be the first to tell you that Bipolar disorder is in no way, shape, or form cut and dry. I am grateful that they have provided a short and sweet reference guide but I disagree with their approach. They treat it like it is fixable and is just like any other diagnosable disease. I guess there is a slight conflict of interest for my party however. It was informative, but stale.

3. This article was published less than a year ago. It was released in January of this year and incorporates criteria that are used today to diagnose Bipolar disorder. Since it covers criteria that are used in determining the validity of Bipolar disorder today among

adults it is very important, being so current, that the article have a recent publication date.

The publication and composition of this article was done by the Mayo Foundation for Medical Education and Research (MFMER). This is a sector of the Mayo Clinic. The Mayo Clinic Staff are the authors of this article. The Mayo Clinic is a renowned center that is known for its brilliant doctors, intensive and in depth guides to all things regarding health, and for its knowledgeable research. Many of the newest and classic treatments, aids, and information regarding illnesses, both mental and physical, of this century have been published in this clinic. This is most definitely a credible source.

Haycock, Dean. *The Everything Health Guide to Adult Bipolar Disorder*. 2nd. Avon, MA: Adams Media, 2010. 1-261. Print.

1. Bipolar is becoming more and more common. The Diagnosis time period is often one of the scariest time periods for patients and families. This book is a guide that helps both patients and relatives. It covers the latest medications, therapies, and lifestyle changes that have benefited patients and transformed past treatments. Some of the main topics that are covered in this comprehensive health guide are the causes of Bipolar disorder, side effects to medications, alternative and nontraditional approaches, mania and manic episodes, similarities to other illnesses. Two of the best topics within Bipolar disorder that are explored in this book are what to do and how to deal if you are the person with Bipolar as well as those who are caregivers. This book provides key scientific information of what occurs after the diagnosis and later in life. It includes recent studies, classifications, and treatments that are being used today to help treat and cope with this disorder.
2. The section of this book that struck a G major chord in the music of my life is the

three chapters for those who are related to a bipolar, care for a bipolar, or know someone who is bipolar. My experience with reading these chapters resembled that of a mellow epiphany. It discusses how to come to terms with what part is a component of their disease and what is simply them. I have grown and matured to the age where I can comprehend this, but reading this book allowed me to evaluate my past and determine what part of past pain was inflicted by my father and what was inflicted by his mental illness. My relationship with my father has never been and never will be perfect, but I understand it better now because of this book.

3. This book was published in 2010 and explores very recent studies, the latest medications, the newest therapies and lifestyle changes that are being used in the here and now. Because this book deals with the latest scientific advancements regarding Bipolar disorder it is imperative that this book have a recent publication date. Having a publication date that is hot off the press this year makes this source reliable. The book was published by Adams Media, a well known non fiction publishing group. They are most famous for their Everything Guides. Their health books are all written by highly educated doctors with experience in the particular field they deal with.

The author of this book is one such highly qualified author. Dean A. Haycock earned a PhD in Biology and Medication at Brown University. His research has been published in the Journal of Neurochemistry, Journal of Biological Chemistry, Brain Research, Journal of Medicinal Chemistry, The Journal of Pharmacology and Experimental Therapeutics, and other academic journals. As a graduate student, he studied neurobiology with a special emphasis in neuropharmacology. He completed postdoctoral studies at Rockefeller University and has earned a fellowship from the

National Institute of Mental Health. He has worked as a writer, a scientist, and as a senior research investigator in the Department of Neuroscience in the pharmaceutical industry. His immense experience in neurobiology and neuropharmacology clearly demonstrates his knowledge and credibility. He is clearly credible enough to write about how the brain works with Bipolar disorder and more importantly the newest research in neuroscience that is the main focus of this book.

Frank, Ellen, Isabella Soreca , Holly A. Swartz, Andrea M. Fagiolini, Alan G. Mallinger,

Michael E. Thase, Victoria J. Grochocinski, Patricia R. Houck, and David J.

Kupfer. "The Role of Interpersonal and Social Rhythm Therapy in Improving

Occupational Functioning in Patients With Bipolar I Disorder." *American*

*Pyschiatric Association* (2008): 1559-1565. Web. 16 Dec 2010.

<<http://ajp.psychiatryonline.org/cgi/content/full/165/12/1559>>.

1. Recent studies demonstrate the poor psychosocial outcomes associated with Bipolar disorder. Occupational functioning is often severely affected by the disorder. This article is the recorded information of a study that took place over the course of two and a half years. Various patients completed four types of treatment while undergoing analysis in their occupational fields to determine which type of treatment would produce the most improvement in occupational functioning. Patients with Bipolar I disorder were selected to complete either acute and maintenance interpersonal and social rhythm therapy, acute and maintenance intensive clinical management, acute interpersonal and social rhythm therapy and maintenance intensive clinical management, or acute intensive clinical management and maintenance interpersonal and social rhythm therapy. Simply treating

the symptoms of Bipolar disorder has not often yielded satisfactory results in psychosocial and occupational functioning. The results of the study showed that participants who took part in the interpersonal and social rhythm therapy showed more rapid improvement in occupational functioning than those who participated in the intensive clinical management. Also, women who initially received interpersonal and social rhythm therapy showed more marked and rapid improvement. Occupational outcomes of people with Bipolar disorder are often low, but in this study they found that patients who began treatment with a combination of medication management and interpersonal and social rhythm therapy made rapid gains in occupational functioning that were particularly large among women. It would seem that a combination of treatments may be the answer to improve occupation troubles within Bipolar disorder.

2. This strikes my fancy because my father is constantly facing occupational difficulties. He is good at getting jobs and he is brilliant, but he cannot seem to keep them. This is generally because of a manic or depressive episode that occurs while he is occupied in that job. I have experienced years where we have been bankrupt and without jobs. My mom is currently supporting us with her piano teaching business while my father starts up his own business. I know what economic and occupational hardship is like and the affects it has on a family, especially in a family that deals with Bipolar disorder. This article intrigued me because I did not know that there was a way to improve occupational functioning and habits. These new treatments and combinations could completely alter the lives of bipolar families, some day. Some day there will be a silver lining on those dark ominous clouds of life.

3. This particular article was published in 2008 and contains methods of treatment

that are still, to this day, some of the most relevant and up to date methods in treating Bipolar disorder. Although it was written close to two years ago it was, and is still, relevant to the treatment of Bipolar disorder today. Having a publication date that is two years old but that contains information that has not significantly changed over the course of the last two years makes this source credible. This article was published by the American Psychiatry Association in the American Journal of Psychiatry, which is a highly academic and scientific journal that is devoted to the sharing of psychiatric research, findings, and innovations. It is connected with numerous accredited doctors who are skilled in their areas of study and contribute to the journal in order to share and educate those around them.

There are numerous authors of this article because it is a study that was conducted, recorded, and published by all of them. Ellen Frank, Isabella Soreca , Holly A. Swartz, Andrea M. Fagiolini, Alan G. Mallinger, Michael E. Thase, Victoria J. Grochocinski, Patricia R. Houck, and David J. Kupfer are all of the scientists that wrote and conducted this study. They all have achieved at least the academic standing of MD, and a few have achieved the academic standing of PhD in their field. All of these reasons make this source a primary source in science and an altogether credible source.