



What this Fact Sheet covers:

- Problems with diagnosing Bipolar Disorder
- Self-test (scoring & results)
- What to do if you suspect Bipolar Disorder
- Where to get more information

Why is Bipolar Disorder so often undiagnosed?

Some of the reasons why Bipolar Disorder can go for a long time undiagnosed include the following:

- Mild cases of Bipolar Disorder can be hard to distinguish from a normal volatile or cyclothymic personality style. Other psychiatric conditions (e.g. Attention Deficit Hyperactivity Disorder, Borderline Personality Disorder, and Conduct Disorder) can show some similar features.
- Bipolar Disorder does not always present in a consistent pattern (that is, highs followed by lows). For example, it may follow on from an unexpected physical condition such as an eating disorder, or an episode of insomnia.
- The 'highs' that are symptomatic of mania or hypomania may also occur in people who do not have Bipolar Disorder. For example, in creative people, when caught up in a burst of creative activity (such as the writer who may describe a feeling of being 'taken over' by a train of thought, writing in a state of excitement and needing only a few hours' sleep), or in people who use either legal or illicit drugs that induce a sense of 'being high'.
- Mild cases of 'bipolar depression' (a form of depression where manic episodes are also experienced) are quite common. Often no-one else other than the individual may notice their differing mood.
- Some practitioners are unaware of Bipolar Disorder or are untrained in its assessment and may not ask the right screening questions.
- Many patients with mild Bipolar Disorder enjoy their 'highs' and prefer not to seek treatment.
- People usually present for help when depressed, and then – in discussing symptoms with the health practitioner – commonly focus on the current depression rather than on the longitudinal pattern of 'mood swings'.

Self-test for Bipolar Disorder

This Self-Assessment Test comprises three initial questions followed by a checklist. Only if you answer 'yes' to the first three questions should you continue on with the checklist. At the end of the test you will be given your results.

Firstly, have you had episodes of clinical depression – involving a period **of at least 2 weeks** where you were significantly depressed and unable to work or only able to work with difficulty – and had at least 4 of the following:

- Loss of interest and pleasure in most things
- Appetite or weight change
- Sleep disturbance
- Physical slowing or agitation



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- Fatigue or low energy
- Feeling hopeless and helpless
- Poor concentration
- Suicidal thoughts?

If yes, proceed.

Secondly, do you have times when your mood ‘cycles’, that is, do you experience ‘ups’ as well as depressive episodes?

If yes, proceed.

Thirdly, during the ‘ups’ do you feel more ‘wired’ and ‘hyper’ than you would experience during times of normal happiness?

If yes, proceed.

Please complete the checklist below, rating the extent to which each item applies to you during such ‘up’ times.

	Much more than usual	A bit more than usual	No more than usual
1. Feel very confident and capable			
2. See things in a new and exciting light			
3. Feel very creative with lots of ideas and plans			
4. Become over-involved in new plans & projects			
5. Become totally confident that everything you’ll do will succeed			
6. Feel that things are very vivid & crystal clear			
7. Spend, or wish to spend, significant amounts of money			
8. Find that your thoughts race			
9. Notice lots of coincidences occurring			
10. Note that your senses are heightened and your emotions intensified			
11. Work harder, being much more motivated			
12. Feel at one with the world and nature			



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	Much more than usual	A bit more than usual	No more than usual
13. Believe that you possess a 'special meaning'			
14. Say quite outrageous things			
15. Feel 'high as a kite', elated, ecstatic and 'the best ever'			
16. Feel irritated			
17. Feel quite carefree, not worried about anything			
18. Have much increased interest in sex (whether thought and/or actions)			
19. Feel very impatient with people			
20. Laugh and find lots more things humorous			
21. Read special significance into things			
22. Talk over people			
23. Have quite mystical experiences			
24. Do fairly outrageous things			
25. Sleep less and not feel tired			
26. Sing			
27. Feel angry			

NB: Please turn over for scoring instructions and results.



Scoring

Items are scored as follows:

- '2' - Much more than usual
- '1' - Somewhat more than usual
- '0' - No more than usual

The total score is the sum of all 27 items.

Results

Please note that while great care is taken with the development of this Self-Assessment tool, it is not intended to be a substitute for professional clinical advice. While the results of the Self-Assessment may be of assistance to you, users should always seek the advice of a qualified health provider with any questions they have regarding their health.

22 or more

A score of 22 or more, together with episodes of clinical depression, suggests possible Bipolar I or II Disorder and would warrant detailed clinical assessment.

less than 22

A score of less than 22 is only returned by about 2% of those with true Bipolar Disorder, so that if your score was less than 22, the likelihood of you having the condition is low - but cannot be excluded.

Note: This self-assessment test may also be done online:

www.blackdoginstitute.org.au/bipolar/howtotell/selftest.cfm

What to do if you suspect Bipolar Disorder

If you scored 15 or more, it is advisable to seek a professional assessment from a mental health practitioner. The first step is to arrange a consultation with your General Practitioner. They will provide a professional diagnosis and, where necessary, refer you to a psychiatrist for further treatment.

Where to get more information

- www.healthinsite.gov.au
- www.infrapsych.com

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