How Your Hormones Can Impact Your Bipolar Disorder

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Hormones and Bipolar Disorder

Numerous studies have shown that various events connected to fluctuating hormones can contribute to the onset or recurrence of bipolar disorder symptoms.

Menopause

One example of this is late onset bipolar disorder, which often manifests alongside the perimenopausal period. If you have a pre-existing diagnosis, the perimenopausal period may be especially risky for a recurrence of symptoms, or a worsening of those that are already active.

In addition to fluctuating hormones, there are other factors that may explain this risk during these years in a woman's life — for example, it is often a time of great change, due to things like grown up children moving out of home, and the loss of parents.

Pregnancy

One of the greatest hormonal events in a woman's life is that of pregnancy and childbirth, and this is also linked to increased bipolar symptoms, or the onset of the disorder.

Women who have recently given birth or who are pregnant are seven times more likely to require hospital treatment for mental health issues, and twice as likely to have a recurrence in previous symptoms. With this risk in mind, it is important to have regular contact with a mental health care provider during and after pregnancy.

Drug therapy during pregnancy and postpartum is a delicate balancing act, and may require some changes to to your medication. Traditionally drugs such as lithium or haloperidol are used during these periods as they are known to pose less harm, and given that they have been around longer, more is known about them.

If your treatment has been stopped, it is often started again with one of these drugs. Newer anti-psychotics have not shown any risks to date, however further study is needed in this area.

Valproic acid and carbamazepine have been shown to cause birth defects, and are likely to be stopped, or folic acid added to help the development of the brain and spinal cord.

Puberty

Hormones also run rampant during puberty in both genders, and are likely to have an impact on bipolar symptoms if the disorder has onset early. For example, sexual frustrations may lead to periods of elevated mood, aggression, or hyperactive behavior, and the general low mood sometimes associated with puberty may be exacerbated and made worse by a pre-existing mood disorder.

Teenagers going through puberty with a diagnosis of bipolar disorder may also experience difficulty at school due to their unpredictable behavior, increased sexual behavior (which may also be risky). They may participate in dangerous behavior like excessive drinking or taking street drugs. It is important to recognize the difference between ‘acting out’ and the start of a potential mood episode.

Next Page: PMS, Bipolar in Men, Stress, and Misdiagnosis

PMS

Women who have started their menstrual cycles are also affected if they have a diagnosis of bipolar disorder. For example, those with a diagnosis of bipolar disorder are more likely to have issues with PMS, which may in turn worsen the symptoms of the initial bipolar disorder.

Some psychiatric drugs are also impacted by menstrual cycles — studies have shown for example that lithium levels can change across some women during their menstrual cycle, leaving them more at risk, whereas other drugs such as risperidone can impact the cycles themselves.

Valproic acid, as well as being a risk during pregnancy, is also linked to polycystic ovary syndrome (PCOS), which can cause excess body hair, obesity, irregular cycles, and fertility problems. It is therefore important to regularly visit your healthcare provider that if you are taking this drug.

In Men

Men with bipolar disorder can also be impacted by hormone changes. Aside from puberty, changes in later life may also be instrumental in a relapse in symptoms. For example, lowered testosterone levels later in life may lead to feelings of inadequacy that may in turn trigger a depressive episode.

Stress Hormone

The stress hormone cortisol has also been linked strongly to symptoms in bipolar patients. The body releases cortisol in order to help us cope with factors such as illness, pain, or stresses in life. Recent research has shown that those with bipolar disorder are more likely to have unbalanced cortisol levels, which in turn leads them to be five times more likely to have a lower quality of life.

Initially cortisol levels will be elevated, however prolonged stress will lead to lowered levels, making stressful events much harder to process and cope with — which may in turn lead to a relapse in symptoms.

Misdiagnosis

Studies have also suggested that some people diagnosed with bipolar disorder may actually be suffering from a hormone imbalance instead. This idea is in the early stages of study, and further research is needed.