



Where Do Bipolar Disorder and Schizophrenia Overlap and Differ?

by ANDREW MARC FELICIANO

Schizophrenia vs Bipolar Disorder

Bipolar disorder and schizophrenia are two different mental illnesses that can have overlapping symptoms at times. So what are the main differences?

What Is Bipolar Disorder?

According to the NIMH, “Bipolar disorder, also known as manic-depressive illness, is a brain disorder that causes unusual shifts in mood, energy, activity levels, and the ability to carry out day-to-day tasks.”

The first bipolar episode often occurs between the late teens to the early 20s. There are four different types of bipolar disorder:

- Bipolar 1 consists of both depressive episodes along with manic episodes.
- Bipolar II occurs when someone has a full-blown depressive episode and hypomanic episodes, but not a manic episode.
- Cyclothymic disorder occurs when there are long term changes between hypomanic and depressive episodes that have lasted at least two years.
- The fourth category of bipolar disorder is dedicated to those who do not match the diagnostic criteria set forth by the three previous categories.

Manic episodes can range from euphoria to paranoia with racing thoughts being extremely common. During manic episodes, psychosis (a loss of touch with reality) and hallucinations can occur. Manic episodes tend to be where bipolar disorder shows the most similarities to schizophrenia.

However, schizophrenia can also result in similar feelings of disinterest in things you formerly found interesting. Depressive episodes can range from a loss of interest in things that you previously enjoyed, to suicidal thoughts/tendencies.

What Is Schizophrenia?

The NIMH, “Schizophrenia is a chronic and severe mental disorder that affects how a person thinks, feels, and behaves. People with schizophrenia may seem like they have lost touch with reality.”

The onset of schizophrenic symptoms usually occurs between the ages of 16 - 30. The symptoms are divided into three categories.

Positive symptoms are the first category of symptoms. They are called positive because they are added behaviors. These symptoms are psychotic behaviors that aren't regularly found in healthy people. These symptoms include hallucinations, delusions, dysfunctional thoughts, or movement disorders.

Negative symptoms are the second type of symptoms. Negative symptoms are changes or disruptions to regular behaviors and emotions. These symptoms remove regular behaviors. These symptoms include reduced emotional facial expressions or a monotone voice, reduced feelings of happiness in your daily life, difficulty beginning and continuing activities, and even less speaking.

Cognitive symptoms are the third type of schizophrenic symptoms. The severity of cognitive symptoms can vary from person to person. For some, these symptoms can be severe, and for others, they may not be. Some of these symptoms include problems with comprehending information and using the information for decision making, trouble with focusing, and trouble with working memory.

Bipolar Disorder and Schizophrenia Similarities and Differences

Bipolar disorder and Schizophrenia have similar characteristics due to having similar symptoms at times. During the manic episodes of bipolar disorder, one may experience psychosis or hallucinations similar to ones someone with schizophrenia may experience. Sometimes the symptoms of a manic bipolar episode may be mistaken for the symptoms of schizophrenia.

Bipolar disorder requires extreme mood shifts. These extreme mood shifts aren't indicative of schizophrenia, but they are a required diagnostic criterion for bipolar disorder. The hallucinations experienced during a manic episode are a symptom of the manic episode itself, not schizophrenia.

In regards to schizophrenia, hallucinations and delusions are a required part of the diagnostic criteria. In other words, someone can have bipolar disorder without hallucinations. However, one cannot have schizophrenia without hallucinations or delusions.

Schizophrenia is also significantly less likely to occur than bipolar disorder. Bipolar disorder affects about 2.2% of the US population. Schizophrenia only occurs in 1.1% of the US population. Both conditions likely run in families.

Diagnostic Criteria of Bipolar Disorder and Schizophrenia

Trained medical professionals use the diagnostic criteria set forth by DSM-V to diagnose both bipolar disorder and schizophrenia. To be diagnosed with bipolar disorder (regardless of category) you must have had at least one depressive episode and at least one hypomanic or manic episode.

For schizophrenia, out of the symptoms we discussed earlier one must exhibit at least two of them for a significant amount of time in a one month period. Out of these two symptoms, at least one of them must be delusions, hallucinations, or disorganized speech. These symptoms must also impact your overall quality of life, relationships, and work. According to the NCBI, the disturbance must persist for at least six months, which must include at least one month of active-phase symptoms (the previous category of symptoms we discussed earlier).

Part of the schizophrenic diagnostic process is also ruling out other medical conditions like bipolar disorder, or addiction.

Treatment for Bipolar Disorder

Treatment for bipolar disorder often includes antipsychotics, mood stabilizers, anticonvulsants, and therapy. The specific medications used often depend on your symptoms and which type of bipolar disorder you're diagnosed with.

Those with bipolar disorder can benefit from a variety of types of therapy. Cognitive-behavioral therapy is one of the most common types of therapy associated with bipolar disorder. Some may also consider group therapy as well as treatment centers if more hands-on attention is required.

Treatment for Schizophrenia

Treatment for schizophrenia often includes daily doses of antipsychotic medications; however, some medications are taken monthly via injection. Therapy is also a very important aspect in treating schizophrenia. Some may benefit from fulltime-treatment centers as well as group therapy. Those with schizophrenia often benefit from cognitive-behavioral therapy as well as psychosocial therapy.

In Conclusion: Schizophrenia vs Bipolar

While the two may have overlapping symptoms, part of the diagnostic criteria for both bipolar disorder and schizophrenia requires ruling out the chance of a patient having another illness. Either way, the best way to diagnose and treat either illness is to receive a treatment plan from a medical professional.