Is There a Link Between Bipolar Disorder and ADHD?

by PATRICIA BRATIANU

Bipolar Disorder and ADHD

A possible link between bipolar disorder and ADHD is being investigated. However, it is difficult to make a clear determination, because many of the symptoms of the disorders are similar. People diagnosed with ADHD or bipolar may demonstrate poor impulse control, distractibility and hyperactivity.

The United States National Institute of Health is conducting and reviewing several research studies. While the studies raise some interesting points, it is difficult to draw a clear conclusion from them. All researchers appear to agree that more studies are needed in order to arrive at a definitive conclusion.

Bipolar disorder is classified as a spectrum disorder because it has a range of intensities and presentations. The current term for bipolar disorder is Bipolar Spectrum Disorder, BPSD. This term reflects the range of conditions that fall under the bipolar umbrella. Diagnoses under the bipolar umbrella include bipolar NOS, cyclothymic disorder, bipolar I, and bipolar II.

ADHD is the abbreviation for Attention Deficit Hyperactivity Disorder, which is much more common than BPSD.

How Often Do Bipolar Disorder and ADHD Occur Together?

While this initially seems like a question that should be easy to answer, it depends on who you ask. One of the problems with determining the frequency of the disorders is that studies have primarily been conducted on children and adolescents who are receiving mental health services. This does not give an accurate picture of how common the conditions occur simultaneously among the general population, especially among adults.

Worldwide, BPSDs are believed to occur in less than two percent of the general population. ADHD rates are estimated to be between five and 10 percent. Statistically, only a fraction of a percentage of the general public should have both disorders.

Among people diagnosed with ADHD or a BPSD the statistical likelihood of having both types of disorders is still less than ten percent. However, several studies indicate that the likelihood of having both disorders may be over sixty percent among people who are being treated for at least one of the conditions. While this may seem overwhelming, keep in mind that the rates in various studies range from 0% overlap to almost 100%. It is simply too early to draw a clear conclusion.

Most of the studies have been conducted over the past fifteen years or so because in the past, people believed that individuals who were diagnosed with ADHD would outgrow it. The possible link was simply not explored until fairly recently.

Next page: are ADHD and bipolar disorder genetic?

How Often Do Bipolar Disorder and ADHD Occur Together?

Many symptoms of ADHD and BPSDs are similar to each other, as well as other disorders such as post traumatic stress disorder (PTSD), anxiety disorders and other depressive illnesses. Since many of the symptoms are common, it is difficult to form a diagnosis. There is not a specific test that can be used to diagnose any of these disorders with the precision of other medical conditions, such as a blood sugar test to determine if a person may be diabetic.

Several of the symptoms and conclusions are open to interpretation. Think about all the parents you encounter who swear that their children are hyperactive; when in reality, they are just ordinary, active children. One researcher noted that parents and teachers reported the same behaviors differently. How questions are worded has also influenced results.

Concerns have also been raised about the validity of the reported symptoms. Most of the studies have been conducted on a short term or one time basis. If symptoms were based upon behaviors observed during an episode which occurred when the individual was stressed, traumatized or under other distressing circumstances, the signs documented may not give a clear picture of what the person is really like. This can only be determined by long term research studies.

Some researchers have raised the question of whether or not people who are diagnosed with ADHD and a BPSD have an unidentified condition that doesn't yet have a diagnosis, diagnostic criteria, or a name. The answers simply are not clear.

Do Researchers Think ADHD and BPSDs Are Genetic?

There is some evidence that genetics may be involved in both conditions. The portions of the involved genes appear to be closely related. Symptoms of BPSDs include the symptoms that are identified as signs of ADHD. However, people who have ADHD do not usually have most of the symptoms of a BPSD.

Some experts have wondered if one of the diagnoses causes or predisposes an individual to the development of the other condition. Again, it is not known. What's clear is that ADHD is generally diagnosed at an earlier age than bipolar disorder. Many more people have ADHD when compared to the numbers of people who suffer from BPSDs, leading some researchers to believe that a BPSD does not cause ADHD.

Most people who have ADHD do not develop signs of PBSDs. It does not appear that ADHD leads to BPSD; however, the question has been raised as to whether the stress of having ADHD may trigger development of a BPSD in some individuals. Some clinicians wonder if an increase in ADHD symptoms may be early signs of a BPSD. Again, more research is needed.

Next page: interpreting the research.

What Does All This Mean?

The research is confusing and complex. I recommend that you stay abreast of studies, but don't dwell on them. It is likely that no conclusive findings will be determined for a number of years. Check with care providers to see what they know about current research studies and take each study with a grain of salt. Large studies, conducted over an extensive periods of time are usually the most reliable.

If a particular study interests you, be sure to check out who is conducting the study. I trust university studies more than projects conducted by companies out to make money, for example. You may also want to find out if any clinical studies are being conducted in your area. Are you or your child with ADHD willing to participate in a study?

Regarding treatment with medication, most experts recommend that the focus of the initial treatment should be to manage BPSD symptoms first and then focus on the ADHD symptoms. This should be done even if the ADHD is

longstanding and the BPSD newly diagnosed. This is because the BPSD is the more serious disorder of the two.

One important fact to consider is the question of whether stimulants, which are often prescribed for people diagnosed with ADHD, may exacerbate symptoms of BPSD. Regarding all of the research, this is my biggest concern.

The Bottom Line

I am the parent of an adult who has pretty severe ADHD. If I was younger and saw the research linking these two conditions, I think that I would have been scared and worried that my son would develop BPSD, especially during his teen years when I, like every other parent of a teenager, wondered if my child was going to be “ok” as an adult.

At this point, I believe that the best approach is a “wait and see what the research shows” attitude. There is simply not enough conclusive information at this point. Gathering information will likely lead to better understanding and treatment for both conditions eventually. I find that living by the “one day at a time” slogan is sufficient for now.