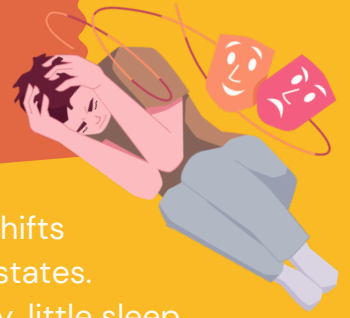




# BIPOLAR DISORDER AND MOOD DISORDERS

## WHAT THESE CONDITIONS ARE



- **Bipolar disorder** involves mood shifts between “up” states and “down” states.
  - **Mania** means very high energy, little sleep, fast thoughts, and risky choices.
  - **Hypomania** has similar symptoms to mania, but is usually shorter, less intense, and less impairing.
  - **Depression** brings low mood, low energy, and loss of interest.
- **Mood disorders** are a larger group that includes bipolar disorder, major depression, persistent depression, cyclothymia, seasonal patterns, and other mood-related diagnoses.

These conditions are common and treatable. Many people do well with the right mix of care, skills, and support.

## HOW IT CAN FEEL DAY TO DAY



Energy and sleep may swing high or low.



Thoughts may race or feel slow and foggy.



Feelings may shift quickly, for example from irritable to tearful.



Work, school, or relationships can feel harder during mood swings.

## EARLY WARNING SIGNS TO WATCH

Noticing patterns early makes treatment work faster. Common early changes include:

### Before mania or hypomania:



Sleeping less but feeling more wired



Taking on many projects at once



Talking faster or jumping from idea to idea



Feeling unusually confident or irritable



Spending more or taking bigger risks

## Before depression:



Feeling "off,"  
down, or  
numb



Low energy  
or moving  
more slowly



Pulling away  
from people  
or activities



Changes  
in sleep or  
appetite



Trouble  
focusing or  
making  
decisions



More guilt,  
hopelessness,  
or thoughts  
of death

## CHANGES THAT CAN SIGNAL A RELAPSE RISK



**Sleep and routine changes** are strong clues. Staying up later, waking much earlier, or irregular schedules often come before a mood episode.



**Subtle mood shifts** matter. Lingering sadness, irritability, or a slight mood lift can be early flags, even if life seems "fine."



**Activity changes** help predict patterns. Pacing, restlessness, or over-busy days may come before mania. Pulling back or moving less may come before depression.

## General early signs:



Big shifts in  
energy or mood



Drop in work,  
school, or social  
functioning



More sensitive  
to noise, light,  
or stress



Feeling  
detached or  
unlike oneself

## THOUGHT PATTERNS TO TRACK

### Before mania

- Racing or "sparkly" ideas, big plans, and quick decisions
- Feeling powerful or unusually sure of oneself
- Paying less attention to risk or warning signs

### Before depression

- More negative self-talk and self-criticism
- All-or-nothing or worst-case thinking
- Trouble recalling positive moments
- Mental fog, slower thinking, or indecision



## EARLY VS LATE WARNING SIGNS



**Early:** mood swings, sleep shifts, mild racing thoughts, mild negativity, growing stress sensitivity.



**Later:** stronger symptoms that disrupt daily life, such as very fast or very slow thinking, loss of insight, severe irritability, or thoughts of self-harm.

## WHAT HELPS RIGHT NOW



### Keep steady routines

- Aim for consistent sleep and wake times.
- Eat regularly and hydrate.
- Limit alcohol and recreational drugs.
- Keep caffeine modest and avoid late in the day.



### Use simple daily supports

- Calm space, noise control, low lights, or headphones
- Short walks or gentle movement
- Structure the day with one small task at a time
- Soothing activities such as music, breathing, or a weighted blanket



### Team up with care providers

- Share early signs and sleep changes with the prescriber or therapist.
- Ask about a written plan for what to do if early signs appear, including whether medication changes may be needed.
- Consider skills-based therapies like CBT, IPSRT, or psychoeducation.



### Use a personal "mood plan"

List green, yellow, and red steps.

- **Green:** feeling steady. Keep routine, light movement, soothing media.
- **Yellow:** feeling edgy or down. Reduce demands, use quiet space, ask for a check-in.
- **Red:** feeling unsafe or out of control. Follow the crisis plan and contact supports.

## WHEN TO CONTACT THE CARE TEAM



Sleep is dropping or rising sharply for several days



Irritability, spending, or risk-taking is increasing



Depression is deepening, especially if thoughts of self-harm appear.



Medication side effects appear or get worse

## WHEN TO SEEK URGENT HELP



Thoughts of harming self or others



Inability to care for basic needs



Severe agitation, paranoia, or unsafe behavior

## CRISIS SUPPORT OPTIONS

### Emergency options

For immediate danger, call 911 or go to the nearest emergency room.

For mental health crisis support in the Philippines, you can contact:

- NCMH Crisis Hotline, available 24/7
  - Call or text 1553
  - Mobile: 0919-057-1553 for Smart/TNT or 0917-899-8727 for Globe/TM
- Hopeline Philippines
  - PLDT: (02) 8804-4673
  - Globe: 0917-558-4673
  - Smart: 0918-873-4673
- In Touch Crisis Line
  - (02) 8893-7603

## SIMPLE TRACKING TOOLS



**Sleep log:**  
bedtime,  
wake time,  
naps



**Mood and energy check:**  
0 to 10 each  
evening



**Triggers:**  
stress, travel,  
illness,  
substance  
use, schedule  
changes



**Helps:**  
What  
calmed or  
steadied  
things today

## A HOPEFUL NOTE

Recovery is not a straight line. With steady routines, early noticing, supportive therapy, and the right medication plan, many people live full, meaningful lives with bipolar disorder or other mood disorders.