Bipolar disorder is a long-term illness that most often require management throughout a person’s life. Medication is the primary form of treatment to help control moods and to decrease the highs and the lows associated with mood swings.

Every person is different and sometimes people need to try different medications before they find one that is right for them. Below are the most common types of medications used to treat bipolar disorder.

Medications used to treat bipolar disorder generally fall into three different categories: mood stabilizers, antidepressants, and medications for other problems associated with bipolar disorder.

Mood stabilizers are usually prescribed to help control mood swings. Several different types of mood stabilizers are available.

Lithium is the most commonly prescribed mood stabilizer for people with bipolar disorder. It has proven helpful in controlling mood swings in both directions from mania to depression and from depression to mania. Lithium will start to reduce symptoms of mania within two weeks of starting therapy, but it may take weeks to months before the condition is completely controlled.

Not all people with bipolar disorder respond well to lithium. Anticonvulsant or antiseizure medications are another group of mood stabilizers used in the treatment of bipolar disorder. These medications were first developed for people with epilepsy but were later found to be effective in treating people with “difficult to treat” bipolar disorder.

Antidepressant medication is sometimes used in combination with mood stabilizing drugs to manage the depression of bipolar disorder. Antidepressants need to be used with caution as they can trigger a manic episode. If prescribed, they may be tapered and discontinued after the mood has been stabilized.

Caution: If used alone, an antidepressant can push a person with bipolar disorder into a manic state.

Antipsychotics are sometimes prescribed as supplements to mood stabilizers. They can help to control hallucinations and delusions in severe mania or psychotic depression. Antipsychotics may also be used early in treatment to control manic symptoms until a medication like lithium begins to take effect.
There are two groups of antipsychotics: the older “typical” group and the newer “atypical” group. The older group is used less often these days because they can cause abnormal involuntary movements (a neurological side effect called Tardive Dyskinesia). Atypical antipsychotics have reduced neurological side effects, although they are not devoid of side effects, and are often quite effective in controlling manic symptoms.

Many people with bipolar disorder take more than one medication to control their symptoms. Along with the mood stabilizer (either lithium or an anticonvulsant), they may take a medication for depression, agitation, anxiety, or insomnia.

Antianxiety medications can help to calm or sedate a person and offer relatively quick relief from disturbing symptoms. They are sometimes used in addition to mood stabilizers. They help treat the symptoms of irritability, over-activity and insomnia.

What else can I do to stay well?
Medications for bipolar disorder are often prescribed along with psychotherapy. In addition, most mental health facilities can also help you to connect with other programs that can help get you to learn more about your illness. Learning how to manage your illness is key to staying well.

When in an acute phase of mania, you may not believe that you are unwell. It important that you build a support network of family or friends who you can trust to tell you if they notice you becoming ill. Many people use advance agreements (a written plan) to help ensure that their preferences and needs are taken care of should they become ill again.

(More information on advance agreements and a sample document can be found in Supporting Families with Parental Mental Illness, www.mcf.bc.ca/mental_health/mh_publications/supporting_families1.pdf)

Recovery
Like chronic disorders such as hypertension or diabetes, bipolar disorder can be effectively managed and controlled by combining treatment and a healthy lifestyle. Staying with your treatment plan, learning how to recognize early warning signs of possible relapse and managing triggers (such as stress) of episodes can greatly aid you in your recovery.

Developed by the Mood Disorders Association of British Columbia. For information on support for people with mood disorders and their families please visit our website www.mdabc.ca. Funding for this fact sheet was made possible by the Provincial Health Services Authority.