

Mixed Symptoms of Major Depression and Bipolar Disorder: A Review of Assessment, Treatment and Current Status in India

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ABSTRACT

Major depressive disorder (MDD) is a common psychiatric disease and a worldwide leading cause of years lived with disability. Depression is more common in women than in men. Bipolar disorder is a common, severe and periodic mental illness characterized by one or more depressive episodes. This period or cycle of depression is also known as Mania or Hypomania and is a serious lifelong struggle. It is a brain disorder marked by extreme mood swings, thinking, and changes in energy level. Individuals with Bipolar can undergo acute changes in emotions that are very different from their normal behavior and mood. Early recognition of bipolar disorder can improve outcomes. For confirmation of the disease, combinations of methods are used like Physical and mental health examination, and calming techniques. For improving patients mental condition therapy involves, screening for suicidal or homicidal ideation and substance abuse, emphasize medication adherence and identifying metabolic disorders of pharmacotherapy. In this review, we discussed care strategies, people who suffered and overcome with the disorder which may be helpful.

Keywords: *Mental Illness, Psychotherapy, Mania, Bipolar Disorder, Depression*

As estimated by WHO, depression shall become the second largest illness in terms of morbidity by another decade in the world, already one out of every five women, and twelve men have depression. Not just adults, but two percent of school children, and five percent of teenagers also suffer from depression, and these mostly go unidentified. Depression has been the commonest reason why people come to a psychiatrist, although the common man's perception is that all psychological problems are depression^[1, 2].

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Types of depression: Depressive illness comes in different forms, just as many other illnesses:

- i. Major depression is manifested by a combination of symptoms that interfere with the ability to work, sleep, eat and enjoy once pleasurable activities. These disabling episodes of depression can occur once, twice or several times in a lifetime.
- ii. Dysthymia, a less severe type of depression, involves long-term, chronic symptoms that do not disable, but keep you from functioning at “full steam” or from feeling good. Sometimes people with dysthymia also experience major depressive episodes.
- iii. Manic-depressive or bipolar is not nearly as prevalent as other forms of depressive illnesses. It involves cycles of depression and elation or mania. Sometimes the mood switches are dramatic and rapid, but most often they are gradual. When in the depressed cycle, one can have any or all other the symptoms of a depressive illness ^[3,4].

Bipolar disorder

Bipolar disorder, which is sometimes referred to as manic depression, is a chronic mental disorder characterized by alternating manic and depressive episodes. According the National Institute of Mental Health, substance abuse is common among those with bipolar disorder; though it is uncertain whether or not controlled substances, such as marijuana, treat symptoms of bipolar disorder or make them worse ^[5]. Bipolar disorder isn't a rare brain disorder. In fact, 2.8 percent of U.S. adults — or about 5 million people — have been diagnosed with it. The average age when people with bipolar disorder begin to show symptoms is 25 years old. Depression caused by bipolar disorder lasts at least two weeks. A high (manic) episode can last for several days or weeks. Some people will experience episodes of mood swings several times a year, while others may experience them only rarely. Here's what having bipolar disorder feels like for some people ^[6]. When you become depressed, you may feel sad or hopeless and lose interest or pleasure in most activities. When your mood shifts to mania or hypomania (less extreme than mania), you may feel euphoric, full of energy or unusually irritable. These mood swings can affect sleep, energy, activity, judgment, behavior and the ability to think clearly ^[7].

More than just a fleeting good or bad mood, the cycles of bipolar disorder last for days, weeks, or months. And unlike ordinary mood swings, the mood changes of bipolar disorder are so intense that they can interfere with your job or school performance, damage your relationships, and disrupt your ability to function in daily life. The causes of bipolar disorder aren't completely understood, but it often appears to be hereditary. The first manic or depressive episode of bipolar disorder usually occurs in the teenage years or early adulthood. The symptoms can be subtle and confusing; many people with bipolar disorder are overlooked or misdiagnosed—resulting in unnecessary suffering. Since bipolar disorder tends to worsen without treatment, it's important to learn what the symptoms look like. Recognizing the problem is the first step to feeling better and getting your life back on track ^[8].

Types of Bipolar disorder

The categories include:

- **Bipolar I disorder:** This involves manic episodes lasting 7 days or more or severe mania that requires hospitalization. The person may also experience a major depressive episode that lasts 2 weeks or more. A person does not have to experience this type of episode to receive a bipolar I diagnosis.

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- **Bipolar II disorder:** This features both mania and depression, but the mania is less severe than in bipolar I, and doctors call it hypomania. A person with bipolar II may experience a major depressive episode preceding or following a manic episode.
- **Cyclothymic disorder:** Also known as cyclothymia, this type includes symptoms of hypomania and depression that last for 2 years or more in adults or 1 year in children. These symptoms do not fit the criteria for wholly manic or depressive episodes.
- **Other types:** People with these disorders experience symptoms that do not fall into the above categories. Bipolar I and II are the most common subtypes, with bipolar I being more severe in terms of manic symptoms.

Symptoms of bipolar disorder include episodes of mania or hypomania and can include depression. People may also have periods during which they feel fairly stable. Symptoms vary and may change over time [9].

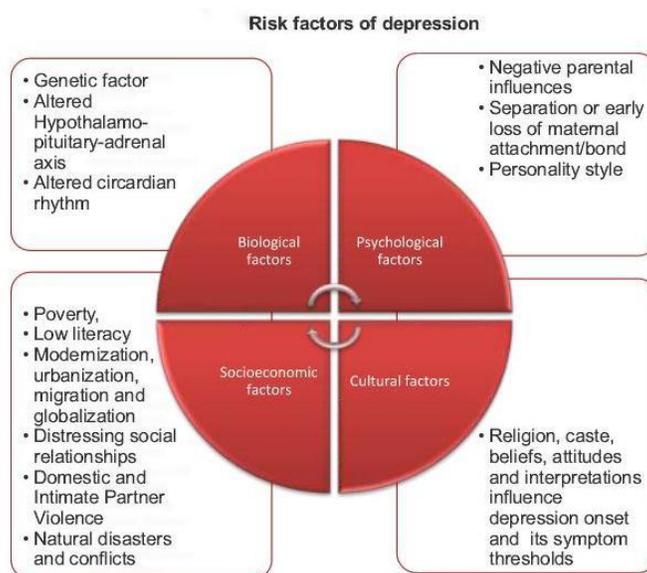


Fig.1 Risk factors of depression [10]

Table .1 Types of Bipolar disorder [11]

Disorder	Definitions
Bipolar I disorder	Manic or mixed episode with or without psychosis and/or major depression
Bipolar II disorder	Hypomanic episode with major depression; no history of manic or mixed episode*
Cyclothymia	Hypomanic and depressive symptoms that do not meet criteria for bipolar II disorder; no major depressive episodes
Bipolar disorder not otherwise	Does not meet criteria for major depression, bipolar I disorder, bipolar II disorder, or cyclothymia (e.g., less than one week of

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Disorder	Definitions
specified	manic symptoms without psychosis or hospitalization)
Other Types	The symptoms may stem from drug or alcohol use or medical conditions, for example.

Fear of missing out (FOMO)

FOMO refers to the “pervasive apprehension those others might be having rewarding experiences from which one is absent”^[11]. FOMO is basically increased and pervasive anxiety or apprehension of missing out on social events or experiences that others are perceived to be having^[8]. FOMO is a stronger predictor of the use of platforms that connect teenagers to their offline networks (e.g., Facebook, Snapchat) than of the use of platforms that connect to a largely unknown audience (e.g., Youtube, Twitter). Third, the study examines if teenagers with greater FOMO report higher levels of problematic social media use (PSMU) and, four, are more likely to report one particular form of problematic social media use, which is the use of social media during conversations with co-present others (cf. “phubbing”)^[13].

PM Narendra Modi is concerned about depression among students in India^[14]

In his radio address “Maan Ki Baat” in March, 2019, Prime Minister Narendra Modi urged the people of India to openly discuss depression and other mental health issues. He also said that students living in hostels are particularly vulnerable to depression due to loneliness. A large majority of them are either reluctant or unable to seek medical help for this. Those suffering from depression are also likely to pick up unhealthy habits such as tobacco and alcohol consumption.

Data from multiple studies point that mental health-related problem is a serious issue. The National Mental Health Survey 2015-16 conducted by National Institute of Mental Health and Neuro-Sciences (NIMHANS), reported mental morbidity of 10.6% among those who are aged 18 and above. The rate was slightly lower, 7.5%, among the youth (18 – 29 years). A recent study published in the Asian Journal of Psychiatry based on a survey of more than 700 randomly selected students found that almost half of them (53%) were suffering from either moderate or severe form of depression.

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Mental illness/anxiety among youth is a pan-Indian problem

Columns show percentage of students (15-34 year old) who reported suffering from these problems in last couple of years

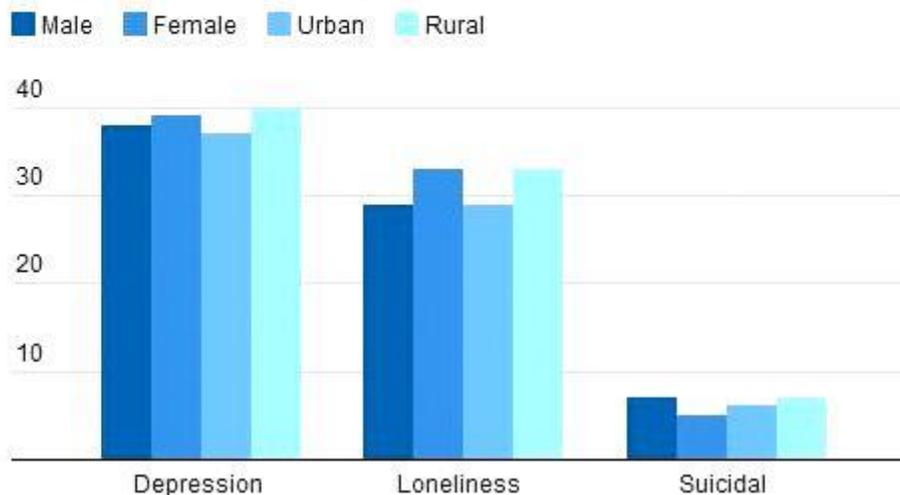


Fig. 2 Graph showing mental illness among youth in India

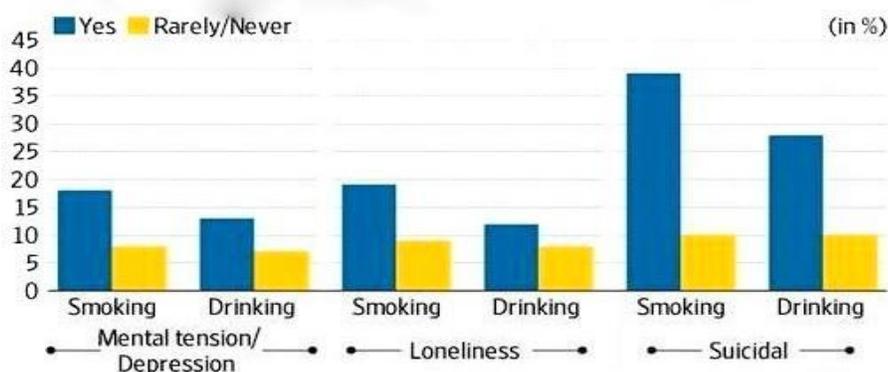


Fig. 3 Graph showing mental anxiety encouraging smoking and drinking in India¹⁴.

SUCCESSFUL PEOPLE WITH MAJOR DEPRESSIVE DISORDER

1. **Deepika Padukone (Actress):** This diva from Bollywood has lately been a huge inspiration for a lot of people suffering from depression. The actress has been candid about her illness and is now encouraging others to do the same through her newly launched campaign, Dobarra Poochho that aims to break the stigma around mental health. Her foundation, The *Live Love*

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Laugh Foundation, is driving a full-fledged awareness campaign to bridge the gap between patients and therapists. "The reason I came out in the open about it was because I just did not want to feel what I was feeling, I did not let depression get the better of me. I think the root cause is stigma. And the day we, as a society, can together get over that stigma and bring awareness about mental health issues, we will win this battle," she had shared at an event on World Mental Health Day ^[15].

2. **Honey Singh** (*Indian music director, songwriter*): Dismissing all rumours about himself, this king of rap finally confessed to having been a victim of bipolar disorder earlier this year. "The truth is I was suffering from bipolar disorder. It went on for 18 months, during which I changed four doctors, the medication wasn't working on me and crazy things were happening. I must confess that I was bipolar and an alcoholic, which aggravated the condition," the musician said in an interview ^[16].
3. **Issac Newton** (*Scientist*): One of the greatest scientists of all time is also the hardest genius to diagnose, but historians agree he had a lot going on. Newton suffered from huge ups and downs in his moods, indicating bipolar disorder, combined with psychotic tendencies. His inability to connect with people could place him on the autism spectrum. He also had a tendency to write letters filled with mad delusions, which some medical historians feel strongly indicates schizophrenia. Whether he suffered from one or a combination of these serious illnesses, they did not stop him from inventing calculus, explaining gravity, and building telescopes, among his other great scientific achievements ^[17].
4. **Sanjay Dutt** (*Actor*): Sanjay Dutt, an actor, and a producer went through a lot of flaws in his life. After his mother's death, he was under stress and had his share of drugs in his younger days. He was left in prison for 18 months and went to depression because of his alleged involvement in the Mumbai serial blasts 1993. Finally, he was out of the pressure and overcame his condition. Now, he was on the screen with a bang ^[18].
5. **Abraham Lincoln** (*Former president of the United States*): Lincoln was contemporaneously described as suffering from "melancholy," a condition which modern mental health professionals would characterize as clinical depression ^[19].

TOP 7 DEPRESSED COUNTRIES IN THE WORLD

When it comes to countries, India is the most depressed country in the world, according to the World Health Organization, followed by China and the USA. India, China and the US are the most affected countries by anxiety, schizophrenia and bipolar disorder, according to WHO.

1. **India:** A study reported in WHO, conducted for the NCMH (National Care of Medical Health), states that at least 6.5 per cent of the Indian population suffers from some form of the serious mental disorder, with no discernible rural-urban differences. Though there are effective measures and treatments, there is an extreme shortage of mental health workers like psychologists, psychiatrists, and doctors. As reported latest in 2014, it was as low as "one in 100,000 people". The average suicide rate in India is 10.9 for every lakh people and the majority of people who commit suicide are below 44 years of age.

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2. **China:** The WHO estimates that 91.8 per cent of all Chinese people with a mental disorder such as depression will never seek help for their condition. China is another large country with a huge number of depression and anxiety patients. The situation is quite similar to India's. The country only spends 2.35 per cent of their budget on mental health.
3. **United States:** About one in five adults in the U.S. experiences some form of mental illness each year, according to the National Alliance on Mental Illness, but only 41 per cent of those affected received mental health care or services in the past year. There is again a shortage of medical professionals. According to most people, they're just expected to get over it without spending a dime on treatment.
4. **Brazil:** Brazil has the greatest number of depressed individuals, in Latin America. Some important social factors especially present in this country such as violence, migration and homelessness probably contribute to a large number of people suffering from different forms of depressive and anxiety disorders.
5. **Indonesia:** In Indonesia, approximately 3.7 per cent of the population, or nine million people, suffer from depression. When those numbers are expanded to include anxiety, they increase to 6 per cent of the population over the age of 15.
6. **Russia:** According to the World Health Organization, 5.5 per cent of its population has depression. As reported in 2012, the country's rate of teenage suicide was three times higher than the world average, which clearly depicts the serious issue of low mental health in Russia.
7. **Pakistan:** You'll be shocked to know that Pakistan has only 750 trained psychiatrists, as reported in 2012. The cases of mental illness usually go unreported due to high social stigma in the country, thus the exact number of patients suffering from depression can't be revealed [20-21].

Suicidal Prevention [22]

Signs and Symptoms: The behaviors listed below may be signs that someone is thinking about suicide:

- Talking about wanting to die or wanting to kill themselves.
- Talking about feeling empty, hopeless, or having no reason to live.
- Making a plan or looking for a way to kill themselves, such as searching for lethal methods online, stockpiling pills, or buying a gun.
- Talking about great guilt or shame.
- Talking about feeling trapped or feeling that there are no solutions.
- Feeling unbearable pain (emotional pain or physical pain).
- Talking about being a burden to others.
- Using alcohol or drugs more often.
- Acting anxious or agitated.
- Withdrawing from family and friends.
- Changing eating and/or sleeping habits.
- Showing rage or talking about seeking revenge.
- Taking great risks that could lead to death, such as driving extremely fast.
- Talking or thinking about death often.

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- Displaying extreme mood swings, suddenly changing from very sad to very calm or happy.
- Giving away important possessions.
- Saying goodbye to friends and family.
- Putting affairs in order, making a will.

Developing Strategies for Care Is Important

The primary health care system in India consists of the primary Health centre. Community health care centre. Some exclusive institutions (maternity homes, care centers etc.) and district hospitals in public sectors ^[23]. Private health care providers of varied types are present in rural and urban areas as well. The identification and management of depression can occur at different levels of health care settings (Primary care centers, general hospitals, specialized institutions) or other settings such as schools and work place ^[24].

CONCLUSION

The results show that early recognition and treatment are crucial, as duration of untreated depression correlates with worse outcomes. If you begin to feel depressed, your first step should be to focus your time and energy on yourself. Taking care of you emotionally, creatively, physically, and spiritually, can help turn negative thoughts and feelings into more positive ones. Exercise regularly & eat healthy foods, do a creative activity as a way to express emotion or as a distraction, be present in the moment, recognize and appreciate your surroundings and the people in your life. The optimal management of depression and bipolar disorder requires both pharmacological and psychosocial treatments to be delivered in a collaborative manner to achieve the best possible outcome.

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Conflict of Interest

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