# Bipolar Disorder Diagnostic Criteria

#### To meet the criteria for bipolar I disorder a person must meet both A and B:

- A. Criteria met for at least one manic episode (criteria A-D under manic episode below)
- B. There is not a better explanation for the manic episode or major depressive episode in another diagnosis. For example:
  - Schizoaffective disorder
  - Schizophrenia
  - Schizophreniform disorder
  - Delusional disorder
  - Other specified or unspecified schizophrenia spectrum
  - Other psychotic disorder

Note: a hypomanic episode may occur before or after a manic or major depressive episode.

### Manic episode criteria

Criteria	Symptoms
A. Lasts at least one week, or any length if hospitalized due to mania	Abnormal and persistent extreme expression of emotion or irritable mood <b>and</b> abnormal and persistent increase in activity or energy
B. During criteria A symptoms, three or more of these symptoms (four if mood is only irritable)	<ul> <li>Inflated self-esteem and grandiosity</li> <li>Decrease in need for sleep</li> <li>More talkative than baseline or fast talking</li> <li>Flight of ideas or subjective experience that thoughts are racing</li> <li>Distractibility (reported or seen)</li> <li>Increase in goal-directed activity (socially, at work, school or sexually) or movements that serve no purpose</li> <li>Excessive engagement in activities with high risk of painful results (e.g., unrestrained buying sprees, sexual indiscretions or foolish business investments)</li> </ul>
C. Mood disturbance severity	<ul> <li>Causes marked impairment in social or occupational functioning or</li> <li>Requires hospitalization to prevent harm or</li> <li>There are psychotic traits</li> </ul>
D. Differential diagnosis	Substance use and medical causes are ruled out

## Bipolar 1 disorder (1)

## Major depressive episode criteria

#### Note: Criteria A-C form a major depressive episode

- Major depressive episodes are common in bipolar 1 disorder. However, the diagnosis of bipolar 1 disorder does not require them.
- Think about patient history and cultural considerations to discern if the presence of criterion A symptoms are:
  - » Attributable to the expression of distress in a grief process, or
  - » Symptoms of a major depressive episode.

Criteria	Symptoms
<ul> <li>A. Symptoms and duration</li> <li>Five or more symptoms during the same two-week period</li> <li>Represents a change from functional baseline</li> <li>At least one of the symptoms is either:</li> <li>» Depressed mood, or</li> <li>» Loss of interest or pleasure</li> </ul>	<ul> <li>Depressed mood most of the day, nearly every day by subjective report or observation</li> <li>Marked decrease in interest or pleasure in all, or almost all activities most of the day, nearly every day (subjective or objective)</li> <li>Significant weight loss without dieting, or weight gain, or decrease or increase in appetite nearly every day</li> <li>Insomnia or hypersomnia nearly every day</li> <li>Movements that serve no purpose observable by others, not just by a self-report</li> <li>Fatigue or loss of energy nearly every day</li> <li>Feelings of worthlessness or excessive or inappropriate guilt nearly every day</li> <li>Decreased ability to think or concentrate or indecisiveness nearly every day</li> <li>Recurrent thoughts of death (not just fear of dying), recurrent suicidal ideation without a specific plan, or a suicide attempt or a specific plan to commit suicide</li> </ul>
B. Distress and impairment	<ul> <li>Symptoms cause significant distress, or</li> <li>Impairment in social, occupational or other important areas</li> </ul>
C. Differential diagnosis	Substance use and medical causes are ruled out

## Bipolar 2 disorder (1)

## Hypomanic episode criteria

#### Note: Criteria A-F constitute a hypomanic episode

- Hypomanic episodes are common in bipolar 1. However, the diagnosis of bipolar 1 disorder does not require them.
- A full hypomanic episode that emerges during antidepressant treatment (e.g., medication, ECT) but persists at a fully syndromal level beyond the physiological effect of that treatment is sufficient evidence for a hypomanic episode.
- Exercise caution. Don't assume 1 or 2 symptoms (irritability, edginess, or agitation after anti-depressant use) are enough for a diagnosis of a hypomanic episode. Also, they are not necessarily indicative of vulnerability to a bipolar diagnosis.

Criteria	Symptoms
A. Distinct period that lasts at least four consecutive days <b>and</b> is present most of the day, nearly every day	Abnormally and persistent extreme expression of emotion or irritable mood <b>and</b> abnormal and persistent increase in activity or energy
B. In context of criteria A, three or more of these symptoms (four if mood is only irritable) have persisted <b>and</b> are markedly different from baseline <b>and</b> have been present to a significant degree	<ul> <li>Inflated self-esteem and grandiosity</li> <li>Decrease in need for sleep</li> <li>More talkative than baseline or fast talking</li> <li>Flight of ideas or subjective experience that thoughts are racing</li> <li>Distractibility (reported or seen)</li> <li>Increase in goal-directed activity (socially, at work, school or sexually) or movements that serve no purpose</li> <li>Excessive engagement in activities with high risk of painful results (unrestrained buying sprees, sexual indiscretions or foolish business investments)</li> </ul>
C. Unambiguous change in functioning not characteristic of the person when not symptomatic	
D. Mood disturbance and change in function are observable by others	
E. Episode does not cause significant impairment and is not severe enough to require hospitalization	<ul> <li>If there are psychotic features, it is a manic (not hypomanic) episode.</li> </ul>
F. Not attributable to a different diagnosis	Substance use and medical causes are ruled out

### **Endnotes**

1. American Psychiatric Association. Diagnostic and statistical manual of mental disorders (5th ed.). Washington, DC. American Psychiatric Publishing, Incorporated; 2013.



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