

# Impact of Bipolar Disorder Mood Swings on Sleep

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## DESCRIPTION

Bipolar disorder, formerly known as manic-depressive illness, is a mental health condition characterized by extreme mood swings that include emotional highs (mania or hypomania) and lows (depression). These mood swings can affect sleep, energy, activity levels, behavior, and the ability to carry out day-to-day tasks. Understanding this complex disorder is important for those affected and their loved ones, as it plays a significant role in managing the condition and improving quality of life.

Bipolar disorder, characterized by extreme mood swings ranging from manic highs to depressive lows, has profound effects on various aspects of life, including sleep. The relationship between bipolar disorder and sleep is intricate and bidirectional, meaning that disturbances in sleep can exacerbate mood swings and *vice-versa*. Understanding how these mood swings affect sleep is crucial for managing the disorder effectively and improving overall quality of life.

## Types of bipolar disorder

Bipolar disorder is broadly classified into several types, each defined by the pattern and intensity of mood swings.

**Bipolar I disorder:** This type is characterized by manic episodes that last at least seven days or by manic symptoms that are so severe that immediate hospital care is necessary. Depressive episodes occur as well, typically lasting at least two weeks. Mixed episodes, featuring both manic and depressive symptoms, are also possible.

**Bipolar II disorder:** Bipolar II involves a pattern of depressive episodes and hypomanic episodes, but not the full-blown manic episodes that are typical of Bipolar I. Hypomania is a milder form of mania and can often go unnoticed or be mistaken for normal functioning.

**Cyclothymic disorder (Cyclothymia):** Cyclothymia is characterized by periods of hypomanic symptoms as well as periods of depressive symptoms lasting for at least two years (one year in children and adolescents), but the symptoms do not meet

the diagnostic requirements for a hypomanic episode and a depressive episode.

**Other types:** Some individuals may experience bipolar disorder symptoms that do not match the three categories listed above. This is referred to as "other specified and unspecified bipolar and related disorders."

## Manic episodes and sleep disruption

During manic episodes, individuals with bipolar disorder often experience a significantly reduced need for sleep. This hyperarousal state is marked by increased energy, racing thoughts, and heightened activity levels. Consequently, a person may sleep as little as three to four hours per night without feeling tired. This reduced sleep can further fuel mania, creating a feedback loop that sustains the elevated mood state. The lack of sufficient restorative sleep during these periods can lead to cognitive impairments, increased irritability, and a greater risk of engaging in risky behaviors due to impaired judgment.

In addition to the reduced need for sleep, the quality of sleep during manic episodes is often poor. Even when individuals do manage to sleep, it tends to be fragmented and less restorative. The constant high energy and restlessness prevent the brain from achieving the deeper stages of sleep necessary for proper rest and recovery. Over time, chronic sleep deprivation can exacerbate the severity of manic episodes and contribute to a rapid cycling pattern, where individuals oscillate more frequently between manic and depressive states.

## Depressive episodes and hypersomnia

On the opposite end of the spectrum, depressive episodes in bipolar disorder are often accompanied by hypersomnia, where individuals sleep excessively yet still feel fatigued. Unlike insomnia, which is characterized by difficulty falling or staying asleep, hypersomnia involves prolonged sleep duration, sometimes exceeding 10 hours per night. Despite the extended sleep, individuals often wake up feeling unrefreshed and may struggle with excessive daytime sleepiness.

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Depressive episodes disrupt the natural sleep architecture, leading to longer periods of light sleep and shorter durations of deep sleep and REM sleep. This disruption can contribute to the feelings of persistent tiredness and low energy that are hallmark symptoms of depression. Moreover, the increased sleep duration can interfere with daily activities and responsibilities, further exacerbating feelings of hopelessness and worthlessness that are common during depressive states.

### Role of circadian rhythms

Circadian rhythm disruptions are a significant factor in the sleep disturbances associated with bipolar disorder. The circadian rhythm, a natural internal process that regulates the sleep-wake cycle, is often disrupted in individuals with bipolar disorder. This dysregulation can lead to irregular sleep patterns, difficulty falling asleep at conventional times, and inconsistent wake times. Such disruptions can trigger mood episodes, creating a vicious cycle where mood swings further disrupt circadian rhythms and vice versa.

Seasonal changes can also impact the sleep patterns of individuals with bipolar disorder. For example, shorter daylight hours in winter can exacerbate depressive symptoms and lead to increased sleep duration, while longer daylight hours in summer can trigger manic episodes and reduce sleep duration.

### Treatment and management

Managing sleep disturbances in bipolar disorder requires a multifaceted approach. Medications, such as mood stabilizers and antipsychotics, play a critical role in stabilizing mood swings

and, by extension, improving sleep patterns. However, these medications can also have side effects that impact sleep, necessitating careful monitoring and adjustment by healthcare providers.

Psychotherapy, particularly Cognitive-Behavioral Therapy for Insomnia (CBT-I), can help individuals develop healthier sleep habits and address maladaptive thoughts and behaviors that interfere with sleep. Establishing a consistent sleep routine, creating a conducive sleep environment, and practicing relaxation techniques can also promote better sleep hygiene.

Furthermore, managing lifestyle factors, such as reducing caffeine and alcohol intake, maintaining regular physical activity, and ensuring exposure to natural light during the day, can support healthier sleep patterns. In some cases, adjunctive treatments like light therapy or melatonin supplementation may be beneficial in regulating circadian rhythms.

### CONCLUSION

The interplay between bipolar disorder mood swings and sleep is complex and multifaceted. Manic episodes often lead to reduced sleep and poor sleep quality, while depressive episodes can result in excessive sleep and persistent fatigue. Disruptions in circadian rhythms further complicate the relationship between mood and sleep. Effective management of bipolar disorder requires addressing these sleep disturbances through a combination of medication, therapy, and lifestyle modifications. By improving sleep, individuals with bipolar disorder can achieve better mood stability and overall quality of life.