

Bipolar Disorder: Open Access

Short Communication

All about Substance Use and Bipolar Disorder

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INTRODUCTION

Addiction is a disease with a brain and behavior component. Substance use disorder can cause and complicate many health conditions. According to the National Institute of Mental Health (NIMH), almost half of people with substance use disorder also have a mental health condition.

SAMHSA (Substance Abuse and Mental Health Services Administration) reports that people with bipolar disorder tend to have a higher risk for substance use disorders. Living with bipolar disorder is challenging in itself. Turning to alcohol or other illegal drugs might seem helpful in coping with painful symptoms in the short term, but it can have severe and disruptive consequences to daily life.

What about the Brain makes these two Co-occur

Our brains are still some of the top technology in existence. They're impressionable and constantly adapt to the environment around us. By taking in constant feedback from the outside, the brain rewires itself to best adapt to our needs.

Substances such as alcohol and cocaine are the kryptonite to the brain's super strength. They hijack the brain's ability to modify connections in the mind and reroute those connections to home in on the pleasurable effects of a drug at the expense of all other functions. For this reason, addiction can't be willed away overnight since it causes long-term physical and structural changes to the brain.

Almost all drugs that are misused – from nicotine to opioids – target an area of the brain called the nucleus accumbens. Drugs release excessive amounts of a chemical called dopamine in this region to create pleasurable effects. Incidentally, dopamine is one of three main messengers (neurotransmitters) that research links to bipolar disorder as well. These neurotransmitters carry messages to nerve cells, help regulate behaviors and mood, and keep brain function smooth.

Serotonin, noradrenaline (aka norepinephrine), and dopamine often don't operate as they should in folks who have bipolar disorder. This, in addition to both substance use disorder and bipolar disorder having shared genes increasing the likeliness of the conditions in some people, are why scientists believe they often coincide.

Types of Co-occurrences

Bipolar disorder and substance use disorder tend to go hand in hand. But not all dual diagnoses are the same.

Drug-induced Bipolar Disorder

Substance use can cause bipolar disorder. Research shows you can develop some symptoms of mania and depression as a side effect when you:

- actively use a drug
- are intoxicated
- go through withdrawal

You may be more likely to experience manic symptoms when you're actively using a stimulating substance or engaging in prescription medication misuse. You may find yourself needing less sleep, becoming easily distracted, or even acting out in ways that can have social, work, relationship, sexual, or legal consequences.

You're more likely to have depressive symptoms during withdrawal from alcohol use. You might experience helplessness, fatigue, or disinterest in activities that you used to enjoy. People with druginduced bipolar disorder have similar mood shifts and symptoms as people with bipolar disorder. The difference between the two is that people with drug-induced bipolar disorder tend to have their symptoms go away after 1 month of stopping drug use.

Bipolar Disorder and Addiction to Drugs or Alcohol

Having a bipolar disorder diagnosis is linked to a higher addiction risk to alcohol or drugs. People with bipolar disorder have a 21.7% to 59% increased chance of being diagnosed with substance use disorder at least once in their life, per SAMHSA. Alcohol misuse appears to be most common among people with bipolar disorder.

Some research found that:

- The risk of addiction to drugs is nearly doubled among people with bipolar disorder.
- About 42% of people with bipolar disorder are addicted to alcohol.
- 20% have a problem using cannabis.

According to SAMHSA, people with bipolar disorder may misuse substances for a number of reasons, including because both disorders change brain areas important in regulating impulsivity and feelings of reward and pleasure.

Another reason is that people with bipolar disorder often selfmedicate to manage their mental health condition.

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Self-medicating Bipolar Disorder

Bipolar disorder can be hard to manage because of its extreme mood shifts. Partaking in alcohol or other drugs might seem like a reasonable idea at first to mellow out your mood and changing energy levels. It could also feel like a temporary relief against unpleasant symptoms like psychomotor agitation.

But it can do damage in the long run - or to your surprise, have the opposite effect.

You can learn here how cannabis use can cause or worsen bipolar disorder mania and bipolar disorder psychosis. If you or your loved one is using substances to help with handling bipolar disorder, know that you're not alone in this mindset. A lot of people find themselves trying to self-medicate to help cope with symptoms.

A 2018 review looked at epidemiological data to evaluate the likelihood of people diagnosed with mood and anxiety disorders to self-medicate with alcohol or drugs to cope with challenging symptoms. Research showed that about 21.9% to 24.1% of people with mood disorders used and misused alcohol. The risk of alcohol abuse increased if a person was:

- assigned male at birth
- divorced
- separated
- widowed
- young
- white

Dual Diagnosis Bipolar Disorder and Substance Use Disorder

Managing your bipolar disorder and substance use disorder might be difficult at times, but it is doable.

According to NIMH, it's better to treat both conditions together than separately. You might want to consider going to the doctor so that they can screen your symptoms since bipolar and substance abuse symptoms can overlap at times. Your doctor could refer you to a mental health professional that can customize your treatment plan to your needs. Treating both bipolar disorder and substance use disorder could help relieve or reverse some detrimental side effects. One review published in 2015 found that people with bipolar disorder who also had an addiction to alcohol experienced issues with their memory and ability to make sound decisions.

Research published in 2017 showed treatment with valproate and naltrexone can help people manage bipolar disorder and alcohol addiction. Citicoline is another adjunct treatment option that research suggests is effective for bipolar disorder and cocaine addiction and can also help with improving cognition. Behavioral therapy may help with treating both diagnoses. Depending on which you choose, NIMH reports you can learn new skills that encourage health-promoting choices such as coping with selfdestructive thoughts and other alternatives in managing intense emotions.

At the end of the day, bipolar disorder and substance use disorder are mental health conditions and can change your brain's way of thinking and coping with tough situations. Your path to restoration starts with medication and working toward more health-promoting behaviors.

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