

TYPES OF MOOD DISORDERS

**COURSE: PSYCHOPATHOLOGY
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TYPES OF MOOD DISORDERS

According to the ICD-10, the mood disorders are classified as follows:

1. Manic episode
2. Depressive episode
3. Bipolar mood (affective) disorder
4. Recurrent depressive disorder
5. Persistent mood disorder (including cyclothymia and dysthymia)
6. Other mood disorders (including mixed affective episode and recurrent brief depressive disorder).

Manic Episode

The life-time risk of manic episode is about 0.8- 1%. This disorder tends to occur in episodes lasting usually 3-4 months, followed by complete clinical recovery.

The future episodes can be manic, depressive or mixed.

A manic episode is typically characterised by the following features (which should last for at least one week and cause disruption in occupational and social activities).

Depressive Episode

The life-time risk of depression in males is 8-12% and in females is 20-26%. However, the life-time risk of major depression (or depressive episode) is about 8%. The typical depressive episode is characterised by the following features (which should last for at least two weeks for a diagnosis to be made)

Depressed Mood

The most important feature is

- The sadness of mood or loss of interest and/or pleasure in almost all activities (*pervasive sadness*),
- Present throughout the day (*persistent sadness*).

Bipolar Mood (or Affective) Disorder

Earlier known as manic depressive psychosis (MDP), is characterised by recurrent episodes of mania and depression in the same patient at different times. These episodes can occur in any sequence. The patients with recurrent episodes of mania (unipolar mania) are also classified here as they are rare and often resemble the bipolar patients in their clinical features.

The current episode in bipolar mood disorder is specified as one of the following (ICD-10):

- i. hypomanic,
- ii. manic without psychotic symptoms,
- iii. manic with psychotic symptoms,
- iv. mild or moderate depression,
- v. severe depression, without psychotic symptoms,
- vi. severe depression, with psychotic symptoms,
- vii. mixed, or
- viii. in remission.



Bipolar mood disorder is further classified in to bipolar I and bipolar II disorders :

Subtypes of Bipolar Disorder

1. Bipolar I

Characterised by episodes of severe mania and severe depression

2. Bipolar II

Characterised by episodes of hypomania (not requiring hospitalisation) and severe depression

Recurrent Depressive Disorder

This disorder is characterised by recurrent (at least two) depressive episodes (unipolar depression).

The current episode in recurrent depressive disorder is specified as one of the following:

- i. mild,
- ii. moderate,
- iii. severe, without psychotic symptoms,
- iv. severe, with psychotic symptoms,
- v. in remission.

Persistent Mood Disorder

These disorders are characterised by persistent mood symptoms which last for more than 2 years (1 year in children and adolescents) but are not severe enough to be labelled as even hypomanic or mild depressive episode.

- ❑ If the symptoms consist of persistent mild depression, the disorder is called as ***dysthymia***;
- ❑ If symptoms consist of persistent instability of mood between mild depression and mild elation, the disorder is called as ***cyclothymia***.

Other Mood Disorders

This category includes the diagnosis of mixed affective episode. This is a frequently missed diagnosis clinically. In this type, the full clinical picture of depression and mania is present either at the same time intermixed, or alternates rapidly with each other (*rapid cycling*), without a normal intervening period of euthymia.

COURSE AND PROGNOSIS

Bipolar mood disorder has an earlier age of onset (third decade) than recurrent depressive (unipolar) disorder. Unipolar depression, on the other hand, is common in two age groups: late third decade and fifth to sixth decades.

An average manic episode lasts for 3-4 months while a depressive episode lasts from 4-6 months. Unipolar depression usually lasts longer than bipolar depression. With rapid institution of treatment, the major symptoms of mania are controlled within 2 weeks and of depression within 6-8 weeks.

Nearly 40% of depressives with episodic course improve in 3 months, 60% in 6 months and 80% improve within a period of one year. 15-20% of patients develop a chronic course of illness, which may last for two or more years. Chronic depression is usually characterised by less intense depression, hypochondriacal symptoms, presence of co-morbid disorders (such as dysthymic disorder, alcohol dependence, personality disorders and medical disorders), presence of on going stressors and unfavourable early environment.

PROGNOSIS

Classically, the prognosis in mood disorders is generally described as better than in schizophrenia.

Some Prognostic Factors in Mood Disorders.

Good Prognostic Factors

1. Acute or abrupt onset
2. Typical clinical features
3. Severe depression
4. Well-adjusted premorbid personality
5. Good response to treatment.

Poor Prognostic Factors

1. Co-morbid medical disorder, personality disorder or alcohol dependence
2. Double depression (acute depressive episode superimposed on chronic depression or dysthymia)
3. Catastrophic stress or chronic ongoing stress
4. Unfavourable early environment
5. Marked hypochondriacal features, or mood-incongruent psychotic features
6. Poor drug compliance.

