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What's the Difference Between Bipolar and ADHD in Children and Teens?

Sometimes, bipolar disorder and ADHD can be indistinguishable in a child, leading to a misdiagnosis. Here's how to tell these two disorders apart.

By John M. Grohol, PsyD

Many times a parent is faced with the possibility that their child is suffering from some type of mental health concern. It may have been suggested to them by a teacher or school counselor, or even another family member or the child's family physician.

One of the most common childhood mental health maladies is attention deficit disorder, also commonly referred to as ADHD or ADD. Attention deficit disorder is characterized by a child meeting six or more of the following eighteen symptoms (at least six in the first category, or at least six in the second category):

Inattention Symptoms

- Often fails to give close attention to details or makes careless mistakes in schoolwork, work, or other activities
- Often has difficulty sustaining attention in tasks or play activities
- Often does not seem to listen when spoken to directly
- Often does not follow through on instructions and fails to finish schoolwork, chores, or duties in the workplace (not due to oppositional behavior or failure to understand instructions)
- Often has difficulty organizing tasks and activities
- Often avoids, dislikes, or is reluctant to engage in tasks that require sustained mental effort (such as schoolwork or homework)
- Often loses things necessary for tasks or activities (e.g., toys, school assignments, pencils, books, or tools)
- Is often easily distracted by extraneous stimuli
- Is often forgetful in daily activities

Hyperactivity and Impulsivity Symptoms

- Often fidgets with hands or feet or squirms in seat
- Often leaves seat in classroom or in other situations in which remaining seated is expected
- Often runs about or climbs excessively in situations in which it is inappropriate (in adolescents or adults, may be limited to subjective feelings of restlessness)
- Often has difficulty playing or engaging in leisure activities quietly
- Is often "on the go" or often acts as if "driven by a motor"
- Often talks excessively
- Often blurts out answers before questions have been completed
- Often has difficulty awaiting turn
- Often interrupts or intrudes on others (e.g., butts into conversations or games)
- These symptoms must be present for at least 6 months in two or more settings, e.g., school and at home; play and at school; etc. If the symptoms have not been present for at least 6 months or the child meets the criteria only in one setting (e.g., school only), then ADHD should not be diagnosed.

Sometimes, however, children are mistakenly diagnosed with ADHD when they likely fit another diagnostic category better. Parents and mental health professionals tend to focus on a child's inattention or inability to focus on tasks, coupled often with hyperactivity, and automatically assume "ADHD." Some professionals believe that some children diagnosed with ADHD would be better diagnosed and treated under bipolar disorder.

What Are the Differences Between ADHD and Bipolar?

While ADHD is characterized by inattention and most often some hyperactivity, bipolar disorder is characterized by mood swings between high energy and activity (known as mania or hypomania) and feelings of sadness or being blue (known as depression). While children with ADHD may sometimes feel sad for no reason, children with bipolar disorder may feel sad for weeks on end for no discernible cause. Both the manic feelings and the depressive feelings in the child cause significant problems for him or her throughout virtually every aspect of their lives — school, play, friends, home, etc. A bipolar child's mood is pervasive and seems impossible to shake, while a child with ADHD's mood may come and go, but generally they are neither particularly depressed nor manic.

A child in the midst of bipolar depression may be inattentive because they've lost all desire to care about what it is they're doing. A child with ADHD is inattentive because they simply don't have the ability to focus on any one thing for a period of time.

A child with ADHD will typically react to events in their lives in an expected and normal fashion. A bipolar child's response to life events will more often than not be prolonged and out of proportion to the event.

A child with ADHD doesn't generally lose touch with reality during a temper tantrum, which tend to be short in duration and do not include the destruction of property. A bipolar child may lose touch with reality during a temper tantrum, destroy property, and the tantrum itself may last for hours.

Another way to differentiate between these two diagnoses is through treatment. When a bipolar depressed child is given an antidepressant, their mood generally improves after a few weeks and their attention and energy returns. If the bipolar child is in a manic episode, a type of antipsychotic medication may be prescribed which will eventually help even out and lower the child's energy levels.

In contrast, a child with ADHD is given a stimulant, a medication that works usually more quickly than an antipsychotic or antidepressant drug. Within a few days, the child is usually able to better focus and lower their energy levels as though a switch had been turned off.

Getting It Right

Your best bet for the most accurate diagnosis is to see a child mental health professional, such as a child psychologist, that specializes in ADHD and bipolar disorder. Such professionals are well-versed in being able to distinguish between these two disorders, and properly diagnose your child with the right one.

Source: http://www.everydayhealth.com/adhd/treatment-and-diagnosis/adhd-and-bipolar-in-children.aspx?xid=nl_EverydayHealthEmotionalHealth_20100330