

Condensed Practice Parameter for the Assessment and Treatment Of Children and Adolescents with Bipolar Disorder

- I. Key Points
 - a. The literature review process was performed using the National Library of Medicine Database
 - b. Definitions for diagnoses are derived from the Diagnostic and Statistical Manual of Mental Disorders- IV (DSM-IV)
 - c. The parameter focuses on Bipolar I Disorder as that is the type that is most often studied in juveniles
- II. Clinical Presentation
 - a. Mania in adolescents is frequently associated with psychotic symptoms, labile mood, and/or mixed manic and depressive features
 - b. Early course of bipolar disorder in adolescents appears to be more chronic than adult onset
- III. Diagnostic Controversy
 - a. Debate whether symptoms in juveniles are best characterized as Bipolar Disorder
 - b. Bipolar Disorder typically presents in youths as chronic difficulties regulating their moods, emotions, and behavior
 - c. Validity of diagnosing Bipolar Disorder in preschool age children has not been established
- IV. Recommendations
 - a. Psychiatric assessments for children and adolescents should include screening questions for Bipolar Disorder
 - b. DSM criteria should be followed when making a diagnosis of mania or hypomania in children and adolescents
 - c. Youths with suspected Bipolar Disorder must also be evaluated for other associated problems, including suicidality, comorbid disorders, psychosocial stressors, and medical problems
 - d. The diagnostic validity of Bipolar Disorder in young children has not been established, thus caution must be taken before applying this diagnosis in preschool aged children
 - e. For mania in well-defined Bipolar I Disorder, pharmacotherapy is the primary treatment
 - f. Most youths with Bipolar I Disorder will require ongoing medication therapy to prevent relapse; some will require lifelong treatment
 - g. Psychopharmacological interventions require baseline and follow-up symptom, side effect, and laboratory monitoring
 - h. For severely impaired adolescents with manic or depressive episodes in Bipolar I Disorder, Electroconvulsive Therapy (ECT) may be used if medications are not helpful or cannot be tolerated

- i. Psychotherapeutic interventions are an important component of a comprehensive treatment plan for early-onset Bipolar Disorder
 - i. Psycho-educational therapy
 - ii. Relapse prevention
 - iii. Individual psychotherapy
 - iv. Social and family functioning
 - v. Academic and occupational functioning
 - vi. Community consultation

References

McClellan, J, et al. (2007). Practice Parameter for the Assessment and Treatment of Children and Adolescents With Bipolar Disorder. *Journal of the American Academy of Child and Adolescent Psychiatry, 46*.