

COMORBIDITIES OF BIPOLAR DISORDER AND THEIR PATHOPHYSIOLOGICAL SIGNIFICANCE

INTRODUCTION:

Co morbidities in bipolar disorder are not very uncommon. Different spectrums of bipolar with concomitant comorbidities present very complicated picture. Such disorders usually have poor outcome.

OBJECTIVES:

To study co morbidities of bipolar disorder and find out their neurophysiological basis.

METHOD:

An electronic search was made at various database website including pub med, blackwell, science direct using keywords bipolar, co morbidities and prodromal symptoms. It was followed by manual and internet study of authentic journals for this topics.

RESULTS:

Different disorders like OCD, panic, anxiety, schizophrenic psychosis, substance abuse, personality disorder and ADHD were found having strong comorbid relation with bipolar disorder.

DISCUSSION:

More co morbidities are associated with atypical forms of bipolar. Pre pubertal onset has greater frequency of co morbidities like anxiety, ADHD or personality disorders. Developmental process of brain gets disturbed during emerging psychotic disorder. Apoptosis is mechanism involved in brain degeneration, implicated in affective and non affective psychosis. Timing of quickening of degenerative process has strong impact on genesis of disease. Brain undergoes most important changes during childhood, adolescence up to mid twenties. In the brain process of myelination occurs from posterior to interior and from bottom to top. It can be assumed if more vulnerable unmyelinated area is exposed to pro apoptosis agents, greater number of co morbidities would appear.

CONCLUSION

Spectrum approach is required to deal bipolar with associated comorbidites . Secondly neuroprotection to ultra risk subjects at prodromal phase of bipolar might reduce complications.