Bipolar Brochure Project – Teacher Key

Lessons in Mental Health

Key Differences at a Glance

The three types differ in how high the "highs" go and how long the moods last. Bipolar I has full mania, Bipolar II has hypomania plus major depression, and Cyclothymia has milder ups and downs that last for years.

	Bipolar I	Bipolar II	Cyclothymia
The high	**Mania** (full, severe)	**Hypomania** (milder high), never full mania	Hypomanic symptoms that are not strong enough to count as an episode
How long the high lasts	At least 7 days, or any length if hospital care is needed	At least 4 days (DSM-5)	Comes and goes
The low	Depression is common (2 weeks or more) but not required	At least one **major depressive episode** is required	Depressive symptoms that are milder than major depression
Effect on daily life	Serious problems at school, work and with others; may need the hospital; may include psychosis	Depression often causes the most trouble; hypomania does not usually cause major problems	Milder, but the mood changes are frequent and ongoing
Time needed for diagnosis	One manic episode	One hypomanic and one major depressive episode	At least 2 years for adults, 1 year for children and teens

Students should know that Bipolar II is **not** a milder form of Bipolar I. The highs are milder, but the depression can be just as serious.

Panel 2: Bipolar I Disorder

Key term to look for: **mania**

- **What it is:** A type of bipolar disorder with at least one manic episode, a period of very high energy, elated or irritable mood, and risky behavior.
- **How long mania lasts:** At least 7 days, or shorter if symptoms are severe enough to need hospital care.
- **Can depression happen?** Yes. Most people also have depressive episodes that last 2 weeks or more, but depression is not required for the diagnosis.
- **Effect on daily life (any one is fine):** Trouble at school or work, little sleep, risky spending or choices, damaged relationships, or a hospital stay.

Panel 3: Bipolar II Disorder

Key term to look for: **hypomania**

- **What it is:** A type of bipolar disorder with at least one hypomanic episode and at least one major depressive episode, but never a full manic episode.
- **Hypomania vs. mania:** Hypomania has the same kinds of symptoms as mania (more energy, less sleep, fast talking) but is milder. It does not cause major problems at school or work, does not need a hospital stay, and does not include psychosis.
- **Type of depression:** Major depression, lasting 2 weeks or more.
- **One major difference from Bipolar I:** Bipolar I has full mania; Bipolar II has only hypomania. (Accept: Bipolar II requires a major depressive episode, Bipolar I does not.)

Panel 4: Cyclothymic Disorder (Cyclothymia)

Key term to look for: **cyclothymia**

- **What it is:** A milder, long-lasting mood disorder with many ups and downs that are not strong enough to count as mania, hypomania or major depression.
- **How long before diagnosis:** At least 2 years for adults; at least 1 year for children and teens.
- **Pattern of moods:** Frequent shifts between mild highs and mild lows, with few long stretches of feeling stable.
- **Difference from Bipolar I and II:** The highs and lows are milder and never reach a full episode, but they last much longer overall.

Panel 5: Rapid Cycling

Key term to look for: **rapid cycling**

- **Definition:** Having 4 or more mood episodes (mania, hypomania or depression) within 1 year. It can happen with Bipolar I or Bipolar II.
- **What a strong visual shows:**
  - Both highs (mania or hypomania) and lows (depression), clearly labeled
  - Time on the visual, ideally one year
  - At least 4 episodes
  - An uneven pattern, not perfectly regular waves

Common mistake: drawing quick mood swings within a single day. Rapid cycling is about episodes that last days or weeks, happening often across a year.

Panel 6: Support Resources

Accept any 2 to 3 credible resources. These are the most likely:

Resource	How to reach it	What it is
988 Suicide & Crisis Lifeline	Call or text 988	Free, 24/7 crisis support
NAMI HelpLine	1-800-950-6264, or text NAMI to 62640	Information and support, weekdays 10 a.m. to 10 p.m. ET (not a crisis line)
DBSA	dbsalliance.org	Peer support groups for depression and bipolar disorder
SAMHSA treatment locator	findtreatment.gov	Finds treatment near you

Bust a myth: strong examples (from the worksheet article)

- Myth: The highs and lows happen in regular cycles. Fact: They are unpredictable.
- Myth: There is only one type. Fact: There are three main types.
- Myth: Kids cannot get it. Fact: Children and teens can have it.
- Myth: People with bipolar disorder always need a hospital. Fact: Many never do.

Message of hope: Should be short, kind and written for any reader. Example: "Bipolar disorder is treatable, and many people live full, healthy lives."

Sources

- NIMH: Bipolar Disorder (publication)
- Mayo Clinic: Bipolar disorder, symptoms and causes
- NAMI HelpLine
- Hypomania duration (4 days) and diagnosis criteria: American Psychiatric Association, DSM-5