Bipolar Disorder DSM Case Study Writing Assignment

Laura Gibbs

School of Social Work, Southern Adventist University

SOCW 632: Psychopathology, Clinical Assessment, & Diagnosis I

Dr. Evie Nogales-Baker

November 5, 2023

Bipolar Disorder Summary

Bipolar Disorder is characterized generally by alternating depressive and manic episodes. Individuals with bipolar disorder are often misdiagnosed with Major Depressive Disorder due to those in a manic/hypomanic episode not feeling a need for or actively resisting treatment. Instead, individuals present with depressive symptoms and seek treatment for the down mood swing. Some key characteristics of manic episodes are an inflated self-esteem or sense of grandiosity, a sense of their thoughts being sped up and talking faster, increased goal-oriented activity, and a tendency to act impulsively without regard for the consequences.

Bipolar Disorder is split into two primary diagnoses: Bipolar I and Bipolar II. While the majority of individuals experience major depressive symptoms, it is not a criterion for the diagnosis of Bipolar I. Bipolar I has a more extended criteria of two weeks for manic symptoms to be present as opposed to the four-day criteria of Bipolar II. Depressive symptoms are a criterion for Bipolar II.

Gil's Diagnosis

Gil meets the criteria for the DSM 5 TR diagnosis of Bipolar I Disorder, current episode manic, moderate with mood-congruent psychotic features (F31.2). Gil is currently experiencing a distinct period of abnormally and persistently elevated and expansive mood, described by feeling "wonderful" all the time, "I'm gifted", and everything is "enormous". Along with abnormally increased energy lasting for 2 months. This is evidenced by Gil experiencing a decreased need for sleep "3 hours of sleep is all I need", and talking abnormally fast and tapping his feet excessively in session. He has increased goal-directed

activity musically and sexually. He taught himself violin in 2 months and traveled around to cities such as New York and St. Louis, and towns in Indiana, "giving concerts" saying "it's like symphonies are swirling in my head", and having sex with strangers in each town visited. Gil says "I can't even control myself", and that money "speaks" to him, as in when he holds things up to his ear he can hear vibrations. He says he hear voices, "I hear everything". And expresses this as being "connected to the earth". 3 months ago Gil was seen by the therapist and was documented as experiencing a Major depressive order as can be referenced in previous notes.

Gil also meets the criteria for Alcohol Use Disorder, Mild, (F10.10) and Alcohol Withdrawal without perceptual disturbances (F10.130). Gil drinks to the point of blacking out every weekend, consuming champagne, margaritas, and beer in succession to the point of intoxication. Gil's alcohol use has caused him to lose friends and jobs, and be arrested. Alcohol use is continued despite persistent and recurrent social and interpersonal problems caused/exacerbated by the effects of alcohol. Gil does not drink at all on the week days, and experiences "the shakes" psychomotor agitation, and hand tremors every Monday following a weekend of drinking. These symptoms are not attributable to another medical condition or mental disorder, as these shakes do not persist throughout the week.