

Differential Diagnosis and Bipolar Disorder

Differentiating Between: Bipolar Hypomania/Mania, Borderline Personality, PTSD, and ADHD

- Each of these conditions may present chiefly with an *irritable* mood
- Substance intoxication and withdrawal can mirror any of these states
- **More than one condition** may be present in the same person

Symptoms/ Behaviors	Mania	Hypomania	Depressive Episode	Borderline Personality Disorder (PD)	Post Traumatic Stress Disorder (PTSD)	Attention- Deficit/ Hyperactivity Disorder ADHD
Duration of symptoms	Days to weeks	Days to weeks	Weeks to months	Minutes to hours at a given time	Indefinite (improves with treatment, may slowly improve over time)	Indefinite (unless treated)
Risk of intentional harm to self	Yes	Yes	Yes	Yes	Yes	No
Delusions and Hallucinations	Yes Hallmark symptom	No	Only if severe	Stressor-induced Paranoia	Flashbacks, Paranoia	No
Racing Thoughts	Yes Hallmark symptom	Yes	No	Common	When Triggered	No
Euphoria/Elevated Mood	Yes Hallmark symptom	Yes	No	No	No	No
Grandiosity	Yes Hallmark symptom	Yes	No	No	No	No
Hyperreligiosity	Common	Common	No	No	No	No
Hypersexuality	Yes	Yes	No	At times	No	No

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Symptoms/ Behaviors	Mania	Hypomania	Depressive Episode	Borderline Personality Disorder (PD)	Post Traumatic Stress Disorder (PTSD)	Attention- Deficit/ Hyperactivity Disorder ADHD
Pressured Speech	Yes Hallmark symptom	Yes	No	During exacerbations	When Triggered	Chatterbox talking can be redirected
Decreased need for sleep	Yes Hallmark symptom	Yes	No	No	No	No
Insomnia (but still needing sleep)	No	No	Sometimes	Sometimes	Yes	Sometimes
Hypersomnia	No	No	Sometimes	No	No	No
Impulsivity	Very Common	Common	No	Yes	When agitated	Yes Hallmark symptom
Hyperactivity	Yes Hallmark symptom	Yes	No	Uncommon	When agitated	Yes Hallmark symptom
Forgetfulness	No	No	If severe	Uncommon	Common	Yes Hallmark symptom
Inattentive	Yes	Yes	If severe	Uncommon	Occasional	Yes Hallmark symptom
Easily Distracted	Yes	Yes	If severe	Uncommon	Occasional	Yes Hallmark symptom
Splitting	No	No	No	Yes Hallmark symptom	No	No
Emotional reactivity	Yes	Yes	No	Yes Hallmark symptom	No	Sometimes
Exacerbations triggered by acute stressor	Yes	Uncommon	Uncommon	Yes	Yes	No
Dissociation	No	No	No	Stress-induced	Stress-induced	No

Bipolar Diagnosis (Mania vs Hypomania)

It is ultimately most important to make a diagnosis of whether or not bipolar disorder is present. Diagnosing between Bipolar I disorder (full mania) vs Bipolar 2 disorder (hypomania) also has important treatment implications, particularly when treating other co-morbid mental health conditions.

The hallmarks of a hypomanic or manic episode are:

- An elevated, expansive mood or an irritable mood (nearly constant throughout the episode)
- An increase in energy or activity level (nearly constant throughout the episode)
- At least 3 of the following associated symptoms:
 - » Inflated self-esteem or grandiosity
 - » Decreased need for sleep (not just decreased sleep but decreased need for sleep)
 - » More talkative than usual
 - » Flight of ideas/subjectively racing thoughts
 - » Distractibility
 - » Increase in goal-directed activity, or psychomotor agitation
 - » Excessive involvement in activities with potential for painful consequences
- A clear change from baseline mood and functioning, which other people can observe

	Mania (Bipolar 1)	Hypomania (Bipolar 2)	NOT Bipolar disorder
Energy/Activity	Increased	Increased	Unchanged
# of associated symptoms	3+ *4+ if mood only irritable	3+ *4+ if mood only irritable	<3
Length of persistent symptoms	7+ days	4+ days	<4 days or continuously for months or years
Psychotic symptoms	Maybe	No	
Change in function	Yes	Yes	
Functionally impairing	Yes	No	



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OHA 7549a (03/2020)