

CONTINUED FROM LAST WEEK: Last week I addressed your question about the characteristics of Attention Deficit Hyperactivity Disorder (ADHD). This week I'll discuss the similarities and differences between ADHD and Early Onset Bipolar Disorder.

ANSWER: Parents should be aware of another condition that can be missed when students exhibit symptoms of behavior similar to the symptoms of ADHD. Early Onset Bipolar Disorder is hard to diagnose for many reasons, one of which is their rapidly shifting moods that can change from manic joy to depression within an hour. The characteristics of Bipolar and ADHD are very similar although in Early Onset Bipolar Disorder the symptoms seem exaggerated.

Like children of ADHD, children with Bipolar Disorder (BP) are inattentive, seeming almost in a trance. Some parents refer to this stony gaze as the "Look". They especially have difficulty concentrating in the morning and daydream throughout the day. Even a loud voice or a gentle touch may not reach them.

They also are very impulsive. Things are often broken in their path. In addition, their behavior can be cruel, hurting a pet or small child. They will argue with adults and even go into "rage" if parents respond with "no". Their tantrums are almost like a seizure, breaking things, biting and kicking. Sad to say, they aren't able to use the knowledge gained from other times and events to make different decisions in the future. Some of these children turn this destructiveness internally as well, some beginning to self mutilate, cutting or deeply scratching themselves. In their drawings and writing, many gruesome images will appear: knives, guns, killing, a carryover from their violent dreams

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Their motor activity can be as high wired as children with ADHD. Because they are tightly wound, they may have difficulty with bowel and urine control as well.

Children with BPD can be very non-compliant. They feel they must dominate and resist authority. Whenever one activity must cease and another must begin are times fraught with misbehavior. Change can equal a melt down. After their tantrums are over, they almost seem to lose memory of their behavior even as their parents' hearts are still pounding.

Their moods are like a ping-pong match, bouncing from one side to another, shifting in minutes from giddy silliness to mouthy resistance. Even as infants, they can be extremely irritable, having difficulty settling down. As toddlers, they have heightened separation anxiety, needing to be carried everywhere. As they become older, they have much fear and talk about death, dying, and suicide frequently. They also fear sleep, often too revved up to relax, often sleeping only four to six hours a night. They often are awakened from their sleep by "night terrors": dreams of monsters, mutilated bodies, and blood. Consequently, children with BPD will be very irritable in the morning, impossible to wake up. If they have a sleepless night, they rapidly move into a manic stage which can lead to irritable rages, called an "affective storm" by the authors of The Bipolar Child.

Socially, children with BPD are often seen as bossy' the bully of the neighborhood. They must have their own way yet suffer anxiety in making and keeping new friends. Though they are often called "magical children" because of their creativity, they have been known to exaggerate and distort reality, adding to their social woes.

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In addition to the traits already mentioned, children with BPD are sensitive to taste, touch, hearing, smells, and sight. They can't stand labels on clothing, certain colors of clothing, scratchy fabrics. They are very aware of changes of temperature, and are especially affected by heat. Even their food must be the right temperature. Some children with BPD will "snake", eating little, and then gorging, particularly on foods loaded with carbohydrates. In addition, they often have either visual or auditory hallucinations, seeing or hearing things others do not.

Using this information and working with your medical team of experts--the pediatricians, the psychiatrist, a counselor or social worker-- your children can get the diagnosis they need to begin to have a satisfying life. You will be flying with the wind—your pinwheel under control.

Questions may be sent to the Samaritan Counseling Center, 1850 Colfax Ave., Benton Harbor, MI 49022, faxed to (269) 926-6780 or emailed to

[pbambrick@samcounseling.org](mailto:pbambrick@samcounseling.org). Diane Kopp, a therapist at the Center, answered today's question.

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