8.7: VIII Glossary

**Bipolar I Disorder**: The most severe bipolar disorder with at least one manic episode; most individuals experience additional hypomanic and depressive episodes.

**Bipolar II Disorder**: A pattern of depressive episodes and hypomanic episodes, but individuals have never experienced a full-blown manic episode typical of Bipolar I Disorder.

**Catatonia**: A state of unresponsiveness due to a person’s mental state.

**Cyclothymia**: A disorder defined by periods of hypomanic symptoms and periods of depressive symptoms lasting for at least two years (1 year in children and adolescents). However, the symptoms do not meet the diagnostic requirements for hypomanic episodes or depressive episodes.[1]

**Family-focused therapy**: Psychotherapy that focuses on psychoeducation, communication enhancement training, and problem-solving skills. It includes attention to family dynamics and relationships as contributing factors to the client’s mood.

**Grandiose delusions**: A symptom associated with bipolar disorders of feeling unusually important, talented, or powerful.

**Hypomanic episode**: Episodes similar to symptoms of a manic episode, but they are less severe and do not cause significant impairment in social or occupational functioning or require hospitalization.[2]

**Interpersonal and social rhythm therapy (IPSRT)**: Psychotherapy that emphasizes the importance of establishing stable daily routines such as sleeping, waking up, working, and eating meals.
**Manic episode:** A persistently elevated or irritable mood with abnormally increased energy lasting at least one week. The mood disturbance is severe and causes marked impairment in social or occupational function. Severe episodes often require hospitalization to prevent harm to self or others.

**Psychotherapy:** A variety of treatment techniques that help an individual identify and change troubling emotions, thoughts, and behaviors.

**Rapid cycling:** At least four mood episodes associated with bipolar disorder occurring in a 12-month period.


2. American Psychiatric Association. (2013). *Desk reference to the diagnostic criteria from DSM-5.* [https://med.libretexts.org/Bookshelves/Nursing/Nursing%3AMental_Health_and_Community_Concepts_(OpenRN)/08%3AMental_Health_and_Community_Concepts_(OpenRN)/08.09.04.04_DSM-5](https://med.libretexts.org/Bookshelves/Nursing/Nursing%3AMental_Health_and_Community_Concepts_(OpenRN)/08%3AMental_Health_and_Community_Concepts_(OpenRN)/08.09.04.04_DSM-5)