

# Mood Disorders

Dr(Mrs) Urvashi Roul  
Dept of Psychology  
PGGCG, Sector-42  
Chandigarh

# Mood Disorders: Defined

- **Mood disorders** were also called affective disorders or manic-depressive disorders or psychoses.
- **Affective disorders**: These involve extremes of emotion or affect- either extreme elation or mania(intense and unrealistic feelings of excitement and euphoria )or deep depression( feelings of extraordinary sadness and dejection).
- **Manic-depressive Disorders or Psychoses**: As the two extreme emotional states i.e. manic and depressive are the important characteristics of these disorders, these are also called manic-depressive disorders or psychoses .

# Mood Disorders: Types

As per DSM III, manic-depressive disorders are of three types:

- I. Manic Type
- II. Depressive Type
- III. Circular or mixed type

# Mood Disorders: Types

As per DSM- IV-TR, manic-depressive disorders may be classified into two broad categories:

- I. Unipolar Disorders: in which the person experiences only depressive episodes
- II. Bipolar Disorders: In which the person experiences both manic and depressive episodes

# Unipolar Mood Disorders: Criteria for Diagnosis

As per DSM- IV-TR, a person suffers from Unipolar depressive disorder if:

1. Presence of single (initial) major Depressive Episode.
2. The Major depressive Episode is not accounted for by any other disorder.
3. There has never been a Manic episode or a Mixed Episode or a Hypomanic Episode.

# Bipolar Mood Disorders: Criteria for Diagnosis

1. Presence (history ) of one or more Manic or Mixed Episodes( necessary condition)
2. Presence(history) of one or more Major depressive episodes(not necessary condition)
3. The mood states stated in 1 & 2 above are not accounted for by any other disorder.
4. The symptoms cause clinically significant distress
5. The current episode may be characterised as Hypomanic, or Manic, or Mixed or Depressive

# Mood Disorders: Criteria for Diagnosis

Mood disorders are differentiated in terms of :

- (1) Severity
- (2) Duration

# Mania and Manic Episodes: symptoms

Mania: is characterised by intense and unrealistic feelings of excitement and euphoria , often interrupted by occasional outbursts on intense irritability or even violence.

In hypomanic episode, the person experiences abnormally elevated, expansive, or irritable mood for at least 4 days.



# Depression and Depressive Episode: Symptoms

Depression usually involves feelings of extraordinary sadness and dejection. The symptoms of a depressive person are as follows:

- (1) Depressed most of the day , nearly everyday
- (2) Markedly diminished interest or pleasure in all, or almost all, activities most of the day nearly everyday
- (3) Significant weight loss or weight gain
- (4) Insomnia or hyperinsomnia nearly everyday
- (5) Psychomotor agitation or retardation everyday

# Depression and Depressive Episode: Symptoms (contd.)

6. Fatigue or loss of energy everyday
7. Feelings of worthlessness or excessive or inappropriate guilt everyday
8. Diminished ability to think or concentrate or indecisiveness nearly everyday
9. Recurrent thought of death or suicide

Depressive Episode- A person is said to be experiencing a depressive episode if at least 5 of the symptoms including one of the first two present for a two week period

# Dysthymic Disorder

- A less destructive than severe depression (milder than major depressive disorder) of moderate intensity (but which can not be said as normal, casual mild depression) is Dysthymic Disorder. The symptoms are:
  - Depressed mood for most of the day, for more days than not, for at least 2 years (1 year for children & adolescents)
  - Presence of two or more of the following:
    - Poor appetite
    - Insomnia or hypersomnia
    - Low energy or fatigue
    - Low self-esteem
    - Poor concentration
    - Feelings of hopelessness
  - During the 2 year period of the disturbance, the person has never been without the symptoms for 2 months at a time.

# Mood Disorder :Etiology

- Biological Causal Factors
  - Genetic Influences
  - Neurochemical factors
  - Abnormalities in Hormonal Regulatory system
  - Neurophysiological and neuroanatomical influences
  - Sleep and biological Rhythms

# Genetic Influences: Empirical studies(unipolar Disorders)

- Family Studies
- Twin Studies
- Adoption Studies

# Neurochemical Factors

- The monoamine Hypothesis:
  - Depression (unipolar) is caused by deficiency or depletion of norepinephrine, dopamine and /or serotonin at important receptor sites in the brain.
  - Mania is caused by excesses of these neurotransmitters.

# Abnormalities of Hormonal Regulatory systems

The Hypothalamic-pituitary-adrenal (HPA) Axis & hormone cortisol:

- In depressed patients(unipolar) blood plasma levels of cortisol is higher to the extent of 20 to 40% and in sever depressed patients , it is higher by 60 to 80%.
- Cortisol levels are also elevated in bipolar depression and also during manic episodes.

# Sleep & other Biological Rhythms

- Sleep & Unipolar Depression
- Circadian Rhythm
- Sun light & Seasons



# Psychosocial Causal Factors leading to Unipolar depression

- Psychosocial Factors:
  - Stressful life events
  - Different kind of vulnerabilities

# Sociocultural Factors affecting Unipolar & Bipolar Disorders

- The prevalence of mood disorders seem to vary considerably among different societies. In some, mania is more frequent, whereas in others, depression is more common.
- In some non-western societies like China & Japan, rates of depression are relatively low. Instead people tend to exhibit so called somatic manifestations such as sleep disturbances, loss of appetite and loss of sexual interest.
- Australian aborigines do not show feeling of guilt and self-recrimination in depressive reactions.
- Kaluli tribes in New Guinea showed hardly any instances of depressive disorder.

# Sociocultural Factors affecting Unipolar & Bipolar Disorders

- Mood disorders were more prevalent in European white Americans than in African –Americans.
- Rates of unipolar depression are inversely related to socio-economic status .
- Bipolar is more common in higher economic classes. This somewhat excessive drive for achievement and accomplishments in life.
- Bipolar disorders is seen more prevalent with poets, writers, composers, and artists.

Thank You!!!