

CRITERIA FOR MAJOR DEPRESSIVE EPISODE:

At least five of the following symptoms must be present most of the day, nearly every day, for at least two weeks. **At least one of the first two bolded symptoms must be present.**

1. **Depressed mood (Note in children and adolescents, can be irritable mood)**
2. **Markedly diminished interest or pleasure in all, or almost all, activities**
3. Significant increase or decrease in appetite or weight
4. Insomnia or hypersomnia
5. Psychomotor agitation or retardation
6. Fatigue or loss of energy
7. Feelings of worthlessness or excessive or inappropriate guilt
8. Diminished ability to think or concentrate, or indecisiveness
9. Recurrent thoughts of death, recurrent suicidal ideation without a specific plan, or a suicide attempt or a specific plan for committing suicide

The symptoms cause clinically significant distress or impairment in social, occupational, or other important areas of functioning.

CRITERIA FOR A MANIC EPISODE:

A distinct period of abnormally and persistently elevated, expansive, or irritable mood lasting more than one week. In addition, during the period of mood disturbance, three or more of the following symptoms have persisted to a significant degree (or four of the following symptoms if the mood is only irritable):

1. Inflated self-esteem or grandiosity
2. Decreased need for sleep
3. More talkative than usual or pressure to keep talking
4. Flight of ideas or subjective experience that thoughts are racing
5. Distractability
6. Increase in goal-directed activity or psychomotor agitation
7. Excessive involvement in pleasurable activities that have a high potential for painful consequences (e.g., engaging in unrestricted buying sprees)

A single manic episode is sufficient for the diagnosis of bipolar illness. Note that manic behavior is distinct from a person's usual personality and may appear gradually over weeks or months.

ESSENTIAL TIPS

- ✓ Students often use alcohol and other substances to self-medicate when they are experiencing a mental illness. The reason that the student is using alcohol and other substances may give you a clue whether he/she is using it to mask unipolar depression or bipolar disorder.
- ✓ Because a student with unipolar depression or bipolar disorder may come to you presenting with depression, you should follow these four steps in order to better determine which condition the student is experiencing.
 - Ask the student about history of symptoms of mania and hypomania.
 - Ask the student about his family history – Is there a history of bipolar disorder? Hospitalizations for mental health problems? Indicators for undiagnosed bipolar disorder?
 - Involve family members, friends, roommates, or significant others in the evaluation process, if possible. Be sure to get the student's permission. Persistence may be necessary.
 - Administer a screening instrument for bipolar disorder, such as the Mood Disorder Questionnaire.

RISK FACTORS FOR SUICIDAL BEHAVIOR

Among *all* people who die by suicide, more than two thirds suffered from a depressive disorder or bipolar disorder.

Persistent Risk Factors

- Family history (violence, suicide, mental disorder requiring hospitalization)
- Multiple/chronic personal losses
- Early trauma/abuse (i.e., physical, psychological, and environmental)
- Prior suicidal behavior

Predisposing Risk Factors

- Poor self-esteem/self-concept
- Psychiatric illness
- Chemical dependency
- Physical illness
- Exposure to suicidal behavior
- Impulsivity/aggressivity
- Skill deficits (e.g., social, cognitive)

Precipitating Risk Factors

- Availability of means
- Acute psychiatric symptoms (e.g., psychosis, depression, panic)
- Loss of hope/sense of failure
- Loss of social support (friends, family)
- Loss of identity/meaning (job, career); loss of attachments
- Threat of/actual loss of job/financial loss/academic failure
- Acutely-felt disappointments
- Embarrassments, humiliations, threat to status
- Threat of legal action/incarceration
- Anniversary reaction to a significant loss

Risk Factors – Acute (last 12 months)

- Severe psychic anxiety
- Anxious ruminations
- Global insomnia
- Psychosis with delusions of poverty or doom
- Recent alcohol/drug abuse
- Expression of suicidal thinking (words, writings, etc.)

