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Homoeopathic Management of Bipolar Disorder: A Holistic Approach to Mood Stabilization

By

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Abstract

Bipolar disorder causes changes in mood, energy, and activity levels. A person will have at least one episode of “high” mood, known as mania or hypomania, and usually a period of “low” mood, or depression.

It can severely impact a person’s daily life, but the effect varies between individuals. Bipolar disorder is a condition of extremes. The disorder is characterized by cyclic disturbances of mood, energy pattern, and behavior, and is associated with high morbidity and mortality. A person with bipolar disorder may be unaware they're in the manic phase. Some people with bipolar disorder have more frequent and severe episodes than others. Along with the mood swings, bipolar disorder causes changes in behavior, energy levels, and activity levels. Some people with bipolar disorder may have milder symptoms. For example, the person may have hypomania instead of mania. Bipolar disorders substantially reduce psychosocial functioning and are associated with a loss of approximately 10-20 potential years of life.

Keywords: Bipolar disorder,Bipolar depression,mania, Mood Stabilization, Homoeopathy, Mania,Stress

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Introduction

Bipolar disorder, also known as manic depression, is a mental illness characterized by phases of depression and abnormally elevated mood that each last from days to weeks. If the elevated mood is serious or associated with psychosis, it is called mania; if it is less serious, it is called hypomania. However, people with bipolar disorder aren't always in a hypomanic/manic or depressive state. They also experience periods of normal mood, known as euthymia. Environmental factors such as stress, sleep disruption, and drugs and alcohol may trigger mood episodes in vulnerable people. There is usually also a reduced need for sleep during manic phases. During periods of depression, the individual may experience crying and have a negative outlook on life and poor eye contact with others. Episodes of mood swings may occur rarely or multiple times a year. These mood swings can affect sleep, energy,

activity, judgment, behavior and the ability to think clearly. Bipolar disorder can disrupt a person's relationships with loved ones and cause difficulty in working or going to school.

People with bipolar disorder generally have periods of neutral mood as well. The condition is manageable with medications, talk therapy, lifestyle changes and other treatments. When treated, people with bipolar disorder can lead full and productive lives.[1]

Epidemiology

Bipolar disorder occurs in approximately 1% of the global population. In the United States, about 3% are estimated to be affected at some point in their life; rates appear to be similar in females and males. Bipolar disorder commonly runs in families: 80 to 90 percent of individuals with bipolar disorder have a relative with bipolar disorder or depression.



Epidemiological studies have suggested a lifetime prevalence of around 1% for bipolar type I in the general population. A recent meta-analysis of 25 studies found a pooled lifetime prevalence of 1.06% and 1.57% for bipolar type I and II, respectively, although the majority of the included studies were from North or South America. Nevertheless, a similar prevalence has been found in the UK, Germany and Italy, and a lifetime prevalence between 0.1–1.83% was found in a systematic review of studies from African countries. A large cross-sectional survey of 11 countries found the overall lifetime prevalence of bipolar spectrum disorders was 2.4%, with a prevalence of 0.6% for bipolar type I and 0.4% for bipolar type II. The measurement method suggests that this was an underestimate, but the study did not distinguish bipolar subtypes.[6]

Types of Bipolar Disorder

There are several types of bipolar disorder, it includes:

Bipolar I disorder.

Bipolar I disorder is diagnosed with a manic episode. During a manic episode, people with bipolar I disorder experience an extreme increase in liveliness, energy and may feel on top of the world or uncomfortably irritable in mood. It involves at least one period of mania in their lifetime. That episode may be extreme and dangerous. This is the more severe form of bipolar.

Bipolar II disorder.

Bipolar II disorder look similar to bipolar I, but this type always has depressive episodes with occasional hypomania. Bipolar II isn't a milder form of bipolar, it's a separate diagnosis. But some people with bipolar II go on to develop bipolar I. Diagnosis for BP-II requires that the individual must never have experienced a full manic episode. Otherwise, one manic episode meets the criteria for bipolar I disorder (BP-I).

Cyclothymic disorder.

It is also known as cyclothymia, it is a rare and milder form of type of bipolar disorder involving frequent mood swings of hypomanic and mild depressive episodes. Its highs and lows are usually less severe than those of bipolar I and bipolar II. It is managed with talk therapy and medication, but many people with cyclothymia don't think they need any treatment. Cyclothymic disorder can develop into bipolar I or bipolar 2.

Bipolar disorder with mixed features.

Mixed episodes in bipolar disorder occur when a patient experiences both depression and mania, or depression and hypomania (a milder form of mania) at the same time. For example, person might have high energy and sleeplessness, yet still feel hopeless or have suicidal thoughts. This is used to be known as having bipolar disorder with "mixed episodes."

Bipolar with seasonal features.

In this there is alternating episodes of depression in the fall and winter months and mania during the spring and summer months. People with bipolar I will have mania in the spring or summer, while people with bipolar II disorder will have hypomania during those months.

Seasonal bipolar disorder is not the same as seasonal affective disorder (SAD) – though some treatments can work for both. But SAD can be a subtype of bipolar I and II disorders, as well as major depressive disorder. Some research indicates more people with bipolar II disorder are prone to SAD.

Bipolar with rapid cycling.

Rapid cycling is a pattern of frequent, distinct episodes in bipolar disorder. In rapid cycling, a person with the disorder experiences four or more episodes of mania or depression in one year. Women are more likely to have rapid cycling. The cause is unknown.

Mood changes can occur over the course of a few hours or days. If mood changes four times in a month, that's called "ultra-rapid cycling." There's no regular pattern to this cycling, though. It can happen at any time throughout the illness. About half of people with bipolar disorder may have it at some time. For most people, it's temporary. It can occur at any point in the course of bipolar disorder, and can come and go over many years depending on how well the illness is treated; it is not necessarily a "permanent" or indefinite pattern of episodes.

Unspecified bipolar.

Unspecified or other specified bipolar disorder is a type of bipolar disorder where a person's symptoms do not fully meet the diagnostic criteria of the other types. A person with unspecified bipolar disorder will typically experience symptoms of mania and even depression.[2]

Signs and symptoms of bipolar disorder

According to the DSM-5 criteria, hypomania is present if elevated mood symptoms remain for at least four consecutive days, while mania is present if such symptoms remain for more than a week. Unlike mania, hypomania is not always associated with impaired functioning.

There are four types of mood episodes in bipolar disorder: mania, hypomania, depression, and mixed episodes. Each of them have has a unique set of symptoms.

Mania symptoms

In the manic phase of bipolar disorder, it's common to experience feelings of heightened energy, creativity, and euphoria. The core symptom of mania involves an increase in energy of psychomotor activity. It is also known as a manic episode. The onset of a manic or depressive episode is often foreshadowed by sleep disturbance. Manic individuals often have a history of substance use disorder developed over years as a form of "self-medication".

Common signs and symptoms of mania include:

- Racing thoughts; jumping quickly from one idea to the next.
- Feeling unusually "high" and optimistic OR extremely irritable.
- Acting recklessly without thinking about the consequences.
- Sleeping very little, but feeling extremely energetic.
- Impaired judgment and impulsiveness.

- Talking so rapidly that others can't keep up.

Hypomania symptoms

Hypomania is a less severe form of mania. In a hypomanic state, person likely feel, energetic, productive and euphoric but will still be able to carry on with their day-to-day life without losing touch with reality. Overall functioning may actually increase during episodes of hypomania and is thought to serve as a defense mechanism against depression. However, hypomania can result in bad decisions that can affect your relationships and career. If not accompanied by depressive episodes, hypomanic episodes are often not deemed problematic unless the mood changes are uncontrollable or volatile.

Bipolar depression symptoms

Most people with bipolar depression are not helped by antidepressants. In fact, there is a risk that some antidepressants can make bipolar disorder worse—triggering mania or hypomania, causing rapid cycling between mood states, or interfering with other mood stabilizing drugs.

There are some symptoms that are more common in bipolar disorder. For example, bipolar depression is more likely to cause irritability, guilt, unpredictable mood swings, and feelings of restlessness. With bipolar depression, the person may move and speak slowly, sleep a lot, and gain weight. In addition, he is more likely to develop psychotic depression—a condition in which the person lose contact with reality—and to experience major problems in work and social functioning. The earlier the age of onset, the more likely the first few episodes are to be depressive. For most people with bipolar types 1 and 2, the depressive episodes are much longer than the manic or hypomanic episodes.

Some of the common symptoms of bipolar depression include:

- Feeling hopeless, sad, or empty
- Concentration and memory problems
- Physical and mental sluggishness
- Sleep problems
- Inability to experience pleasure
- Irritability
- Feelings of worthlessness or guilt
- Appetite or weight changes
- Thoughts of death or suicide
- Fatigue or loss of energy [3]

Symptoms of a mixed episode

A mixed episode of bipolar disorder features symptoms of both mania or hypomania and depression. Common signs of a mixed episode include anxiety, depression combined with agitation, distractibility, irritability and insomnia. Anxiety disorders occur more frequently as a comorbidity in mixed bipolar episodes than in non-mixed bipolar depression or mania. Substance (including alcohol) use also follows this trend, thereby appearing to depict bipolar symptoms as no more than a consequence of substance use. [3]

Causes - Bipolar disorder

The exact cause of bipolar disorder is unknown. There are a number of factors that work together to make a person more likely to develop it.

These are thought to be a complexity of physical, environmental and social factors.

Genetics

Bipolar disorder is linked to genetics, as it seems to run in families. Behavioral genetic studies have suggested that many chromosomal regions and candidate genes are linked to bipolar disorder susceptibility with each gene exerting a mild to moderate effect.[1]

The family members of a person with bipolar disorder have an increased risk of developing it themselves. But not a single gene is responsible for bipolar disorder. Instead, a number of genetic and environmental factors are thought to act as triggers.

Triggers

There are number of stressful circumstance that triggers the symptoms of bipolar disorder.

Examples of stressful triggers include:

- Physical, sexual or emotional abuse
- Death of a family member causing grief
- Disappointment from relationship

These types of life-altering events can cause episodes of depression at any time in a person's life.

Bipolar disorder may also be triggered by:

- sleep disturbances
- Physical illness
- overwhelming problems in everyday life, such as financial problems, work or relationships issues.

Stress

Factors that can cause stress include:

- Financial problems
- Breakdown in a relationship
- Experiencing trauma
- Being abused, bullied or harassed
- Feeling under pressure while working, studying or looking for work

Chemical imbalance in the brain

There is some evidence that bipolar disorder may be associated with chemical imbalances in the brain.

There's some evidence that if there's an imbalance in the levels of 1 or more neurotransmitters, a person may develop some symptoms of bipolar disorder.

For example, there's evidence that episodes of mania may occur when levels of noradrenaline are too high, and episodes of depression may be the result of noradrenaline levels becoming too low.[4]

Environmental

Environmental factors such as recent life events and interpersonal relationships likely contribute to the onset and recurrence of bipolar mood episodes.

Acutely, mania can be induced by sleep deprivation in around 30% of people with bipolar disorder.[1]

Medication, drugs and alcohol

- Medication.

Some medications can cause hypomania or mania as a side effect. This can happen when the patient is taking it regularly, or as a withdrawal symptom when he/she stop taking them. This includes medications for physical conditions and psychiatric medications – including some antidepressants. Depression can also be a side effect of a lot of different medications.

- Alcohol or euphoric drugs.

These drugs causes symptoms similar to mania, hypomania or depression. It can often be difficult to distinguish the effects of alcohol and drugs from mental health symptoms.[5]

Childhood trauma

Experiencing a lot of emotional distress as a child can cause bipolar disorder to develop. This could be because childhood trauma can have a big effect on the ability to manage emotions.

This can include experiences like:

- Sexual, physical or emotional abuse
- Sibling rivalry
- Neglect
- Losing someone, such as a family member or friend

Diagnosis

A bipolar disorder diagnosis is made only by taking careful note of symptoms, including their severity, time, and frequency. "Mood swings" are normal in day to day life it does not indicate a diagnosis of bipolar disorder. The patient's symptoms are fully assessed using specific criteria from the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders or DSM-5.

In making the diagnosis of bipolar disorder, there is a need of personal and family history of mental illness and bipolar disorder or other mood disorders. Because bipolar disorder sometimes has a genetic component, family history and it can be helpful in making a diagnosis. [7]

Diagnosis of Bipolar disorder, includes:

- A physical examination
- A thorough medical history, which will include asking about the symptoms, lifetime history, and family history.
- Laboratory tests, such as blood tests, to rule out other diseases that could be hyperthyroidism or diabetes, etc.
- A mental health evaluation. [7]

Differential diagnosis

Bipolar disorder must be differentiated with:

- Attention deficit hyperactivity disorder

- Conduct disorders
- Developmental disorders
- Certain anxiety disorders such as post-traumatic stress disorder
- Impulse control disorders
- Substance use disorders[7]

Treatment

An effective treatment includes:

- Psychotherapy (talk therapy).
- Medications.
- Self-management strategies, educating the early symptoms of an episode.
- Helpful lifestyle habits, like exercise, yoga and meditation. These all can support, but not replace treatment. Episodes of mania and depression typically come back over time. Long-term, continuous treatment can help manage these symptoms.[8]

Homeopathic medicines for Bipolar disorder

AURUM METALLICUM

Aurum Metallicum is an excellent homeopathic medicine for bipolar disorder in which the major symptoms are extreme hopelessness with thoughts of suicide. Their self-esteem is low and they are severely critical of themselves. They long for death with constant thoughts of suicide. *Talks of committing suicide*. Great fear of death. Peevish and vehement at least contradiction. Anthropophobia. Mental derangements. Constant rapid questioning without waiting for reply.

BELLADONNA

Belladonna is an excellent remedy for bipolar disorder with mania. Violent behavior of the patient, violent occurs in fits that come and go suddenly. Biting, striking, tearing mania. Patient lives in a world of his own, engrossed by specters and visions and oblivious to surrounding realities. He bites and strikes the person near him. Spits on faces of other persons. Delirium; frightful images; *furious*; rages, bites, strikes; *desire to escape*. Loss of consciousness. Disinclined to talk. Perversity, with tears Face becomes red, hot or bluish red. Quarrelsome.

CANNABIS INDICA

Cannabis Indica is a wonderful homeopathic medicine for bipolar disorder where, the energy level is very high. Sudden loss of memory and exaltation of spirits is characteristic to cannabis indica. Forgetful, cannot finish a sentence. Full of fun and mischief and laughs, uncontrollable laughter. Mania, must constantly move. Very forgetful; cannot finish sentence. Is lost in delicious thought. Cannot realize her identity, chronic vertigo as of floating off.

HYOSCYAMUS NIGER

Hyoscyamus Niger is an effective remedy for bipolar disorder, where the patient behaviors violently. Mania, erotic, expose genitals, sings amorous songs. Laughs, sings, talks, babbles, quarrels. Talkative, obscene, lascivious mania, uncovers body,

jealous. Does foolish things and behaves like mad. Inclined to laugh at everything.

Great hilarity; Delirium, with attempt to run away. Low, muttering speech; *constant carphologia, deep stupor*.

IGNATIA AMARA

Ignatia Amara is a homeopathic medicine used for depressive phase of bipolar disorder. A history of grief, disappointments, loss of loved ones or broken relationships are said to be at the root of such cases. Rapidly altering moods – from sadness to happiness, weeping to laughing. Changeable mood; introspective; silently brooding. Melancholic, sad, tearful. Not communicative. Sighing and sobbing. After shocks, grief, disappointment. It is especially adapted to the nervous temperament-women of sensitive, easily excited nature, dark, mild disposition, quick to perceive, rapid in execution. Rapid change of mental and physical condition, opposite to each other.

LACHESIS MUTUS

Lachesis is one of the wonderful remedy for Bipolar disease. There is Great *loquacity*. Amative. Sad in the morning; no desire to mix with the world. Restless and uneasy; Derangement of the *time sense*. Acts especially well at beginning and close of menstruation. Patient *sleeps into an aggravation*. Sudden starting when falling asleep. Sleepiness, yet cannot sleep.

LILLIUM TIGRINUM

Lillium tig is indicated for bipolar disorder with profound depression of spirits. Constant inclination to weep. Consolation will aggravate the complaints. The person fears that he is suffering from some organic and incurable disease. Disposed to curse, strike, think obscene things. *Aimless, hurried manner*; must keep busy.

MEDORRHINUM

Medorrhinum is the most useful, natural and safe homeopathic medicine for bipolar disorder with extreme mood changes. Hurriedness, anxiety, restlessness, impatience and abruptness are some other guiding symptoms for its prescription. Other accompanying symptoms are rudeness, excitement and high sex drive. These are generally followed by a depressive phase, where symptoms such as sadness, gloominess, tearfulness and hopelessness

NATRIUM MURIATICUM

Natrum mur. is another remedy for bipolar disorder with depression.

Psychic causes of disease; ill effects of grief, fright, anger, etc. Depressed, particularly in chronic diseases. *Consolation aggravates*. Irritable; gets into a passion about trifles. Awkward, hasty. Wants to be alone to cry. Tears with laughter. A craving for salt and tiredness from sun exposure are other indications for this remedy. Depression due to hunger. Anxiety, brooding about past grievances, migraines, back pain, and insomnia can also be experienced when the person is depressed.

STAPHYSAGRIA

In case of bipolar disorder where persons suffer from sudden bursts of anger, homeopathic medicine Staphysagria is the best prescription. Such persons will have a tendency to suppress anger, but will be given into sudden fits of rage during which they are likely to throw or break things. Poor self-confidence, self-pity, reproaching oneself, getting offended easily and feelings of worthlessness are seen. Impetuous, *violent outbursts of passion*, hypochondriacal, sad. *Very sensitive* as to what others say about her. Dwells on sexual matters; prefers solitude.

VERATRUM ALBUM

It is the best remedy for Bipolar disorder.

Melancholy, with stupor and mania. Sits in a stupid manner; notices nothing; *Sullen indifference*. Frenzy of excitement; shrieks, curses. Puerperal mania. Aimless wandering from home. *Delusions of impending misfortunes*. Mania, with desire to cut and tear things.[9]

Conclusion

This article is an attempt to assimilate Bipolar Disorder inclusive of introduction, types, causes, risk factors, signs and symptoms, diagnosis, treatment, along with homeopathic therapeutic which found to be useful and treat Bipolar disorders cases fortuitously.

References

1. Wikipedia contributors. Bipolar disorder [Internet]. Wikipedia, The Free Encyclopedia. Available from: https://en.m.wikipedia.org/wiki/Bipolar_disorder
2. Types of bipolar disorder [Internet]. WebMD. [cited 2023 Sep 15]. Available from: <https://www.webmd.com/bipolar-disorder/bipolar-disorder-forms>
3. Melinda Smith MA, Segal J, Robinson L. Bipolar disorder symptoms, causes, types, and diagnosis - Helpguide.org. [cited 2023 Sep 15]; Available from: <https://www.helpguide.org/articles/bipolar-disorder/bipolar-disorder-signs-and-symptoms.htm>
4. Causes - bipolar disorder [Internet]. nhs.uk. [cited 2023 Sep 15]. Available from: <https://www.nhs.uk/mental-health/conditions/bipolar-disorder/causes/>
5. Org.uk. [cited 2023 Sep 15]. Available from: <https://www.mind.org.uk/information-support/types-of-mental-health-problems/bipolar-disorder/causes-of-bipolar/>
6. Rowland TA, Marwaha S. Epidemiology and risk factors for bipolar disorder. Ther Adv Psychopharmacol [Internet]. 2018 [cited 2023 Sep 15];8(9):251–69. Available from: <http://dx.doi.org/10.1177/2045125318769235>
7. How is bipolar disorder diagnosed? [Internet]. WebMD. [cited 2023 Sep 15]. Available from: <https://www.webmd.com/bipolar-disorder/bipolar-disorder-diagnosis>

8. Bipolar disorder [Internet]. Cleveland Clinic. [cited 2023 Sep 15]. Available from: <https://my.clevelandclinic.org/health/diseases/9294-bipolar-disorder>
9. Boericke W, Boericke OE. Homoeopathic materia medica with repertory comprising the characteristic and guiding symptoms of the remedies. 2nd ed. Savage RB, editor. Sittingbourne, England: Homoeopathic Book Service; 1990

