

JOKE, PHILOSOPHY

# HYPOMANIA

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The [Lancet](#) has a comprehensive review of bipolar disorders- finally I learned about the distinction between type I (includes mania) and type II (hypomania). BTW the author thinks that there is no sound evidence for the DSM-IV priority for mood changes; [Kraepelin](#) had no priority for mood, thinking or activity altering changes after all).

It seems that some [scientists](#), at least those successfully organizing large units, have symptoms that are described by this paper

included creative thinking (more goal-directed, structured planing, more brilliant ideas), crowded thoughts (non-stop thinking), racing thoughts (speedy thinking), and flight of ideas (quick, disconnected thinking).

Hypomania does not seem to be simply a mild version of mania as I thought before. It is an own entity as found in longterm studies. Mania has always 4 or more symptoms, lasts longer than 1 week and is often accompanied by psychotic symptoms that are never found in hypomania. Increased energy, talking, thinking, high self-esteem and psychomotor activity and decreased sleep may be found in both.

overactivity is the core is the core feature of hypomania [...] more than usual working hours [...] can increase functioning if the concurrent mental overactivity is connected (as often happens)