

## Commentary on: Trichotillomania, Bipolar Disorder and White Matter Hyperintensities in a Six-Year Old Girl

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The diagnosis of bipolar disorder (BD) in young children remains highly debated and controversial (Carlson, 2011). This is in part related to the difficulty of interpreting criterion symptoms such as grandiosity and euphoria out of developmental context and by applying an over-simplified symptom rating diagnostic approach without taking into account the risk context of the individual child. It is not unusual for example for studies to report substantial parent endorsement of manic symptoms, not at all supported by teacher ratings and with a reasonable developmentally appropriate explanation from the child. Based on longitudinal epidemiological and familial risk studies, manic symptoms are often common transient occurrences not predictive of BD (Tijssen et al., 2010) and mania is not seen in genetically vulnerable offspring until at least mid-adolescence, respectively (Duffy, Alda, Hajek, Sherry & Grof, 2010). Furthermore, while there is accumulating evidence that in genetically at-risk individuals, childhood anxiety disorders predict subsequent mood disorders and BD, these disorders have not included trichotillomania or for that matter obsessive compulsive disorders—which in some individuals predict for psychotic spectrum illness. Finally, white matter hyperintensities (WMH) have been associated with established BD, however these findings are confounded by burden of illness effects and a recent review concluded that

WMH do not appear to be a marker of predisposition to BD, but rather reflect comorbidity, especially medical conditions (Gunde et al., 2011). In summary, the diagnosis of BD in this six-year old girl is highly unlikely if one takes into account what is known about the early natural history of BD and the facts of this case.

### Acknowledgements / Conflicts of Interest

The authors have no financial relationships to disclose.

### References

- Carlson, G. A. (2011). Will the child with mania please stand up? *British Journal of Psychiatry*, 198(3), 171-172.
- Duffy, A., Alda, M., Hajek, T., Sherry, S. B., & Grof, P. (2010). Early stages in the development of bipolar disorder. *Journal of Affective Disorders*, 121(1-2), 127-135.
- Gunde, E., Novak, T., Kopecek, M., Schmidt, M., Propper, L., Stopkova, P.,...Hajek, T. (2011). White matter hyperintensities in affected and unaffected late teenage and early adulthood offspring of bipolar parents: A two-center high-risk study. *Journal of Psychiatric Research*, 45(1), 76-82.
- Tijssen, M. J., Van, O. J., Wittchen, H. U., Lieb, R., Beesdo, K., Mengelers, R.,...Wichers, M. (2010). Evidence that bipolar disorder is the poor outcome fraction of a common developmental phenotype: An 8-year cohort study in young people. *Psychological Medicine*, 40(2), 289-299.

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