



Photograph taken by Professor Nick Craddock

## Welcome to the 2019/20 edition of the Mood Disorders Research Newsletter.

This year we have a special birthday – it is 10 years since we set up BDRN so we would like to start this newsletter by thanking every single one of the 7143 of you who have contributed to the success of BDRN. We are also indebted to the even longer-standing supporters of our research.

Without your generosity and kindness BDRN would not be possible and we would not have been able to make any of the advances in understanding mood disorders that we have made over the past decade. In particular we would like to thank those of you who contribute True Colours data each week and those who return every questionnaire that we send out. We promise that all of the data you provide

is valued and we are working hard every day to put the data to good use and learn more about the complex causes and triggers of mood disorders.

We share some of our latest findings in this newsletter. We hope you enjoy reading it.

**Thank you so much from  
all of us at BDRN.**

## The Mood Disorders Research Groups

### Cardiff University

*Professor Ian Jones, Professor Nick Craddock, Dr Liz Forty, Dr Arianna DiFlorio, Dr Marisa Casanova Dias, Christine Fraser, Dr Katie Swaden Lewis, Mark Coles, Holly Pearce, John Tredget & Rebecca Lynch*

### University of Worcester

*Professor Lisa Jones, Dr Katherine Gordon-Smith, Dr Francesca Serra, Amy Perry, Jo Johnson, Emma Radclyffe, Kim Caldwell, Gemma McCullough, Karan Atkin & Thomas Morton*



# Some of our latest research findings

Since our last newsletter our research has led to a number of publications in key international scientific journals. The findings have contributed to our knowledge of the genetic and environmental causes and triggers of mood disorders and will be important in determining the direction of future research in the field.

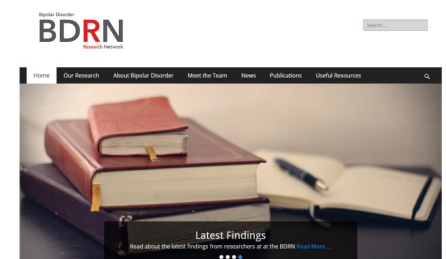
These include the findings of a large international collaborative genetic study we contributed to through our membership of the Bipolar Disorder Psychiatric Genomics Consortium that was published in the journal *Cell*. The study found that certain genetic risk factors are related to specific features of bipolar disorder such as age of onset. These findings are likely to have clinically relevant implications for the future treatment and management of bipolar disorder (Genomic Dissection of

Bipolar Disorder and Schizophrenia, Including 28 Subphenotypes. *Cell*, 173, 1705–1715).

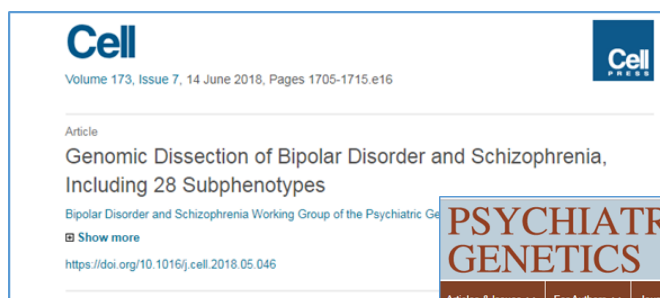
Our research group is also a member of the Major Depressive Disorder Psychiatric Genomics Consortium and this year we contributed to another large international genetic study which found genetic associations between major depression and alcohol dependence. Many participants will remember answering questions about past alcohol use when they spoke to a member of our research team. We have always known the importance of understanding more about the relationship between alcohol use and mood episodes both in terms of implications for illness course and treatment, and also in helping us learn more about the complex causes of mood

disorders (Shared genetic etiology between alcohol dependence and major depressive disorder. *Psychiatric Genetics*, 28(4), 66–70).

We will also be telling you more about some of our other research findings later in this newsletter.



We continue to keep a list of all our publications updated on the BDRN website, so please take a look on the website for more details.



# BDRN team present at the 20th Annual Conference of the International Society for Bipolar Disorders (ISBD)

In early March 2018 Professor Lisa Jones and Dr Katherine Gordon-Smith presented at the 20th Annual Conference of the International Society for Bipolar Disorders in Mexico City. The conference provided the opportunity for both clinicians and researchers from across the world to present and discuss the latest leading research findings and treatment approaches in the field of bipolar disorder.

Lisa's presentation highlighted that some women who have bipolar disorder may be particularly sensitive to reproductive cycle events triggering mood episodes (menstruation, childbirth and

menopause). Katherine presented our findings that there are differences in the clinical presentation of postpartum and non-postpartum manic episodes even within the same woman.

Katherine said, "I was delighted to give a talk at the ISBD conference. The ongoing work of BDRN continues to be recognised at an international level. The conference was a great opportunity to learn more about the high quality research being carried out into bipolar disorder across the world, particularly in countries where resources for research have traditionally been very limited."



Dr Katherine Gordon-Smith  
at the ISBD conference

## BDRN team present at the Royal College of Psychiatrists International Congress



At the end of June 2018 Professor Ian Jones, Professor Lisa Jones, Dr Arianna DiFlorio and Dr Katherine Gordon-Smith presented at the Royal College of Psychiatrists International Congress in Birmingham. The congress is the UK's largest psychiatric

conference and had a packed four day programme of lectures and sessions. Professor Lisa Jones, Dr Arianna DiFlorio and Dr Katherine Gordon-Smith all presented preliminary findings from our data analysis of the BDRN research version of online mood monitoring system True Colours. Professor Ian Jones presented our latest perinatal mental health research findings.

There was a great amount of interest in the findings and we

were also very pleased that a number of BDRN participants were in the audience for our presentations and contributed to the discussions that followed.



Dr Arianna DiFlorio at the  
Royal College of Psychiatrists  
International Congress



# Living with bipolar disorder



By Karen Manton

My first taste of bipolar

disorder was back in May 1986. However, I was not given a diagnosis until 2002 it was simply referred to as 'anxiety and depression'. It had commenced shortly after I had started my first full time job and was having some relationship difficulties.

I had started to lose sleep but not just the odd hour here and there but the full night. I would not be able to sleep a wink as my mind was racing, relaying problems over and over again. As this continued I was soon at the point where I was struggling to function in everyday life.

Soon realising how serious the problem was my mum accompanied me to see my GP. I was prescribed medication. However, I was very agitated and refused to accept how ill I was.

I was then referred to a psychiatrist, but sadly once I started to feel better, (which was about four months later), I was just left to get on with my life.

My next episode was in 1992 followed by 1994, 1996, 1998, 2000 and 2002. Each episode followed the same pattern, stress brought on by an event

in my life causing the sleep deprivation. The illness would then cause the manic high episodes followed by the crashing lows and severe depression.

Each episode would bring the same religious beliefs often causing me to think I was immortal and nothing could harm me. Sadly, I ended up being sectioned in hospital on most of the breakdowns.

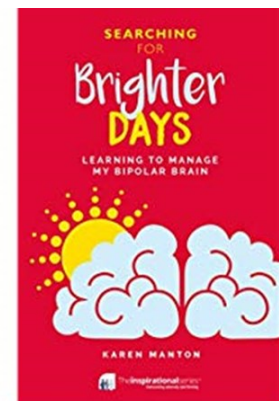
It was only towards my last episode that I was finally given a diagnosis of bipolar disorder thanks to my new psychiatrist who was amazing. He took the time to listen to my questions and found the correct medication for me. Thankfully this meant 2002 was my last hospital admission.

My psychiatrist also introduced me to BDRN and asked me if I would be willing to participate in their research which I really wanted to do. I feel that it is so important to learn more about bipolar disorder. I was visited by a member of the team and asked many questions at the same time giving a small sample of my blood.

A while later I was introduced to True Colours. Each week a series of questions are sent to me based on my previous seven days. This is then made into a personal graph. I find this a fantastic tool to monitor just how I am feeling. I can

look back at it at any time to see how my moods have been. This can also be so helpful to a GP when diagnosing the illness.

As I now feel more in control of my illness I have decided to tell my own life story 'Searching For Brighter Days: Learning To Manage My Bipolar Brain' published by The Shaw Mind Foundation who work tirelessly to promote mental health. I thought this was fantastic as they also profit from the sale of the book.



Dr Katherine Gordon-Smith:

*"Karen is very open and honest in her book about her life and the devastating effects having bipolar disorder has had. She also describes how she has learnt over the years to cope with and manage her moods. We are so pleased that Karen is raising awareness of bipolar disorder through her fantastic book."*



# Taking part in True Colours

*Julia Savage, one of our BDRN participants, has very kindly written this piece for our newsletter about her own experiences, taking part in our True Colours research and the work she has done to increase awareness of bipolar disorder in her local area.*

*We are extremely grateful to Julia for all her support since she was first interviewed for our research over 15 years ago.*



**Julia Savage**

I was first taken ill when aged eighteen, almost forty years ago, when psychiatric illness was rarely talked about openly. Treatment was limited to drugs and ECT. Thankfully, medical help and society has moved forward since that time. I believe that research plays a vital role to find further improved treatment and a wider understanding of bipolar disorder and ultimately, one day, a cure for this mental illness.

I have been taking part in the True Colours research project

for the past three years. For me, True Colours serves two purposes. Firstly, the data submitted is used by BDRN for research. Secondly, it acts as a useful tool for me to check the ups and downs of my mood by means of the graph, which is plotted on a weekly basis. I can see quite clearly, at a glance, when my mood alters. For example, I only have to see the graph peak by a small degree and I know immediately to take action to lower the mood back to a level that is acceptable to me.

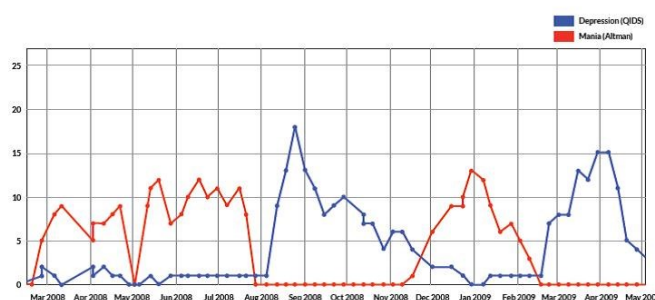
Although I have learnt to recognise my own triggers, a visual graph confirms change in the variation of my mood. This is a useful way of managing my bipolar disorder. It is also possible to pinpoint the peaks and troughs by the date the data is submitted. This means that I can cross-reference the date with events in my diary to try and analyse why the change may have occurred. Often it is due to a stressful period which may only be temporary.

I have also taken my graphs to appointments with my GP and psychiatrist to illustrate the mood swings I have experienced at a certain period of time. I often give BDRN leaflets to medical staff and other

people with bipolar disorder in the hope that others will also experience a positive outcome.

Earlier this year I attended the Heart of Worcestershire College to talk about my experiences with True Colours research to the first-year students, studying for a degree in social work. I was happy to show the students one of my own graphs and explain how the research is implemented and the ways in which it helps monitor my mood. The students were very interested in hearing about my experiences. They appreciated seeing my graph and acknowledged that it was very personal to me and thanked me for being able to share this valued information with them.

Whilst I have found True Colours to be of great assistance to myself, I appreciate that not every person with bipolar disorder will respond in the way that I have. However, the information submitted by participants is still important for research purposes.



# True Colours feedback from BDRN participants

*By Thomas Morton, BDRN Research Assistant at the University of Worcester*

This summer we conducted an online survey about how BDRN participants use True Colours. The response was fantastic with hundreds of replies and two-thirds of participants getting back to us. The BDRN version of True Colours is first and foremost a data-gathering tool for research – but in the survey many reported a variety of different uses and benefits that even included a few surprises for us.

Encouragingly, 87 percent of those who responded said they found using True Colours either moderately or extremely helpful in some way. For many this was simply because it enabled them to keep track of their moods past and present, and perhaps spot possible trends and triggers

for mood changes.

Roughly two thirds said they had never shared their True Colours data with anyone else, but of those who did the majority found it either moderately or extremely useful to do so – both with health care professionals and family members and friends.

The survey revealed suggestions about ways that True Colours could be more tailored to individuals' experiences including the addition of a weekly optional prompt for individuals to add further context to their weekly mood scores such as recent life events or medication changes and to also add details about specific features of their mood symptoms such as rapid mood fluctuations.

The information gathered in this survey will be discussed further and is likely to inform

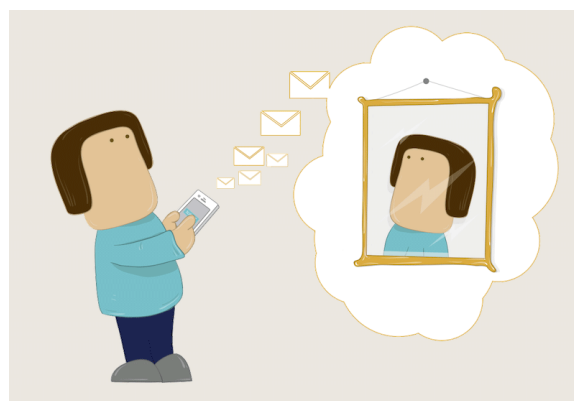
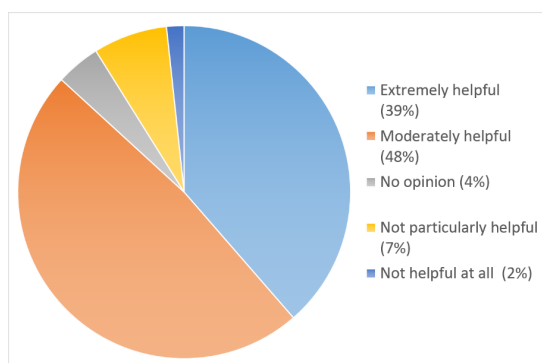
how we develop True Colours in the future. It just remains for me to thank everybody who took part for a wonderful response, and for their continued support of our ongoing research.



Thomas Morton

If you would like to join True Colours please contact us—our contact details are on the back page of this newsletter. We would love to hear from you.

Have you found using True Colours helpful in any way?



**True Colours**

# Thank you to Mike Spiers



All of us at BDRN would like to say a special thank you to one of our research champions, Mike Spiers. Mike has done a great deal to publicise BDRN's research over the past year

and to improve public awareness about bipolar disorder, including contributing to a public lecture, giving a BBC radio interview, writing a blog piece for Bipolar UK and giving us feedback and advice about some of our research materials. Thank you Mike.

If you would like to be a champion for BDRN's research programme please let us know. We know that not everyone wants to do public

speaking like Mike, so being a research champion can be as simple as telling other people you know with mood disorders about our research, writing a short piece for our newsletter (as Karen and Julia have done on pages 4 & 5 of this edition) or our website, or contributing to other articles such as Bipolar UK news stories and blog pieces.

We would love to hear from you if you are interested.

## Sleep and bipolar disorder: study findings

Dr Katie Swaden Lewis, a member of the BDRN team based in Cardiff, has completed her PhD. Katie passed her PhD viva examination in January 2018. During her PhD research, Katie investigated the effect of sleep loss on mood episodes in individuals with bipolar disorder. Some of the key findings from Katie's PhD research are:

1. Individuals with bipolar I disorder were more likely to report episodes of high mood triggered by sleep loss than those with bipolar II disorder;
2. Women whose episodes of high mood had been triggered by sleep loss were more likely to have experienced

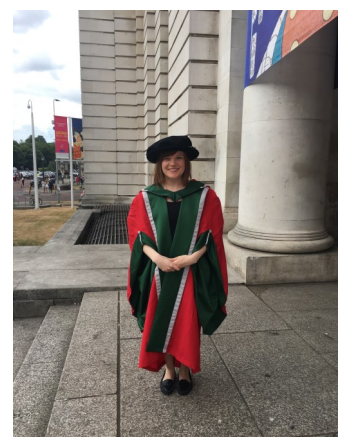
postpartum psychosis than women who did not report this;

3. Using data from the True Colours mood monitoring system, Katie found that a subgroup of people with bipolar disorder experience worsening insomnia symptoms in the 4 weeks before an episode of high mood, whereas another group did not experience problems with sleep;

4. Activity monitors can be used to measure sleep in pregnant women at high risk of postpartum psychosis.

We are delighted that Katie is staying to work with us for at least a few more years. She is

now researching whether genetic risk for sleep problems such as insomnia can be used to predict characteristics of bipolar disorder.



**Dr Katie Swaden Lewis at her PhD graduation**



# Pregnancy and bipolar disorder: study update



Amy Perry

Amy Perry has been interviewing pregnant women across the perinatal period to investigate a range of factors which may influence risk of severe mood episodes in relation to childbirth. Amy would like to thank all 130 women who have kindly participated in this study so far. She enjoys working on all aspects of this study, in particular, receiving the many wonderful updates and photographs sent by participants following the birth of their baby!

Amy has recently been analysing some of the data gathered in this study and is

pleased to be able to update you on some of the initial findings.

We found that the occurrence of an episode of mania or psychosis during pregnancy was associated with experiencing an episode of postpartum psychosis, but not of postnatal depression. In contrast, psychosocial factors during pregnancy (such as experiencing an adverse life event or level of emotional support) do not appear to influence whether or not a woman experienced postpartum psychosis. Together, these findings suggest that biological factors may play a more important role in the cause of postpartum psychosis.

Our initial analysis also indicates that for some women medication may not be as effective at preventing a mood

episode in the postpartum period compared to at other times. However, we need to do more analysis with data from many more women to be sure about this and to start to understand possible reasons.

Dr Marisa Casanova Dias, one of our newest members of BDRN (introduced below), will be working closely with Amy to interview women during their pregnancy.

If you have bipolar disorder and are currently pregnant, we would be delighted to hear from you.



## **Dr Marisa Casanova Dias Clinical Academic Psychiatrist**



Dr Marisa Casanova Dias is a clinical academic psychiatrist at Cardiff University. She was awarded an MRC (Medical Research Council) Clinical Research Training Fellowship to pursue a PhD to study bipolar disorder in the perinatal period, which she will combine with being an honorary consultant. She has worked at King's College London, researching women's mental health and

contributing to the Policy Research Unit work. Marisa trained at the Maudsley and University College London schemes and holds an MSc in Psychiatric Research from University College London. During her training she was awarded a year-long leadership fellowship at the National Institute for Health and Care Excellence (NICE), where she contributed to the Bipolar Guideline.

# New research group members



**Dr Francesca Serra**

During her PhD studies at Padua University, Italy, Francesca spent time with our group at the University of Worcester as a visiting student, investigating agitated depression in bipolar disorder. Francesca

completed her PhD in March 2018, and has received funding to return to BDRN for a year as a post-doctoral researcher. She is continuing her research into agitated features in bipolar disorder and will also be investigating the relationship between menstrual cycle, menopause and mood episodes within bipolar disorder.



**Gemma McCullough**

Gemma is a PhD student at the University of Worcester. Her research is concerned with how physical activity and sedentary behaviour affect, or are affected by, changes in mood, and hopes to use

some of the True Colours data to explore this. During her undergraduate and masters studies, Gemma worked as a Mental Health Support Key-worker for the Scottish Association of Mental Health. During this time, she gained experience working with service users across a range of mood disorders, which led to her taking up this PhD studentship opportunity.



**Karan Atkin**

Karan is Administrator to the Mood Disorders Research Group at the University of Worcester. After graduating from Coventry University she joined the University of Worcester and worked in the Research School

supporting PhD and Professional Doctorate students for 12 years. Karan joined BDRN in March 2018 and supports the team in day to day administrative duties. When participants contact BDRN, Karan is normally the first point of contact.



**Jo Johnson**

Jo is a PhD Student at the University of Worcester, co-funded with Midlands Partnership NHS Foundation Trust. Jo's research is about perinatal mental health care and referral decisions among

midwives and health visitors. Prior to commencing her PhD, Jo worked in the NHS for 26 years; first as a midwife and latterly as a health visitor.



**Kim Caldwell**

Kim is a PhD student at the University of Worcester. She is interested in exploring how individuals experience living with bipolar disorder, and whether different mood episodes are related to beliefs and coping. Kim

graduated in 2011 with a BSc (Hons) in Psychology from the University of Manchester, before completing her MSc in Clinical and Health Psychology. Prior to commencing her doctorate, she worked as a Research Assistant for the Birmingham and Solihull Mental Health Foundation Trust, exploring the experience of auditory verbal hallucinations in first episode psychosis.



**Emma Radclyffe**

Emma is a PhD student with the BDRN team at the University of Worcester. Her research concerns the diagnosis of borderline personality disorder in bipolar disorder. After graduating from the University of

Worcester in 2016, she spent a summer working with the BDRN team, looking at the public's perceptions of a soap's storyline about postpartum psychosis. During this time, she realised that research was what she wanted to do as a career, and a year later she was back at the university as a full time PhD student.

# Teaching midwives about perinatal mental health

*An important part of our work at BDRN is to teach students and health professionals about our research. Most members of BDRN are involved in teaching within a range of disciplines, including medicine, psychology, mental health nursing and midwifery.*

*Amy Perry and Dr Katherine Gordon-Smith were delighted to deliver a series of lectures about perinatal mental health to trainee midwives at the University of Worcester earlier this year.*

*After the session, Amy spoke to Ellie Sonmezer, Lecturer Practitioner for the midwifery course, to discuss the importance of research for teaching.*



**Ellie Sonmezer,**  
**Lecturer Practitioner**  
**in Midwifery**

**Hi Ellie. Can you tell me a bit about your clinical background? Have you always worked as a midwife?**

Initially I trained as a nurse before going on to complete my midwifery training in London. Once qualified, I didn't

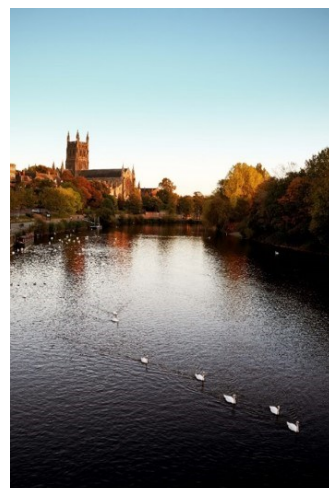
start working as a midwife straightaway, instead I decided to go scuba diving with my husband in Turkey for a year first! After returning to the UK, I began practising as a midwife in Gloucestershire, remaining in this role for 15 years. My post covered all aspects of midwifery but I was mainly based in birthing units. Since then, I have also worked as a Research Midwife, running international research projects and as a Practice Development Midwife, in which I was responsible for policy writing, service development and delivering education programmes to midwives and the multi-professional team.

**How long have you been a lecturer?**

I joined the University of Worcester as a Lecturer Practitioner in April 2017. My role involves both teaching and clinical practice. I primarily teach students who are in their second year of midwifery training. In addition to delivering lectures, I also conduct assessments, facilitate clinical skills drop in sessions and support students who are on their clinical placement.

**What do you think is the benefit of research led-teaching?**

As midwifery is a professional qualification, we are required to be evidence-based practitioners. This means that everything we do clinically and



everything we teach is based in research. Embedding the best available research into our teaching enables students to think more critically about emerging research evidence, but also helps them to adapt their approach when working with women and their families. This equips students with the knowledge to treat individuals as individuals.

**What did your students learn from the work we are doing at BDRN?**

The students found learning about the work of BDRN really interesting. In particular, they found it inspirational to discuss research that is currently being conducted at their University and to consider the wider impact that this can have. It also helps them to understand more about the research process, which they as clinicians may become involved in at some point in the future.



In terms of perinatal care, the lectures provided a good introduction to mental ill health. They also provided greater insight into caring for women with bipolar disorder during pregnancy and the postpartum period. On a personal level, I feel it also helps to reduce any prejudices the students may have and the stigma that often surrounds having a mental health problem.

### **How do you think our teaching will benefit your students in clinical practice?**

By the time our students are qualified, they will have all the layers of knowledge that will enable them to support women on an individual basis. They are also more aware of the issues around decision making that are faced by women with bipolar disorder during or planning pregnancy. This prepares them to provide

a more holistic approach to the care they give and to take this forward at an institutional level.



**The University of Worcester  
St John's Campus**

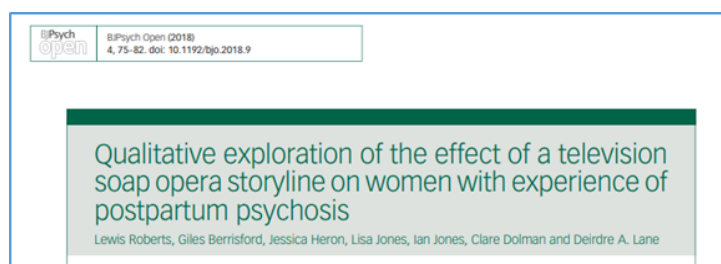
## **Perinatal research from the BDRN**

We continue to focus on improving our understanding of the period of risk in the perinatal period among women with bipolar disorder. We are extremely grateful to all the women who have taken part in our research and provided details about their past mood episodes. In a recent study we confirmed in our data that a previous perinatal mood episode is an important predictor of perinatal recurrence in women

with bipolar disorder. These findings have important implications for individualising the assessment of risk of occurrence of mood episodes in the perinatal period among women with bipolar disorder (*British Journal of Psychiatry, in press*).

We also published the findings of an in depth interview study exploring how the Stacey Slater EastEnders storyline about postpartum psychosis

has been received by women who have experienced the condition. The study found that public exposure provided by the postpartum psychosis portrayal was highly valuable and also highlighted the complexity of using television drama for public education (Qualitative Exploration of the Impact of a Television Soap Opera Storyline on Women with Experience of Postpartum Psychosis. *BJPsychOpen* 2018; 4: 75–82).



# Images of Research Exhibition

Members of BDRN have entered photographs portraying our mood disorders research into the annual University of Worcester *Images of Research Exhibition*. All of the entries are exhibited at The Hive public library in Worcester to showcase and celebrate current research being carried out at the University and to bring research to the public arena to educate and encourage debate. This is a wonderful opportunity for BDRN to increase awareness about mood disorders.

Here are just a few examples of the images in the exhibition from BDRN members.



This image (left) titled '*The happiest time of your life....*' was taken by Jo Johnson to depict her research exploring midwives' knowledge of mental health disorders in pregnancy and their experiences of referring women for specialist support. Special congratulations to Jo who won the public choice award.



Right is Dr Katherine Gordon-Smith's image called '*True Colours*' to demonstrate BDRN's prospective mood monitoring research using True Colours. Katherine took this photograph in Nepal.



Emma Radclyffe submitted the image on the left, titled '*Hidden illnesses*'. Emma created and photographed this image to showcase her research into understanding the lived experiences of people who have a diagnosis of both bipolar disorder and borderline personality disorder.



# What the brains of unaffected siblings can tell us about risk for bipolar disorder



Dr Xavier Caseras

A number of years ago in our BDRN newsletter we advertised a neuroimaging study asking for volunteers with bipolar disorder, their unaffected siblings and a group of control volunteers with no personal or family history of mood disorders. The project was carried out at Cardiff University by Dr Xavier Caseras and aimed to compare the integrity of white matter tracts (the motorways connecting different parts of the brain) between these three groups of individuals. Dr Caseras would like to thank all of the BDRN participants who very kindly offered to participate in the study.

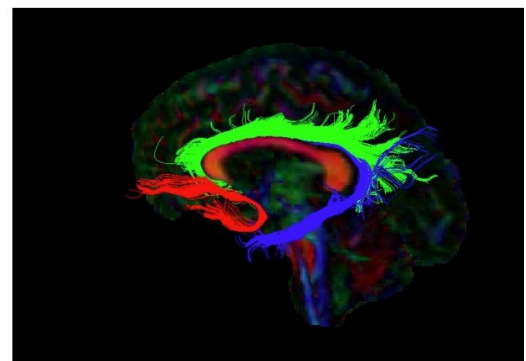
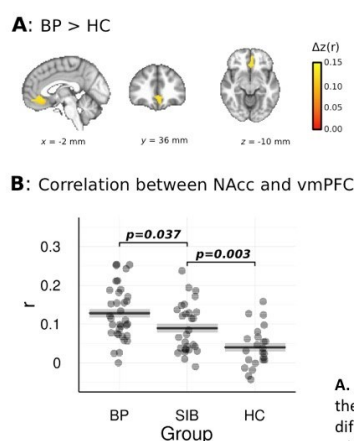
The findings have now been analysed and the results

suggest that alterations in the connections between brain areas known to be involved in the experience and the regulation of emotional states could play a key role in the development of bipolar disorder. Further work with unaffected siblings could shed light on potential compensatory mechanisms that might have protected these individuals from developing the disorder despite them presenting with similar connectivity alterations

to their siblings with bipolar disorder that were not seen in the controls. The figure below displays some of the findings.

This study has now been published:

Fractional anisotropy of the uncinate fasciculus and cingulum in bipolar disorder type I, type II, unaffected siblings and healthy controls (2018) *British Journal of Psychiatry*, Volume 213, Issue 3.



**A.** Part of the ventral prefrontal cortex where differences in connectivity with the ventral striatum are found. **B.** Quantification of the above connectivity differences across groups (BD: Bipolar Disorder participants, SIB: Unaffected Siblings, HC: Unaffected controls). **C.** Tractography reconstruction of the uncinate fasciculus (red), the cingulum (green) and the hippocampal-cingulum (blue) in an example participant. Group differences were only found for the uncinate fasciculus.

## Sleep and mood in bipolar disorder

Members of the mood disorders research group based at Cardiff University are currently carrying out a study looking at the relationship between sleep and mood in bipolar disorder as part of the National Centre for Mental Health (NCMH) research

programme. This involves monitoring sleep and mood for 6 weeks, using an activity monitor and diaries. The data are currently being processed and will be analysed to explore the complexity of the relationship between sleep and mood and how it affects

our mental health. To date, more than 120 people have taken part and we would like to thank the BDRN participants who are involved. For more information on the sleep research findings, please visit their website: [www.ncmh.info/sleep-bipolar-disorder/](http://www.ncmh.info/sleep-bipolar-disorder/)



# Acknowledgements

We would like to thank Mr & Mrs Knowles for their donations to the Mood Disorders Research Group in memory of their son.

Thank you also to Mark Glasscock for his donation in memory of his mother-in-law.

## Resources

Bipolar Education Programme Cymru: [ncmh.info/bepcymru](http://ncmh.info/bepcymru)

Action on Postpartum Psychosis: [app-network.org](http://app-network.org)

Bipolar UK: [bipolaruk.org](http://bipolaruk.org)

Youthspace: [youthspace.me](http://youthspace.me)

Mental Health Foundation: [mentalhealth.org.uk](http://mentalhealth.org.uk)

Mind: [mind.org.uk](http://mind.org.uk)

Rethink: [rethink.org](http://rethink.org)

MQ: [mqmentalhealth.org](http://mqmentalhealth.org)

National Centre for Mental Health: [ncmh.info](http://ncmh.info)

*Bipolar Disorder: The Essential Guide* by D Roberts (2011), published by Need—2—Know

*Family Experiences of Bipolar Disorder* by C Aiken (2010), published by Jessica Kingsley Publishers

*Living with Bipolar Disorder* by N Burton (2009), published by Sheldon Press

*The A-Z Guide to Good Mental Health: You Don't Have to Be Famous to Have Manic Depression* by J Thomas and T Hughes (2008), published by Oneworld Publications

*Bipolar Disorder—The Ultimate Guide* by S Owen and A Saunders (2006), published by Michael Joseph Ltd

*Become Your Own Bipolar Life Coach* by Wendy Lavin (2012) published by Grosvenor House Publishing Ltd



*Please don't hesitate to contact us with any further questions or if you would like more information about taking part in our research.*

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