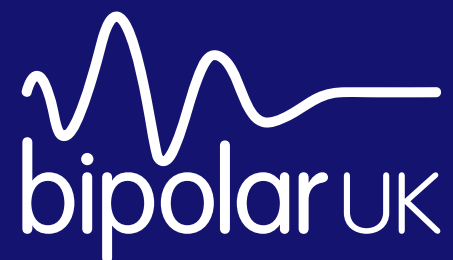


‘Saving money and lives through specialist care pathways for bipolar’

Rosie Phillips, Deputy CEO (Bipolar UK)



#LetsTalkBipolar

Introduction to Bipolar UK's work

Support groups

- Local and specialist groups for people both in-person and online, providing support with self-management and practical tips to manage bipolar

Peer support phone line

- A call-back service providing support, advice and information about bipolar for our community

Online eCommunity

- An online, moderated forum for people to talk all things bipolar in a safe space

Self-management courses

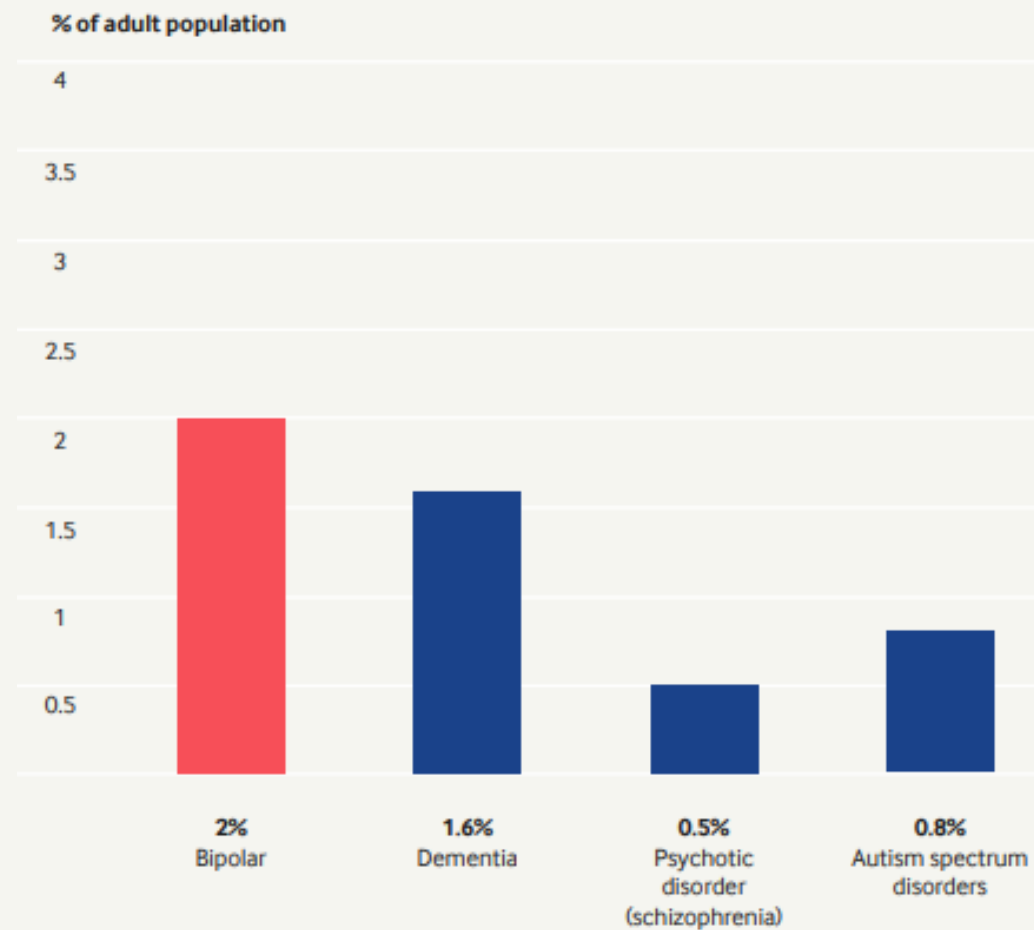
- Provide free self-management courses, run in collaboration with ICBs in England

Employer and Masterclass training

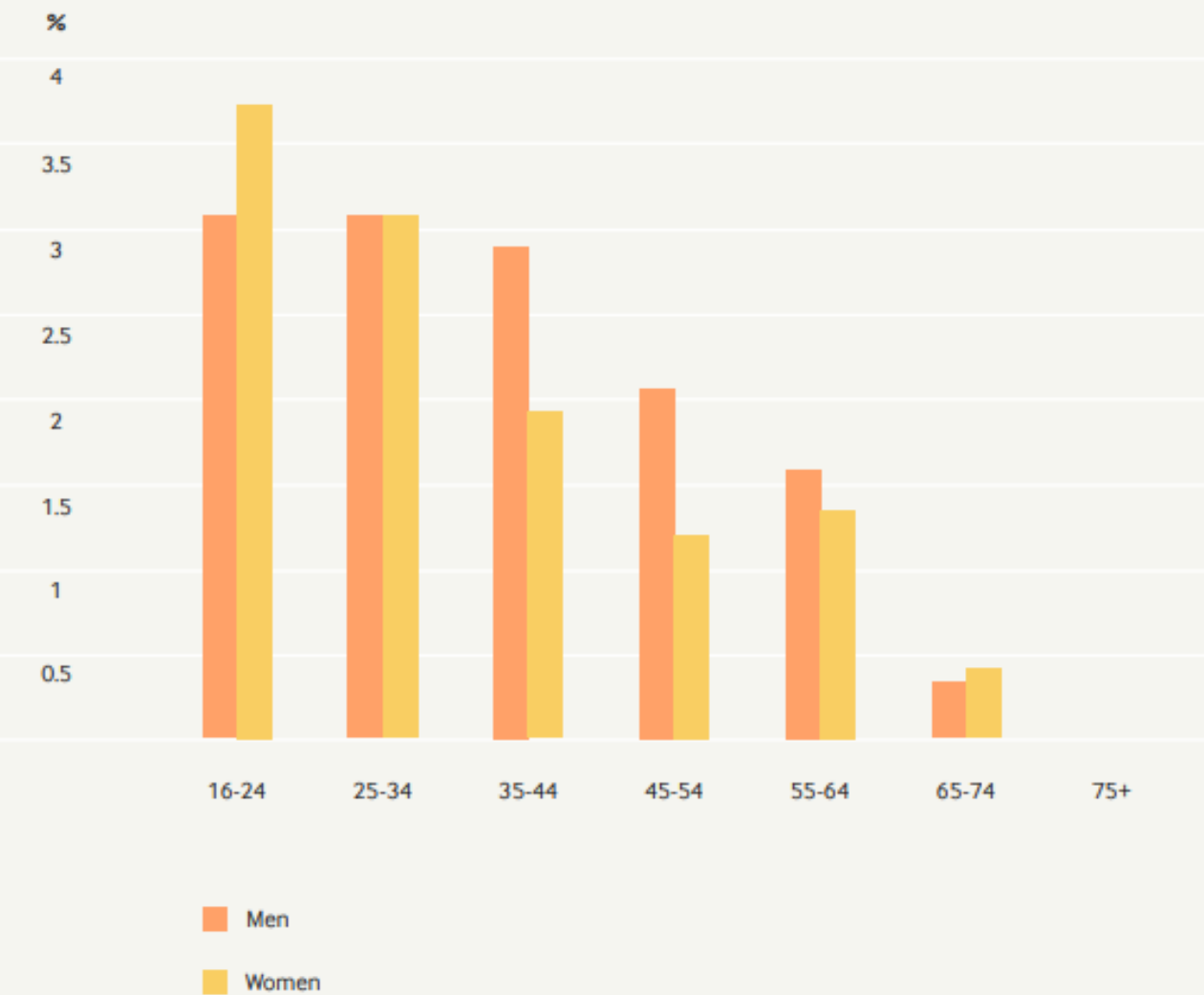
- Running courses to educate employees, employers and clinicians about bipolar and how to manage the condition in professional settings

Prevalence is high and could be rising

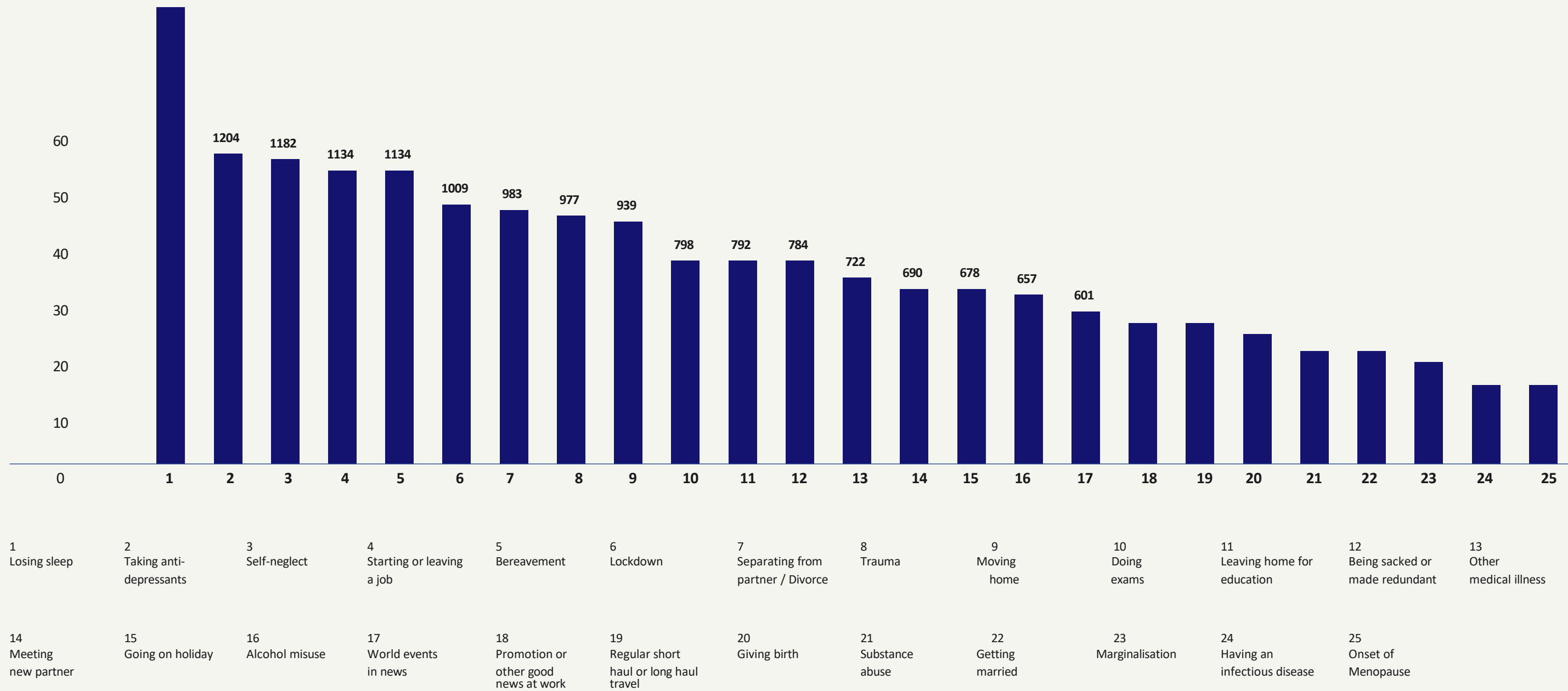
Bipolar prevalence compared to other conditions



Positive bipolar disorder screen by age and sex



What triggers bipolar?



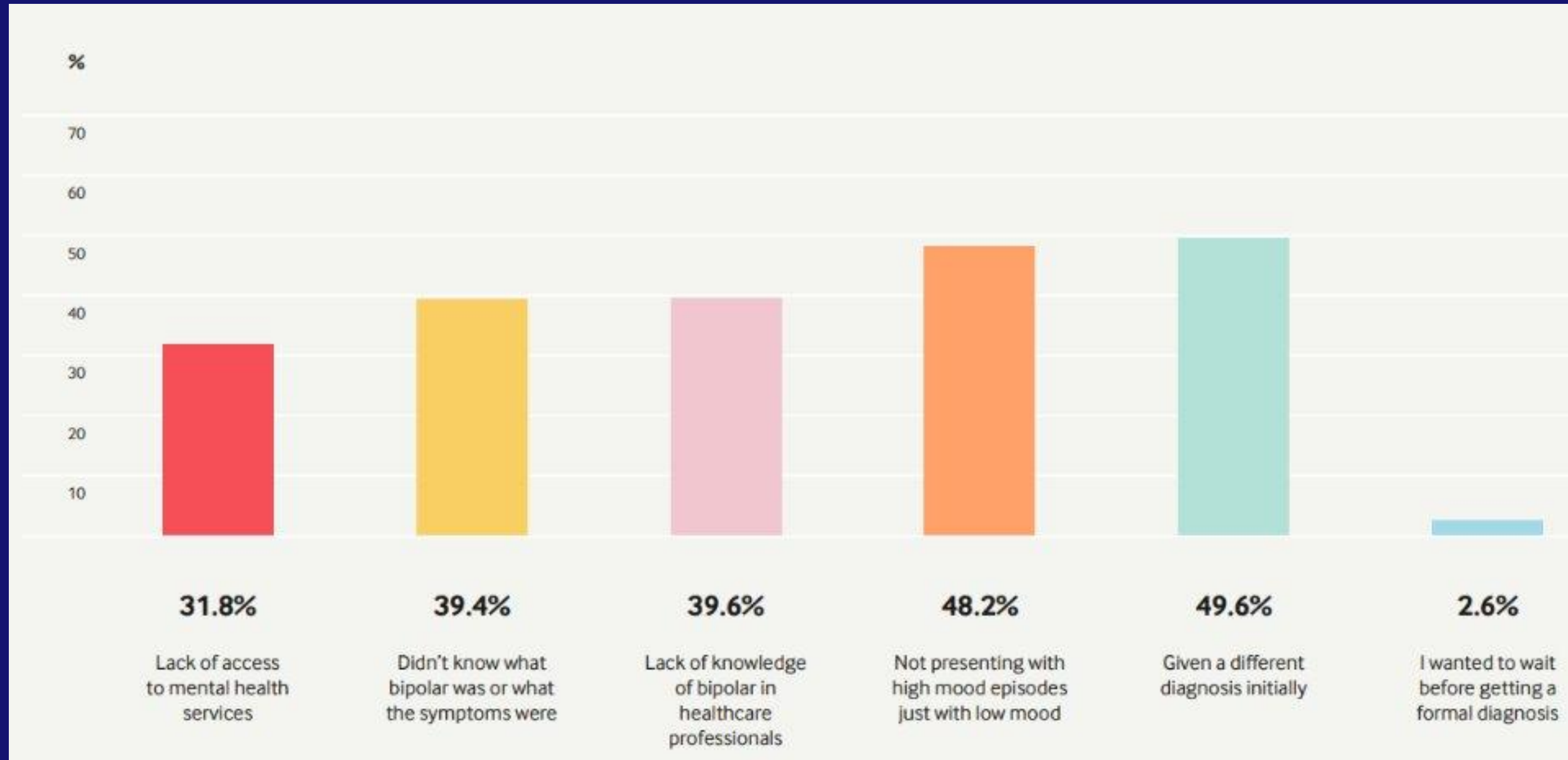
How long, on average, do you think it would take to get a diagnosis of bipolar?

Answer:

It takes, on average, 9.5 years to receive a diagnosis of bipolar in England.

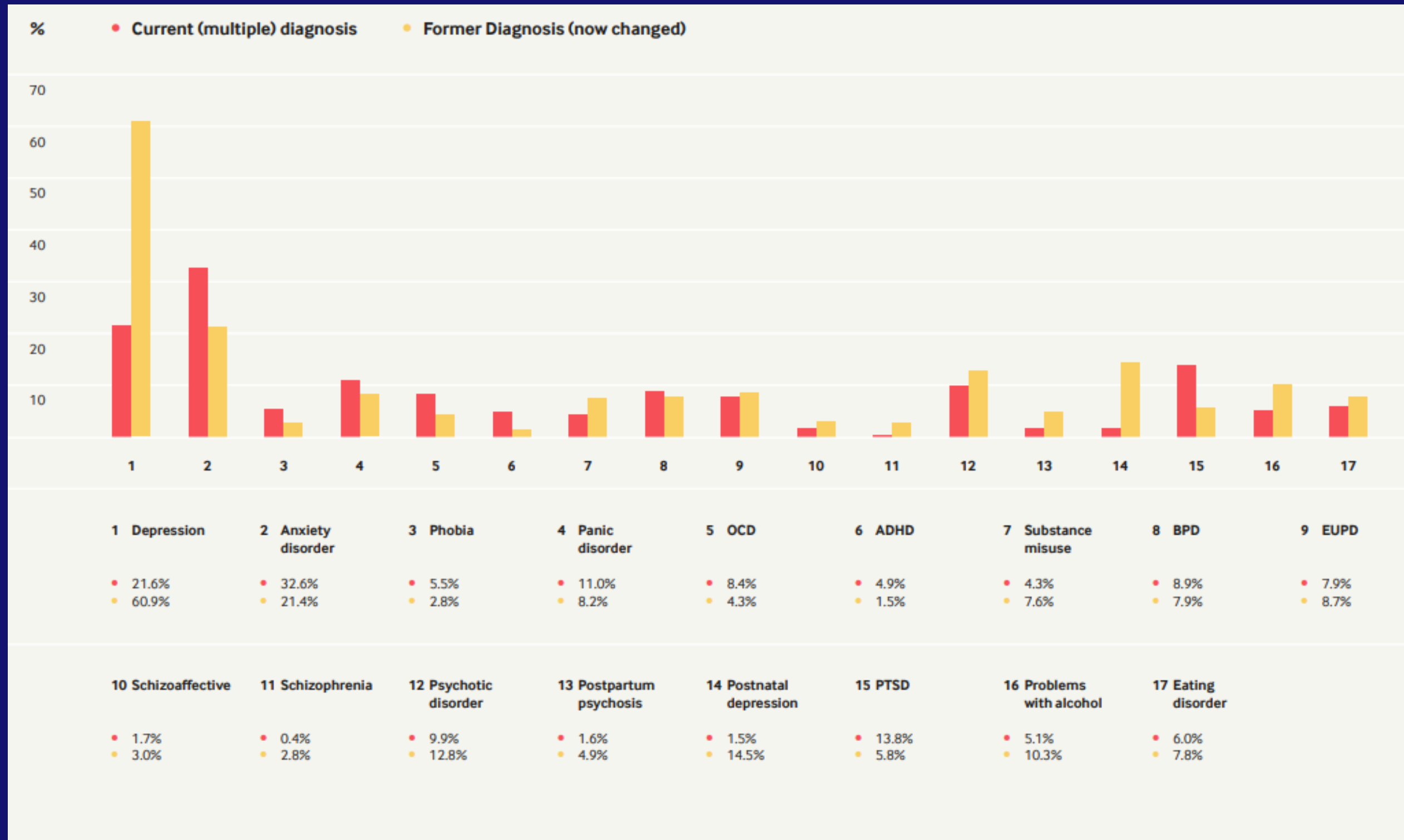
Why are people not getting a diagnosis?

“If there was a delay, why do you think it was?” (UK)

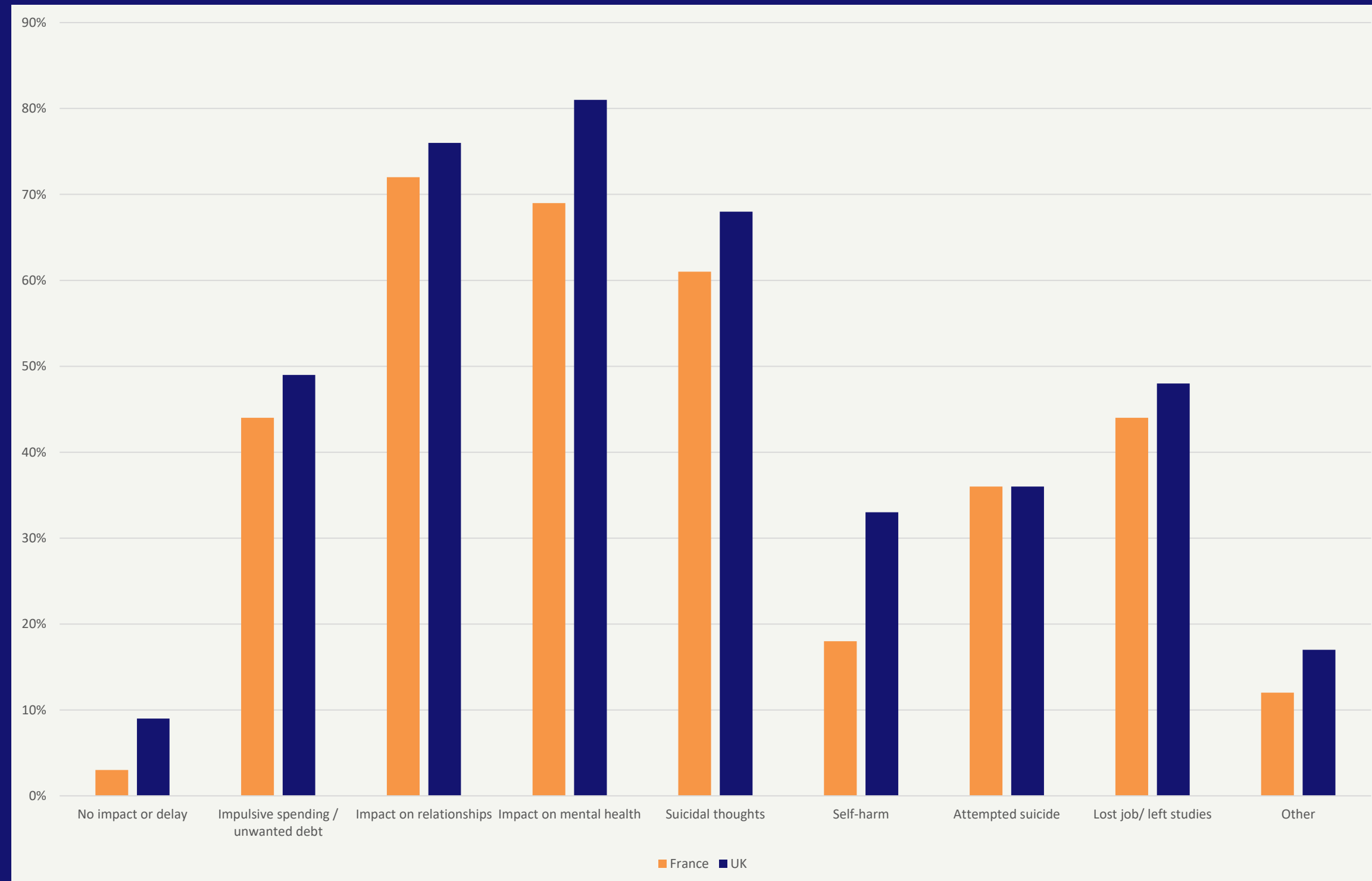


Why are people not getting a diagnosis?

Diagnostic overlap and lack of awareness of the symptoms



Impact of delayed diagnosis (France and UK comparison)



Slow diagnosis drives suicide rates

Delay to diagnosis and suicide attempts

Time to diagnosis	Percentage of people who said they attempted suicide because of the delay in diagnosis
0-2 years	24.6%
3-5 years	32.7%
5-9.9 years	39.1%
10 years plus	44.1%

Episodic care isn't working

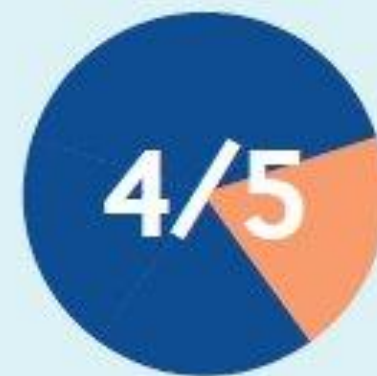


6 out of 10 people living with bipolar get no dedicated treatment or support for the condition

98% of survey respondents had relapsed at least once since they were given a diagnosis yet:



hadn't been offered any psychological therapies on the NHS



hadn't been offered any psychoeducation to help manage the condition well



hadn't got a care plan or safety plan

What is the solution?

- Bipolar UK prioritises establishing a dedicated NHS care pathway to replace the current episodic model, ensuring continuous specialist support and reducing crisis interventions.
- A dedicated pathway would provide consistent access to specialist mental health professionals, reduce hospital admissions and crisis interventions, improve long-term outcomes and quality of life and decrease overall economic costs by preventing relapses and severe episodes.
- Developing best-practice care packages - including in-person support, digital monitoring, and psychoeducation - is essential for long-term management.

What is the solution?

- There are already centres of excellence across England and Wales, such as the OPTIMA Mood Disorders Service in London, which has successfully reduced hospitalisation rates.
- Newcastle, Birmingham, Cardiff, and South London also offer innovative specialist services. Expanding these models nationwide requires government investment in infrastructure, training, and long-term sustainability.
- The Kessing study showed that specialised outpatient care significantly lowers hospital readmissions and improves treatment adherence, demonstrating its cost-effectiveness.

What is the solution?

- Early Intervention in Psychosis (EIP) services offer a well-established model for providing early mental health support.
- Some people with bipolar receive treatment through these services (if they have experienced psychotic symptoms) but they don't help people to specifically manage their bipolar, increasing risk of relapse.
- Adapting these services to be more "bipolar-friendly" could provide an interim solution to a lack of bipolar care for those with bipolar already being treated through EIP services.

How can you help?

- Bipolar care is still far too patchy, and we need to change that. Spotting the early signs - especially in young people - can be life-changing. If you work with younger patients experiencing extreme mood swings, recurrent depression, or a strong family history of bipolar, consider whether bipolar could be the missing piece.
- If you see patients with bipolar, please signpost them to Bipolar UK - we provide peer support, self-management resources and guidance that can make a real difference.
- We also need more voices advocating for specialist bipolar pathways within local mental health services. If you're able to push for better care or shape services, we'd love to work with you.
- If you want to be part of the conversation, get in touch by emailing emair@bipolaruk.org or rphillips@bipolaruk.org.

Thank you

