The Link between Bipolar Disorder and Creativity  By Jane Collingwood

People with bipolar disorder experience episodes of both mania (an exceptionally elevated, irritable, or energetic mood) and depression. These episodes may be separate or depressed and manic symptoms may occur at the same time. The frequency of episodes varies. At least four depressive, manic, hypomanic (mild form of mania) or mixed episodes within a year is known as rapid-cycling bipolar disorder.

During the early stages of a manic episode, people can be very happy, productive and creative. They have less need for sleep and don’t feel tired. There is some evidence that many well-known creative people suffer or have suffered from bipolar disorder. But this link may be caused by an unknown third factor, such as temperament.

Bipolar disorder has been slightly romanticized by its association with creative types, but many sufferers’ experience of the illness is far from glamorous. Patients report getting to the point where they can’t function and sometimes need to be hospitalized, especially if they don’t take their medication as prescribed.

On the other hand, at the outset of a manic episode, the person can feel like making lots of plans because the world seems full of opportunity. They may feel high, meet a lot of new friends, spend nice time with family... Medication can appear to remove or dull the experience, and may not be viewed positively at this point.

So is there something about the manic or in-between episodes of bipolar disorder that can be conducive to creative expression in some people?

Studies in both psychology and medicine offer some evidence for a link, but they tend to focus on well-known figures or small groups of patients. A team from Oregon State University recently looked at the occupational status of a large group of typical patients and found that “those with bipolar illness appear to be disproportionately concentrated in the most creative occupational category.” They also found that the likelihood of “engaging in creative activities on the job” is significantly higher for bipolar than nonbipolar workers.
Katherine P. Rankin, Ph.D. and colleagues at the University of California-San Francisco comment, “It is well-established that people with affective disorders tend to be overrepresented in the creative artist population (especially those with bipolar disorder). Bipolar disorder may carry certain advantages for creativity, especially in those who have milder symptoms.”

They add that bipolar patients can show unusual brain anatomy, specifically “diminished frontal regulation of subcortical affective systems involving the amygdala and striatum, which may increase their affective instability as well as their compulsiveness.”

A potential genetic basis for the disorder could cause ethical problems, warns Professor Grant Gillett of the University of Otago, New Zealand. He writes, “The diagnosis of bipolar disorder has been linked to giftedness of various sorts and this raises a special problem in that it is likely that the condition has a genetic basis. Therefore it seems possible that in the near future we will be able to detect and eliminate the gene predisposing to the disorder.

“This may mean, however, that, as a society, we lose the associated gifts. We might then face a difficult decision either way in that it is unclear that we are preventing an unalloyed bad when we diagnose and eliminate bipolar disorder through prenatal genetic testing and yet if we allow the individual to be born we are condemning that person to being an unwitting sacrifice in that they might well suffer considerable net distress as a result of our need to keep our gene pool enriched in the relevant way.”

In any case, individuals with bipolar disorder often report that they are at their most creative and productive when feeling most healthy. For example, the poet Sylvia Plath, who is widely believed to have had bipolar disorder, said that when she was writing she was accessing the healthiest part of herself. What might she have written had she not killed herself at age 30?

A 2005 study attempted to unravel the relationship between Virginia Woolf’s creativity and her mental illness, which was most likely bipolar disorder. The psychiatrist Gustavo Figueroa of the University of Valparaiso, Chile, writes, “She was moderately stable as well as exceptionally productive from 1915 until she committed suicide in 1941.

“Virginia Woolf created little or nothing while she was unwell, and was productive between attacks.” But, “A detailed analysis of her own creativity over the years shows that her illnesses were the source of material for her novels.”

It does seem that for those who are diagnosed with bipolar disorder, creativity can offer a powerful means of expression.