

Light, Dark, and Bipolar Disorder: Some Practical Guidance

Interventions affecting circadian rhythm can be therapeutic, with some approaches more effective than others.

Chronotherapies, interventions that affect the circadian rhythm, have been studied in both the depressive and the manic stages of bipolar disorder through the years (e.g., *NEJM JW Psychiatry* Nov 2017 and *Am J Psychiatry* 2017; 175:131; *NEJM JW Psychiatry* Nov 2009 and *Biol Psychiatry* 2009; 66:298). In this review, the authors have compiled the evidence and recommendations from an International Society of Bipolar Disorders task force. The major treatments include:

- Bright light therapy: This modality appears to be effective for bipolar depression. Bright light (7000–10,000 lux) can be given in the morning or at midday. Patients should receive mood stabilizers before chronotherapy begins. Exposure should start with 15 minutes and can increase to 30 minutes or more. The clinician should be aware of hypomania and mood switching.
- Dark therapy: This involves the use of amber glasses to block blue light starting in the evening as a treatment for mania. According to the authors, bipolar depression is a contraindication.
- Interpersonal social rhythm therapy: The evidence is substantial that this therapy quickens recovery from bipolar depression and increases time to recurrence.
- Cognitive-behavioral therapy for insomnia adapted for bipolar disorders: This modality focuses on sleep management for euthymic patients. The single published trial suggests benefit for hypomania/ mania relapse, insomnia, and mood switches.
- Sleep deprivation: This approach (which involves staying awake through the night) is used for bipolar depression and has low evidentiary support, primarily from uncontrolled studies. It can be
 considered after more-established options fail or when rapid response is required.
- Melatonergic agents: Melatonin and its agonists have little support in the literature for treating either depression or mania.

COMMENT

This important review provides clinicians with information on several nonpharmacologic modalities for treating patients with bipolar disorder. The easiest interventions to administer are the dark (amber glasses) and bright light therapies. — *Jonathan Silver, MD*

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