

Bipolar Disorder

What's in the Mind?

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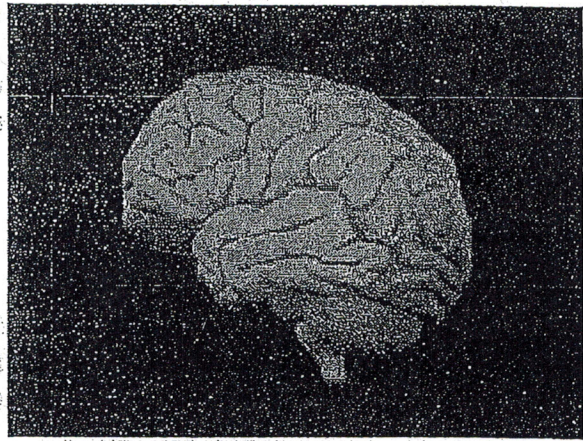
BIPOLAR DISORDER: WHAT'S IN THE MIND

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Module 1

Discover the Mind



What is Bipolar Disorder?

Bipolar disorder (also called bipolar disease or manic depression) is a serious mental illness that is marked by extreme—and in some cases, rapid or abrupt—shifts in mood, from mania to depression.

During periods of **mania**, an individual may feel extremely excited, impulsive, euphoric, and full of energy. The person might engage in risky or unhealthy behaviors such as drug use, spending sprees, or impulsive and unprotected sex.

Periods of **depression** might bring on feelings of sadness, hopelessness, and loss of interest in activities one normally enjoys. During this phase, a person might sleep too much or too little or have thoughts of suicide.

Sometimes the shifts in mood can be severe; other times, the person might experience a normal mood between episodes of mania and depression. Regardless, people with bipolar disorder often have difficulty coping with everyday life. They often perform poorly or inconsistently at school or at work and have trouble maintaining relationships.

The History of Bipolar Disorder

Aretaeus of Cappadocia began the quest into the disorder by beginning the process of detailing symptoms in the medical field as early as the 1st Century in Greece. His notations on the link between mania and depression went largely unnoticed for many centuries.

The ancient Greeks and Romans were responsible for the terms “mania” and “melancholia,” which are now the modern day manic and depressive. They even discovered that using lithium salts in baths calmed manic patients and lifted the spirits of depressed people. Today, lithium is a common treatment for bipolar patients.

The Greek philosopher Aristotle not only acknowledged melancholy as a condition, but thanked it as the inspiration for the great artists of his time.

It was common during this time that people across the globe were executed for having bipolar disorder and other mental conditions because as the study of medicine advanced, strict religious dogma stated these people were possessed by demons and should therefore be put to death.

In the 17th Century, Robert Burton wrote the book, *The Anatomy of Melancholy*, which addressed the issue of treating melancholy (non-specific depression) using music and dance as a form of treatment. While mixed with medical knowledge, the book primarily serves as a literary collection of commentary of depression, and vantage point of the full effects of depression on society. It did, however, expand deeply into the symptoms and treatments of what is now known as clinical depression.

Later that century, Theophilus Bonet published a great work titled *Sepuchretum*, a text that drew from his experience performing 3,000 autopsies. In it, he linked mania and melancholy in a condition called “manico-melancolicus.”

This was a substantial step in diagnosing the disorder because mania and depression were most often considered separate disorders.

Centuries past, and little new was discovered about bipolar disorder until French psychiatrist Jean-Pierre Falret published an article in 1851 describing what he called “la folie circulaire,” which translates to circular insanity. The article details patients switching through severe depression and manic excitement, and is considered the first documented diagnosis of bipolar disorder.

Besides the diagnosis, Falret noted the genetic connection in bipolar disorder, something medical professionals still believe to this day.

However, the history of bipolar disorder changed with Emil Kraepelin, a German psychiatrist who broke away from Sigmund Freud’s theory that society and the suppression of desires played a large role in mental illness. Kraepelin recognized biological causes of mental illnesses. He is believed to be the first person to seriously study mental illnesses.

Kraepelin’s *Manic Depressive Insanity and Paranoia* in 1921 detailed the difference between manic-depressive and praecox, which is now known as schizophrenia. His classification of mental disorders remains the basis used by professional associations today.

A professional classification system for mental disorders—which was important to better understand and treat conditions—has its earliest roots in the early 1950s from German psychiatrist Karl Leonhard and others.

The term “bipolar”—which means “two poles” signifying the polar opposites of mania and depression—first appeared in the American Psychiatric Association’s *Diagnostic and Statistical Manual of Mental Disorders* (DSM) in its third revision in 1980. It was that revision that did away with the term mania to avoid calling patients “maniacs.” Now in its fourth revision with a fifth version due in 2013, the DSM is considered the leading manual for mental health professionals.

The current version of the DSM lists the following subtypes of bipolar disorder with the following diagnostic criteria:

Bipolar I Disorder

- At least one manic episode and one or more major depression episode.
- Equally common in men and women, with the first episode in men usually being mania and the first episode in women typically being major depression.
- Major depression

- Instead of full-on mania, they experience hypomania: high energy, impulsive and excitability but less severe as full-fledged mania.
- More common in women than men.

Bipolar II Disorder

- Major depression
- Instead of full-on mania, they experience hypomania: high energy, impulsiveness, and excitability, but less severe as full-fledged mania.
- More common in women than men

Cyclothymic Disorder

- Less severe mood swings
- Episodes shifting from hypomania to mild depression
- Rapid changes in mood—with four or more episodes of major depression, mania, hypomania, or mixed symptoms within a year.
- May have more than one episode in a week or even within one day
- More common in people who have their first episode at a younger age
- Affects more women than men

Rapid-Cycling Bipolar Disorder

The DSM-V is expected to reflect “a significant reformulation in how personality disorders are identified and assessed. The change integrates disorder types with pathological personality traits and, most importantly, levels of impairment in what is known as ‘personality functioning,’” according to a press release from the American Psychiatric Association.

Types of Bipolar Disorder

While bipolar I and II are the main types of the disease, there are other forms as well. The types of bipolar disorder include:

Bipolar I Disorder

This type of bipolar disorder is characterized by the occurrence of at least one manic episode and one or more major depression episodes. Bipolar I disorder is equally common in men and women, with the first episode in men usually being mania, and the first episode in women typically being major depression.

Bipolar II Disorder

People with bipolar II experience major depression, but instead of full-on mania, they experience hypomania. In hypomania, a person will still exhibit higher energy, impulsiveness, and excitability; but the mood is not as extreme as full-fledged mania. Bipolar II disorder is more common in women than men. In men, the number of hypomanic episodes equals or exceeds the number of depressive episodes, while in women depressive episodes dominate.

Cyclothymic Disorder

This is a “mild” form of bipolar disorder, with mood swings that are less severe, and episodes shifting from hypomania to mild depression.

Rapid-Cycling Bipolar Disorder

This type of bipolar disorder is characterized by rapid changes in mood—with four or more episodes of major depression, mania, hypomania, or mixed symptoms within a year. Some people experience more than one episode in a week or even within one day. Rapid cycling seems to be more common in people who have their first episode at a younger age, and it affects more women than men.

Causes of Bipolar Disorder

Scientists are continuing to uncover the many mechanisms that underlie bipolar disorder. The exact cause of bipolar disorder is not known, but studies have found abnormalities in brain structure, in brain chemical production and function, and in nerve-to-nerve communication in parts of the brain that regulate mood and impulse control.

Genetics

Because bipolar disorder tends to run in families, researchers are trying to find genes that are linked to bipolar disorder. For example, they have found that having the gene *GNB1L* on chromosome 22 increases susceptibility to bipolar disorder and that bipolar disorder is associated with differences in the *CLOCK* gene that helps regulate the body’s biological rhythms, as well as a variation in the gene *CACNA1C*, which is linked to smaller volume in the brainstem, a part of the brain that helps regulate mood and underlies cognition.

Biological Abnormalities

Brain imaging and other types of studies are helping uncover differences in the brains of people with bipolar disorder compared to those without the disorder. While the significance of these differences is still uncertain, some notable discoveries have been made.

- In people with bipolar disorder, studies have detected **blood flow and structural differences** in parts of the brain that regulate mood and impulse control.
- While examining people with bipolar disorder, scientists have also found evidence of the **loss or damage of brain cells** in the hippocampus—a part of the brain associated with memory—that indirectly affects mood and impulse control.
- Other studies have found an **abnormal pattern of brain development** in children with bipolar disorder that raises the risk for unstable moods.
- A recent body of research suggests that **mitochondrial dysfunction** may play a role in the development of psychiatric diseases, including bipolar disorder. Mitochondria are the energy-generating furnaces found in every cell, so when they do not work properly, the result is abnormally low energy production. Alterations in brain energy metabolism may result in the abnormal brain function and behaviors we see in patients with psychiatric disorders.

Faulty Neurotransmitters

Neurotransmitters are naturally occurring chemicals in the brain and nervous system that facilitate the communication between cells. In examining people with bipolar disorder, researchers have found hindered production and function of the neurotransmitters serotonin and acetylcholine. There are also structural differences in the receptors for two other neurotransmitters, glutamate and GABA. All of these brain chemicals play important roles in mood regulation.

Bipolar Disorder Risk Factors

Scientists agree that there is no single cause of bipolar disorder, but many factors interact to cause or increase risk of the disorder.

Family History

Studies indicate that first degree biological relatives (parent or sibling) of individuals with bipolar disorder have higher rates of having the condition themselves compared to the general population. People with a first degree relative with bipolar disease have a 5 to 10 percent increased risk of being diagnosed with bipolar disorder. There is a 40 to 70 percent risk of bipolar disorder in an identical twin if one twin is diagnosed with the disease, suggesting there is a significant genetic component to the development of bipolar.

Age

People between the ages of 15 and 25 are at a greater risk of bipolar disorder, with half of cases being diagnosed before the age of 25. However, bipolar disorder has been diagnosed in children as young as 6 years old, and people have developed symptoms in their 30s and 40s.

Sex

Bipolar II disorder is more common in women than in men. However, bipolar I disorder is equally prevalent in both sexes.

Environmental and Lifestyle Factors

Scientists believe that environmental factors like stress, abuse, experiencing a traumatic event, or becoming addicted to alcohol or other substances may prime the brain for development of bipolar disease.

Bipolar Disorder Symptoms

A person with bipolar disorder will experience different symptoms depending on the phase they are in—manic phase or a depressed phase. In some very rare cases, manic and depressed symptoms occur simultaneously or in very quick succession in people with bipolar I disorder. This is called a **mixed episode**. These symptoms would be more intense in someone with bipolar I disorder and less severe in someone with bipolar II disorder.

Mania Symptoms

A manic phase may last from days to months and is marked by elevated mood and poor impulse control. An individual might exhibit:

- Increased energy
- Unusual talkativeness
- Hyperactivity
- Racing thoughts
- Easy distractibility
- Irritability
- Little need for sleep
- Inflated self-esteem
- Grandiose thoughts about one's abilities

One of the most dangerous symptoms of mania is the practice of reckless behaviors that a person would not otherwise engage in. These reckless behaviors include:

- Unprotected sexual encounters
- Binge drinking or drug use
- Spending sprees
- Foolish business investments
- Making rash decisions that put themselves or loved ones in harm's way.

Depression Symptoms

A depression phase is characterized by:

- Sadness
- Uncontrollable crying
- Feelings of worthlessness or hopelessness
- Excessive guilt
- Fatigue or listlessness
- Anxiety
- Sleep disturbances (either oversleeping or inability to sleep)
- Eating disturbances (either eating too much or too little)
- Loss of interest or enjoyment in activities one typically enjoys
- Withdrawal from friends and family

In bipolar disorder, suicide is a significant risk, occurring in 10 to 15 percent of people with either type I or II. Suicidal thoughts and attempts are more likely to happen when the individual is in a depressed state. Other forms of self-harm, such as cutting and self-mutilation is also common in people with bipolar disorder I or II.

Bipolar Disorder Complications

Because of the mood swings associated with bipolar disorder, individuals with the condition can have trouble with normal daily tasks and routines. People with bipolar disorder can experience physical, social, and interpersonal complications.

Coexisting Conditions

Many illnesses tend to coexist with bipolar disorder and can make its diagnosis or treatment difficult. These conditions include:

- Anorexia
- Bulimia
- Attention Deficit Hyperactivity Disorder (ADHD)

- Anxiety disorders such as post-traumatic stress disorder (PTSD), social phobia and generalized anxiety disorder

Increased Risk for Conditions

People with bipolar disorder are also at higher risk for the following diseases or conditions:

- Migraine headaches
- Hay fever
- Psoriasis
- Eczema
- Hypothyroidism
- Asthma
- Diabetes
- Heart disease
- Obesity
- Epilepsy

Social or Interpersonal Complications

The following problems are typically associated with or a result of bipolar disorder:

- Truancy
- Difficulty or failure performing in school or at work
- Relationship troubles
- Frequent run-ins with the law
- Financial difficulties

Abuse of alcohol and other substances is also common and is associated with an increase in the number of hospitalizations, a worsening of the course of bipolar disorder, and lower treatment success.

Although symptoms dissipate significantly between episodes, as many as 60 percent of people with bipolar disorder I do not return to a fully functional level and experience interpersonal, school, or work difficulties even when they are not manic or depressed. The majority of people with bipolar disorder II return to a fully functional level between episodes.

Diagnosis Guide for Bipolar Disorder

The Diagnostic and Statistical Manual of Mental Disorders, known as the DSM, lists the diagnostic criteria for all mental disorders.

Now in its fourth edition, with a fifth currently in the works, the DSM lays out the specific criteria needed to be diagnosed with bipolar disorder, or its subtypes.

While the DSM addresses numerous specific factors regarding bipolar disorder and its manic and depressive episodes, here is a simplified version of the diagnostic criteria established by the DSM.

Bipolar disorder is a mental condition where a person fluctuates between periods of mania and depression.

Mania

The DSM defines a manic episode as a “distinct period during which there is an abnormally and persistently elevated, expansive, or irritable mood” that must last for a week, or less if hospitalization is required. The mood must be accompanied with at least three of the following symptoms:

- Inflated self-esteem
- Decreased need for sleep
- Pressure of speech
- Flight of ideas
- Distractibility
- Increased involvement in goal-directed activities or psychomotor agitation
- Excessive involvement in pleasurable activities with a high potential for painful consequences

Depression

The DSM defines a major depressive episode as at least four of the following qualities that must be newly present or recently worsened for a period of at least two weeks:

- Changes in appetite or weight, sleep, or psychomotor activity
- Decreased energy
- Feelings of worthlessness or guilt
- Difficulty thinking, concentrating, or making decisions
- Recurrent thoughts of death or suicidal ideation, plans, or attempts

Bipolar I Disorder

The main symptom of bipolar I disorder involves one or more manic episodes or mixed episodes that are not otherwise explained by another medical condition or as a result of medications or other substances.

Bipolar II Disorder

The essential feature of bipolar II disorder is the occurrence of one or more major depressive episodes accompanied by at least one hypomanic episode. The symptoms must cause significant distress or impairment in work, school, or personal endeavors.

It is common that people with bipolar II disorder do not recall the hypomanic episodes and are only aware of them when told by friends or loved ones.

Cyclothymia

This type of bipolar disorder involves chronic, fluctuating mood disturbances involving numerous periods of hypomanic symptoms and numerous periods of depressive symptoms for at least two years. For adults, a symptom-free period lasts no longer than two months, or one month for children or adolescents.

Bipolar Disorder Not Otherwise Specified

This category refers to bipolar symptoms that do not qualify for other subtypes. These can include rapid mood fluctuations not long enough to qualify for a manic episode or depressive episode, or repeated hypomanic episodes without a major depressive episode.

This information should not be used as a tool to diagnose yourself or someone you know. Only a qualified mental health expert can do that. This information is for education purposes only.

Treatment Assessment Guide

Treating bipolar disorder isn't an easy task.

We all wish there was a single pill that could fix everyone's dilemma, but it just doesn't work that way. Our brains, while structured similarly, work differently, and while researchers are still trying to pinpoint what exactly causes bipolar disorder, there are numerous treatments available to help calm the symptoms of the disorder.

Still, treating bipolar disorder is a trial and error process. Often, a doctor will prescribe one medication to see if it works. Depending on your type of bipolar disorder, this could be lithium, selective serotonin reuptake inhibitors (SSRIs), serotonin-norepinephrine reuptake inhibitors (SNRIs), or others.

Some medications can take weeks to reach their full, expected results. Make sure you ask your doctor how long your specific medication should take to kick in, and what the expected results should be.

There are numerous reasons why you might not think you're getting the most out of your bipolar medications, so here are some factors to consider before you talk to your doctor about trying something else.

No Effects

The goal of bipolar medication treatment is to help alleviate anxiety, depression, mania, and other symptoms.

If you regularly take your medication, you should feel some kind of desired effects. Your mood should improve, or at least stabilize. You should feel more at ease, and overall better about your condition.

Again, this won't happen immediately, but if you aren't feeling any different after taking your medication for a period of time, you should talk with your doctor.

Side Effects

Almost all medication comes with its side effects, but there comes a point where enduring the side effects could outweigh the benefits of the medication. Addressing the side effects of your medication with your doctor is important in getting the best care for your bipolar disorder. Some side effects of commonly prescribed medications include:

- Weight problems, including gain or loss
- Drowsiness
- Reduced sexual desire
- Tremors
- Dry mouth
- Blurred vision

- Changes in appetite

However, some people can experience even worse adverse effects from medication. Report any and all of your concerns to your doctor so he or she can get an accurate picture of how the medication is affecting you.

Suicidal Thoughts

If any of your treatments cause you suicidal thoughts, contact your doctor immediately. These are signs that your medication and therapy is not working correctly and should be reported to your doctor immediately.

Lost Effects

There is a chance that your medication may not become as effective as it once was as you start to develop a tolerance for the drugs. Tolerance and other factors can make bipolar, depression, and other medications from working effectively. Some of those include:

- Your bipolar disorder has changed
- Another medical condition
- Dietary or other changes
- Weight loss or gain

As with all medication, do not stop taking your prescriptions until you've been instructed to do so by your doctor.

Treatments for Bipolar Disorder

Bipolar disorder is a lifelong condition, so it requires lifelong treatment, even when the affected person feels fine. Treatment is usually guided by a psychiatrist or other mental health professional skilled in treating bipolar disorder.

Treatment may include a combination of medication, therapy, and other treatments that may be necessary, such as rehabilitation from substance abuse.

Psychiatrists typically recommend medications as initial treatment to balance moods and control symptoms as quickly as possible. Once symptoms are under control, maintenance treatment is

needed to manage bipolar disorder in the long term. Maintenance treatment is very important; without it, risk of relapse is higher, and there's a greater chance that minor mood swings can turn into full-blown mania or depression.

Approved in the United States in the 1970s, lithium remains one of the most widely used and effective treatments for bipolar disorder. While effective, lithium does have side effects and people diagnosed with bipolar who take it may need to be monitored frequently by their doctor to ensure the drug is not hurting them.

Where It Fits In

Medication is considered a core portion of bipolar treatment plans, and lithium is considered among the most important of the medications that can be used because of its wide-ranging effectiveness in stabilizing mood.

How Does It Work

Lithium is a mood stabilizer. It can ease the symptoms of the manic and depressive phases associated with bipolar disorder and decrease the chance of a person having them recur. But lithium needs time—up to a few weeks—to build up in the body before it reaches peak effectiveness. In the case of sudden or acute bipolar episodes, it may need to be prescribed with other drugs if it has not reached the optimal level in the patient's system.

Who Can Take It

Lithium is a widely prescribed drug for bipolar disorder, but some segments of the population should take extra care when using the drug. They include people who have kidney or thyroid problems, and women who are pregnant or intending to become pregnant. People about to start lithium treatments should also tell their doctor about any other medications they are taking to prevent or minimize problems when lithium is introduced into their systems.

Side Effects

The dosage and level of lithium in a person's system needs to be monitored regularly to ensure that the proper level is maintained in the body. Too much lithium in a person's system can be toxic and cause damage. A person's overall health determines what the right level of lithium is for them.

Signs of toxicity can include nausea and diarrhea, problems with coordination and mental changes such as an inability to concentrate, drowsiness and disorientation. In severe cases, toxicity can cause a coma.

Lithium

Lithium can also damage the kidneys and interfere with the function of the thyroid, but monitoring can again spot these problems before they become serious, allowing physicians to mitigate them.

There is at least some indication that lithium, when taken by pregnant women is, is associated with Ebstein's Anomaly, which is a malformation in the heart. It has also been linked with muscle weakness and abnormal thyroid and kidney function in newborns.

Nursing mothers should also be aware that lithium in their system can be transferred into their breast milk.

Other potential and more common side effects include:

- Frequent urination
- Excessive thirst
- Weight gain
- Memory problems
- Hand tremors
- Diarrhea
- Hair loss
- Acne
- Water retention

These can often be managed by adjustments in dosage.

Availability

Lithium is commonly available under the names Eskalith or Lithobid. Other names include Duralith, Lithane, and Lithotabs.

It can be taken as a pill or liquid form.

Cognitive Behavioral Therapy

Cognitive-behavioral therapy, or CBT, is a type of psychotherapy that can be used to help manage bipolar disorder.

Psychotherapy involves either a one-on-one interaction with a therapist, or group sessions that involve the therapist and several people who have similar issues. Though there are many approaches, they all tend to involve helping patients get a handle on their thoughts, perceptions and behavior, and finding healthy ways to deal with their problems.

How Does Cognitive Behavioral Therapy Fit In

Usually, the core treatment for bipolar disorder is some combination of medication and psychotherapy. Cognitive-behavioral therapy is one of the more common types of psychotherapy that can be used.

The Mayo Clinic identifies a number of areas where CBT can be used. They include:

- Managing the symptoms of mental illnesses and preventing a relapse into those symptoms
- Learning effective coping techniques to help the patient control emotions and stress
- CBT can be used as an alternative treatment when medications are ineffective or not an option

How Does Cognitive Behavioral Therapy Work

In cognitive-behavioral therapy, the goal is to help patients gain a new outlook on their situation by directly challenging negative thoughts and fears the patient may have and teaching the patient to control or get rid of them.

The therapy is generally short-term and directly focused on eliminating or managing specific problems, and involves contributions from the therapist and the patient.

The Mayo Clinic said people taking part in CBT can generally expect to take these steps:

Determine the problem

This can be mental or physical illness, work or relationship stress, or anything else that is bothering the recipient of the therapy.

Examine the thoughts, behaviors and emotions associated with these problems

Once the problems the patient wants to work on are identified, her or she and the therapist begin looking at how the patient is reacting to those problems.

Spot negative or inaccurate thoughts, behaviors and emotions

There are a number of ways people can perceive or deal with an issue that just makes things worse – including negative thoughts about themselves or an undue focus on the negative aspects of a situation or occurrence.

Work to change the patient's reaction to personal issues

The therapist and the patient work to replace these negative portions of the patient's reaction with more positive and constructive ones, including positive thoughts about the patient's ability to cope, and attempting to view a situation more objectively.

Who Can Take Cognitive Behavioral Therapy

This talk therapy can be used in various situations for just about anybody.

Side Effects

There are no direct physical side effects to any psychotherapy, but anyone who decides to use it must be ready to have candid talks about their issues with a therapist or even a whole group of people. Depending upon the patient's experiences, this could be, at least some times, a difficult process.

Availability

Psychotherapy can be found in a number of settings, including hospitals and through private practices and cognitive behavioral therapy is one of the more common techniques. Many employers offer psychotherapy through their employee assistance programs.

Psychotherapy

Psychotherapy, often referred to as talk therapy, is a major component of treatment of bipolar disorder and other mental conditions. It can help people with bipolar disorder and their loved

ones in a number of ways, including learning more about the illness, gaining a deeper perspective on the condition's effect on the patient, as well as its effect on people close to the patient.

How Psychotherapy Fits In

Psychotherapy often plays an important role in the overall management of bipolar disorder. It is almost always used in conjunction with other therapies, including medication and lifestyle improvements, such as better diet and exercise.

How Psychotherapy Works

There are a number of different types of psychotherapy, each focused on a distinct area, but generally this method of treatment attempts to improve patients' understanding of their own situation, thoughts and behavior or their relationships with others.

This can be done one-on-one with a therapist or it can involve whole groups of people who have similar issues or conditions. Psychotherapy involves discussing these issues in either setting, and is normally the patient who does most of the talking.

Types of psychotherapy include:

- **Single:** This therapy involves a patient and therapist in a one-on-one private setting, often in the therapist's office.
- **Group:** Group therapy involves several people with similar conditions, or who are going through the same ordeal, such a loss of a loved one or divorce.
- **Couples:** Couples therapy involves a patient and his or her romantic partner. This therapy helps resolve issues in a relationship, or can help in a relationship where one person has bipolar disorder or some other mental illness.
- **Family:** Family therapy involves family members of someone with bipolar disorder or another condition. This type of therapy helps an entire family cope with an array of ordeals.

Who Can Benefit from Psychotherapy

Psychotherapy is widely used in a number of settings and can be used on people from a variety of age groups and backgrounds. Different types of psychotherapy are available to best suit a person's needs.

Side Effects of Psychotherapy

Though psychotherapy does not directly cause physical side effects, people who opt to use it will have to be prepared to discuss their issues—even ones that are painful—candidly with at least one other person, or possibly a whole group.

Availability

Psychotherapy is offered by a number of entities, including hospitals and private offices. It is not uncommon for it to be available to employees as part of a benefits package through their workplace. In this setting it is often known by the acronym EAP, which stands for employee assistance program.

Group Therapy

Group therapy is one of several forms of psychotherapy used in the treatment of bipolar disorder.

Psychotherapy can help not only bipolar people, but it can help their families and other loved ones better deal with bipolar disorder.

Psychotherapy can include getting educated about the disorder and what is needed to deal with it, learning how to better communicate with loved ones, and maintaining relationships despite the problems associated with bipolar disorder.

How Group Therapy Fits Into Your Treatment

Psychotherapy and medication are two of the core treatments for bipolar disorder and it is common for them to be used in conjunction.

A number of psychotherapies can be applied to managing the condition, and it is also not unusual for a number of different types of psychotherapy to be used simultaneously.

How Group Therapy Works

Group therapy usually puts people facing the same or similar issues together. This gives them the opportunity to gain perspective on their issue, learn new ways to cope with it and also improve their abilities to deal with other people by interacting with each other.

Group therapy also gives individuals a way to reassure themselves that they are not alone with their particular problem.

Who Can Take It

Group therapy is used in a variety of settings to help people with numerous types of problems such as coping with physical or mental conditions or overcoming addictions.

Side Effects

Psychotherapy does not have physical risks, but participants must ready themselves for the experience of talking through their problems with other people. This can mean just the therapist, but it could also mean doing so in front of relatives (family therapy) or even strangers (in group therapy).

Availability

Psychotherapy is readily available through hospitals, private practices and even through employee benefits packages.

Alternative Treatments for Bipolar Disorder

Alternative treatments for bipolar disorder focus on reducing depressive or manic symptoms and lowering stress to reduce the odds of triggering a new episode. As is the case with many alternative treatments for any disease or condition, opinions are often mixed as to the efficacy of some treatment methods, and research is often minimal in comparison to traditional medicine treatments.

However, many people have had success in using alternative treatments in the management of many diseases and conditions, including bipolar disorder. Before trying any alternative treatments, you should always check with your doctor to be sure that the methods are safe and right for you or your loved one.

Lifestyle Changes

Lifestyle changes can stop cycles of behavior that worsen bipolar disorder. Here are some steps that doctors and psychologists suggest.

Exercise Regularly

Moderate, regular exercise can help steady mood and alleviate depression, and it releases brain chemicals called endorphins that cause euphoric feelings and can help normalize sleep patterns.

Exercise is also good for the heart and can help maintain a healthy weight. This is especially important for people with bipolar disorder because they have a higher risk for heart disease, diabetes, and obesity.

Get Plenty of Sleep

Getting enough sleep can help stabilize mood and reduce irritability. If you have trouble sleeping, talk to your doctor about tips that can help.

Avoid Unhealthy Relationships

Sometimes family members, friends, or a therapist or counselor may point out that some of your relationships encourage unhealthy behaviors that can trigger depression or mania, worsen your bipolar disorder. Try to surround yourself with people who are positive influences.

Avoid Alcohol and Illegal Substances

Abuse of alcohol and other substances is common in people with bipolar disorder, but this increases the risk of depression or risk-taking behavior. If you are not able to quit on your own, seek help from a professional.

Eat Better

Consuming fatty fish may help reduce depression and improve brain function and behavior in people with bipolar disorder. Consuming fatty fish is also good for the heart, which is important because people with bipolar disorder are at greater risk of heart disease. The American Heart Association recommends eating fish like albacore tuna, herring, mackerel, salmon, and sardines at least two times a week. Doctors also recommend stopping caffeine, which can alter mood and disrupt sleep, and reducing intake of unhealthy fats, such as saturated and trans fats, because these have been linked to brain chemical imbalances.

Herbs and Supplements

Although these over-the-counter supplements have not been proven effective for treating bipolar disorder in clinical trials, there is some preliminary evidence that they may be helpful in stabilizing mood and relieving depressive symptoms.

Fish Oil

Because bipolar disorder appears to be less common in parts of the world where people regularly consume fish and fish oil, it is thought that fish oil may help improve brain function and

depression associated with bipolar disorder. However, these studies usually do not account for other environmental factors that may also lead to a change in the rate of bipolar disease in a community.

Fish oil is rich in omega-3 fatty acids, which have been found in small studies to reduce irritability and aggression and to maintain mood stability better than placebo in people with bipolar disorder. Beneficial doses range from 1 g to 9 g of fish oil. Studies have found that fish oil and omega-3 fatty acids can help reduce symptoms in people with depression, but more studies are needed to determine just how much they help in treating bipolar disorder. Furthermore, intake of even 1 gram of fish oil per day is nearly impossible in the modern American diet. Supplementation is required to consistently reach this level of intake.

St. John's Wort

Some studies suggest that this herb is helpful in alleviating symptoms of depression, but it has not yet been studied in people with bipolar disorder. However, published reports have documented cases of sudden onset of mania in bipolar patients who took St. John's Wort.

S-adenosyl-L-methionine (SAME)

This amino acid supplement appears to alleviate symptoms of depression, but it has not yet been researched specifically as a remedy for bipolar disorder. SAME has been shown to trigger mania in some people.

Mind-Body Techniques

Yoga, massage therapy, and acupuncture are all techniques that may relieve depression and mood swings associated with bipolar disorder, as well as reduce the anxiety and stress that can trigger bipolar disorder symptoms.

Supplements for Bipolar Disorder

The word supplement can cover a lot of products when it comes to the pills, tablets, and other substances marketed as dietary or health aids. It can refer to basic daily multivitamins and fish oil tablets, or it can refer to more exotic things like ginkgo and kava. Some of these supplements, such as daily multivitamins, can be useful for ensuring that someone is getting all of the nutrients they need on a given day, which is an important part of maintaining health.

Others, like St. John's Wort, kava, and ginkgo have been marketed as antidepressants. Still others are believed to help with the function of the brain and the nervous system.

How Supplements Fit Into Your Treatment

There is no real broad consensus as to the usefulness of supplements in the direct treatment of bipolar disorder. Some see them as an option, while others think them a waste of time and money.

For instance, while there is some evidence that St. John's Wort has some effect on minor or moderate depression, but there is little that supports its usefulness for major depression.

How Does It Work

Some supplements, like multivitamins and fish oil capsules, are meant to prevent deficiencies of certain substances in the body. There have been links made between mood swings and deficiencies in necessary substances like B vitamins.

Others are marketed as antidepressants or sleep aids, but there are mixed opinions as to their effectiveness and safety.

Who Can Take It

While there is little supporting evidence to prove the effectiveness of supplements in response to major medical conditions, it is important to discuss using them with your doctor.

Side Effects

Some supplements can interact with standard bipolar medications in various ways.

Too much of even something considered good for you—such as vitamins—can be toxic.

Two recent studies suggest that multivitamins and dietary supplements don't have health benefits, may cause harm, and may be considered a waste of money for people without a nutrient deficiency or chronic illness, according to reporting by the Wall Street Journal.

Depending on the supplement and how it interacts with the body, some supplements could worsen depression or mania symptoms.

Quality control in production can be an important point of consideration. Additionally, there are many supplements lacking a large body of evidence supporting their usefulness, which suggests there is a chance that they are ineffective.

Availability

Basics like multivitamin tablets and fish oil capsules are available at most stores, while other types of supplements mean a trip to natural food or health stores.

Module 2

Day to Day Living

How to Deal with Stress, Anxiety & Bipolar Disorder

Anxiety is one of many troubling symptoms of bipolar disorder.

The fluctuation in emotions of bipolar disorder can cause uneasiness and worry. Experiencing periods of depression and mania can cause anxiety because during both of these phases it is difficult to remain in control and find stability.

While not often studied together, a few studies have estimated that as many as 60 percent of people with bipolar disorder have an anxiety disorder. One study in 2004 showed that more than 30 percent of bipolar disorder patients experience panic attacks.

Stress and anxiety can further complicate bipolar symptoms, putting strain on already taxed emotions and mental state. Allowing stress to build can further create more anxiety, which can fuel both mania and depression.

Stress is oftentimes unavoidable. In today's society, you have to work, which is a huge source of anxiety, to make money (which causes more anxiety), but also takes away your time, preventing you from doing what you want.

Work, money, time, and relationships are some of the biggest stressors people face on a daily basis. While you can't eliminate stress and anxiety from your life, you can alter your reaction to stressful events.

Here are some ways to help prevent stress and anxiety in your life:

Use 'the Relaxation Response'

Dr. Jason Evan Mihalko, a certified psychologist working out of Harvard Square in Cambridge, Mass., said that stress is one of the most manageable things of all.

“Many people know about the fight or flight response—a biological response to stress where our bodies become prepared to either run to safety or fight. What many people don't know is that we have also designed an antidote to fight or flight: the relaxation response,” he said. “Through simple deep breathing exercises, visualizing a pleasant scene, or soothing ourselves through the five senses, we can induce this relaxation response.”

When we're able to relax, many things happen, Dr. Mihalko said, including decreased metabolism, slower heartbeat, relaxed muscles, slowed breathing, lowered blood pressure, increased levels of nitric oxide (an important chemical compound in protecting vital organs and *Science's* Molecule of the Year in 1992), and our general sense of well-being and calm increases.

Prioritize

It's human to feel overwhelmed when there are a million things to do at once—work, school, kids, marriage, friends, family, etc. can all lead to worry. Coupled with the unpredictable nature of bipolar disorder, anxiety can create havoc inside your mind.

The key to preventing stress and anxiety build up—with or without bipolar disorder—is determining which is the most important and what can be done first. We often lose focus of why we're doing so many things, so concentrating on what's most important can be an easy way to eliminate clutter in our lives.

It's important that your therapy for bipolar disorder remains a main priority. You may think you don't have time for it, but know that if you skip on treatment, you're only making things worse for yourself.

Lists are a great way to keep track of what you should be doing and what's the most important thing to do first. Lists are a great way of tackling some of the quick and easy things first, allowing you to cross tasks off your list and gaining a sense of accomplishment.

Here's an example of what a list might look like:

1. Take medications
2. Email boss about vacation
3. Pick up dry cleaning
4. Meet Shirley for lunch
5. Buy groceries

Limit Yourself

Even super heroes can't be everywhere at once. You can spend all day, every day attempting to do it all, but that won't leave you with enough time or energy to stop and enjoy life. Plus, the stress generated by attempting to do it all could only aggravate your mood.

You may want to work full-time, prepare a good dinner every night, volunteer with a local charity, organize events, and do more, but there's a good chance you'll only stress yourself out, lose sleep, lose your temper, and create more problems for yourself.

Instead of trying to do everything, focus your energy and attention on doing a few things well. If you can afford it, hire some help around the house to do a little cleaning and the laundry. If you can't afford it, ask everyone to help pitch in.

Think of your tasks as things you are buying with your time. You can try to buy a 120-bedroom house, but they're all going to get dirty and broken down without regular maintenance. Besides, you don't need all that space. You can afford (with your time) a nice two-bedroom house and make it the best one you've ever seen. In essence, don't buy more than you can maintain.

Break Away

No matter your responsibilities, you need time for yourself. You need time to be able to collect your head, think things through, or even let your mind wander. This is especially important if you're feeling manic and can't concentrate.

The occasional weekend getaway can do wonders, but even being left alone for a few minutes when you get home can clear your mind. Let people know you need a moment to unwind and clear your head before getting down to business.

Some easy ways to sneak a moment to yourself is going for a walk, reading in a quiet place, going to the park, or just laying down in bed for a minute. No matter how you want to escape, make sure you can when things get to be too much.

Find Support

Friends and family can be the best listeners. They can be your greatest ally against welling stress and anxiety when coupled with bipolar disorder. They also provide a more objective insight into your problems and can help you spot stressful patterns. If all else fails, they can help you get a good laugh in when you need it most.

Therapists are trained listeners, and there's no shame in seeing someone to help you talk through your problems. There are numerous types of therapy available, and the right one can help you express your emotions in a constructive way.

Take Care of Yourself

Mental health is directly related to physical health. Eating a balanced diet—void of sugary, deep fried, high fat, high sodium, and other harmful foods—can help your body get in shape to handle stress better. If your body is already under stress from harmful substances, it won't be as ready to handle outside stress as well.

Be wary of tobacco, alcohol, and drugs as a way to relax. They may take the edge off for the time being, but they'll only create more health problems down the road.

Learn which foods to eat (and avoid) to help your body deal with the stress of anxiety.

Sleep

Sleep is one of the first things to suffer under a busy, stressful schedule, but it should be the first thing that gets attention. We often skip sleep to tackle our to-do lists, but by doing that we're robbing our body of rest, which leaves it more vulnerable to stress, anxiety, and illness.

Exercise

If your mind won't rest when it's time to get some sleep, you should incorporate some exercise into your day. Even if you're snoring the second your head hits the pillow, exercise is a vital way to not only handle stress, but to keep your body in tune to accept any challenge.

Hitting the gym or going for a run after work is a great way to beat stress, as well as give you time to think. Start incorporating it into your routine and see how quickly you can become addicted to good habits.

Plan

There will always be unforeseen circumstances, but when you plan in advance, you'll know what's next and how to prepare for it. A day planner, smart phone, or email reminders are great ways to keep yourself accountable while giving your mind a second to concentrate on something other than what you're supposed to be doing next.

Anxiety: How to Clear Your Head When Worry Sets In

Stress is normal. In today's busy world, it's almost impossible to avoid it unless you plan on settling into a quiet bunker on the moon. Even then, there are plenty of things to worry about, like oxygen supply and how to air out the bathroom.

Anxiety is a natural reaction to stressful situations, but often anxiety of perceived things—whether or not they may happen—can make things even more difficult. When anxiety lingers, it can cloud even the simplest of experiences.

Dealing with stress in a healthy way is important. However, not everyone has yet learned ways to adequately deal with stress and anxiety, which can be especially overbearing with a condition such as bipolar disorder.

Dr. David M. Reiss, a psychiatrist in private practice and interim medical director of Providence Behavioral Health Hospital in Holyoke, Mass., said people with bipolar disorder are more vulnerable to any type of stress or anxiety, whether it be emotional, situational, practical, or physiological.

“The general advice for persons with bipolar is not very different than the advice I would give anyone (including those with no diagnosis), other than that persons who tend to become manic need to be careful in using some ‘stress-reduction’ techniques that may tend to push them into obsessional or manic states,” Dr. Reiss said. “Specifically, those people need to be careful to avoid obsessional exercise, long periods of meditation that could trigger cognitive disorganization, excessive fantasy, etc.”

Breathe

You've probably heard it before, but when things get hectic, it's important to breathe.

Stress and anxiety release a flood of hormones in the body, which increase heart rate and energy. These are helpful to propel your body away from a charging wildebeest, but unless that's the case, they'll cause unnecessary stress on your body.

Stopping what you're doing and taking calm, deep breaths is a natural way to signal to your body that you aren't in any immediate danger, slowing the flood of adrenaline and lowering your heart rate so you can think clearly.

Don't Deny What is Going On

"For minor anxiety, be careful not to fall into denial," Dr. Reiss said. "Do not try to medicate every minor mood change—that will cause more problems than it helps. Learn to differentiate between benign mood fluctuations and serious changes or 'warning signs.'"

Lean on Others

Dr. Reiss recommends that when anxiety is present, or you feel yourself stumbling, that is when it's most important to look for help. He recommends a psychiatrist who knows how to combine use of medication with non-medical interventions to help to determine if there needs to be a change in medication, or if other behavioral techniques may be sufficient.

"Of course, it is important to have a counselor/therapist or a peer mentor who can help to 'keep you honest'—supportively confront you if there are signs of either mania or depression," Dr. Reiss said. "Having trusted person(s) who can do this can relieve the fear and anxiety of falling into an affective episode, fear and anxiety that can be disruptive of happiness and stability and self-fulfilling."

It's important to remind yourself that it is not your friends' responsibility to keep you "up," but it is your responsibility to seek out connections with people to maintain stability and to enjoy yourself, Dr. Reiss said.

Also, it's important to note who you have a relationship with, from casual acquaintances, to casual friends, to close friends, to intimate relationships and family relationships.

"All of these types of relationships are important," Dr. Reiss said. "Try not to become dependent upon just a few people."

Keeping distance from persons who have bad habits or are a negative influence is also important, as your safety must come first.

"End any relationship that involves substance abuse, hostility, violence or severe incompatibility," Dr. Reiss said. "Relationship counseling may be helpful, but not every relationship *should* be maintained, and once a certain degree of trust is lost, it may be irretrievable."

Try to Be Objective

It can seem tough, especially during the height of anxiety, but you need to examine your fears as objectively as possible. If you take a moment—and some deep breaths—to take an objective look at what you're worried about, you can help control your anxiety by seeing it away from the emotional and mental turmoil of anxiety.

If you can objectively see your problems for what they are, you can begin to take immediate control of the situation, control your reaction to it, and begin to work on a solution.

Example:

You had a bad day at work and want your boyfriend or girlfriend to come over to make you feel better, but he or she is busy. You become upset at him or her and yell that he or she cares about your feelings.

The reality of the situation is that no one can drop everything for you, and your boyfriend or girlfriend wouldn't be with you if he or she didn't care about your feelings. It's unfortunate he or she isn't available immediately, but you can't always be available every second either.

Journal

Getting to know yourself is one of the best ways to help with your mental health. You can use a journal—which could be something as simple as a plain notebook or even a stack of napkins—as a means to vent your frustrations, stressors, anxieties, and more. Think of your journal as an objective, non-judgmental listener who is always ready to hear what you have to say so you can release your tension before it builds up.

There are no right and wrong ways to journal. Sometimes you may feel like jotting down the events of the day (*I had a good day at work and then I went to therapy...*) or you can use it for some serious venting (*I just don't get some people!*) Don't worry about spelling, punctuation, or anything else that might hold you back from writing. Your journal is private. It is yours.

But, if there's any one guideline that should be followed with journaling it's that you should avoid blaming anyone for your problems, including yourself. Express your emotions, but don't fall victim to attributing them to one thing.

Example: Today was a rough day. Things were going fine at work until I had my big project returned to me with corrections. I don't get it! Why do people have to be so nit-picky about everything? Can't they see I worked hard on it? What is their problem? I was upset about the corrections I had to make, but it's no big deal because outside of a few small details, everyone was happy with my work.

Meditate

Bipolar disorder does just as its name implies: it creates two kinds of disorders in the brain—mania and depression. The goal of any successful treatment is finding stabilization between the two, which is why lithium, a mood stabilizer, is one of the most popular pharmaceutical treatments available.

Meditation is like the mind's natural form of lithium (although it is no replacement for those prescribed any medication by a doctor)—it offers a mind a chance to calm itself while freeing it from the typical mental shackles of stress, anxiety, and worry.

Meditation doesn't mean shaving your head and wearing baggy pajamas everywhere. Meditation can be done in the comfort of your own home, without much fuss. To begin, all you need is a quiet, secluded space with something comfortable to sit on. You begin simply by breathing calmly and focusing on the breath entering and leaving your body. This exchange of oxygen and carbon dioxide is a symbolic way of how you are constantly affecting your environment.

There's more to the practice of meditation than just that, but those are the beginner's steps to clearing your mind and finding a better understanding of things.

Once you begin to explore the very nature of your existence and examine things at the basic level, you'll begin to have a better idea of the awe-inspiring beauty of this world.

Try to Get Your Mind Off of It

Lastly, Dr. Reiss recommends doing something safe and reasonable to comfort yourself: hobbies, exercise, entertainment, talking with friends, volunteer work, etc.

“Constantly worrying about your mood is the surest way to have a lousy mood,” he said.

Finding a Way to Crawl Out of Depression

The ebb and flow of bipolar disorder can create a challenging facet of life. While the manic highs feel invigorating, the depressive lows can be so debilitating that it can seem difficult to drag yourself out of bed.

Part of effectively managing your bipolar disorder is being able to continue on living your life as you see fit, through the highs and the lows. Here are some ways to help you through depression:

The PLEASE Method

Dr. Jason Evan Mihalko, Psy.D., a licensed psychologist in Cambridge, Mass., said during times of depression it's helpful to work towards reducing your emotional vulnerability.

“There are a variety of things someone can do,” he said.

Some of these things are easily remembered with the acronym PLEASE:

- treat **P**hysical **i**llness (take medicine as prescribed, manage colds, aches, and pains as recommended by a doctor, etc.).
- **E**at three meals a day.
- **A**void mood-altering substances (obviously, of course, taking medication as prescribed).
- Get enough **S**leep each and every night, and try to get on a regular sleep schedule.
- **E**xercise at least 20 minutes a day.

“These simple things won't undo depression, but it can help reduce emotional vulnerability so the depression doesn't get worse,” Dr. Mihalko said.

Do the Opposite

Dr. Mihalko said sometimes the best intervention is doing the opposite to what the current emotion is, no matter how difficult it might be. For example, getting up out of bed and showering first thing in the morning can be a start at building a new outlook for the day, he said.

“Sometimes when we engage in an activity when we are depressed we can move our energy to a new place—and if not, than we can at least manage not make things worse,” Dr. Mihalko said. “In terms of balance, I think cultivating a sense of radical acceptance from moment to moment is important: a depressed mood doesn't last forever (even though it might seem it will).”

Think Objectively

Bipolar disorder is a difficult disorder because the emotional turmoil can interfere with your life. That emotional clouding can make it difficult to see things how they really are, and trap you in a cycle of responding to things based on your current mood.

When depression sinks in, it can seem challenging to look beyond your current situation and see a way out.

One technique to eliminating an unnecessary emotional response is to step back from your situation and view it objectively. This may take a few breaths, but the more objectivity you can put into your situation, the easier it can feel to see a way out.

Giving your current situation an objective eye can help you identify if you're overreacting, under-reacting, or simply not reacting at all.

For example, if you're upset about something someone did or did not do, consider that they may have done it by accident. With most people, there is often little malice in action, but there is often ignorance. Basically, if someone is upsetting you, they often don't realize it.

If it is related to your job, realizing that you need your job helps you afford to do the things you enjoy.

Make a List

Depression can make anything seem difficult, but lengthy periods can rob you of motivation and cause setbacks in your goals. The key is to stay focused, even through depression.

Write down what is important to you and what you must do to maintain it. Don't list every single thing as your list may become too daunting, but listing the general idea and purpose could help. The most important thing is to list why it is important.

For example, you could write:

- Taking care of my family—I love them and they depend on me.
- Doing well at work—I enjoy what I do and it gives me a sense of purpose.
- Volunteering—I am fortunate, so I should give back.

Let the list serve as a reminder of what you have, and how important it is to continually care for it.

Exercise

Depression comes with an array of symptoms, including fatigue, irritability, sleep problems, and body pains. While these symptoms only further your desire to stay in bed or do little, this is the most important time to get moving.

“Do something each and every day that makes you feel confident and competent (taking a walk, reading the paper, knitting, 10 minutes of a crossword puzzle, etc.),” Dr. Mihalko said.

Exercise is often the first course of treatment a doctor advises for the treatment of depression, and people with bipolar disorder should do the same, especially during times of depression.

Finding an exercise you thoroughly enjoy is the best way to not only lighten your mood, but also accelerates the production of dopamine, adrenaline, and other feel-good chemicals in your brain.

You don't have to get out of bed and start a marathon. Walking with a friend, or even a stroll through your neighborhood, is a great way to start.

Meditate

You can't control many things in the world, but you can control your reaction to it.

The goal of meditation isn't to solve your problems, but rather to accept the realities of life and appreciate the experience of it by understanding it.

Meditation doesn't have to be a standardized process. It can be as simple as sitting in a quiet room with your eyes closed while listening to the faint sounds around you. It gives you the chance to stop projecting out into the world and having a moment to absorb the world around you.

If you want to explore easy ways to meditate, we suggest reading Ven. Henepola Gunaratana's *Mindfulness in Plain English*. You can read it for free [here](#).

If You Feel Suicidal

Suicidal thoughts and ideas are serious and should not be dismissed. Even if you are merely entertaining the idea, you should talk to someone you trust about getting help.

These feelings are serious and should be evaluated by a trained mental health professional

Wrestling Mania: Keeping It in Control & Getting Things Done

There's something about mania that makes the depression part of bipolar disorder. You begin to regain your energy and before you know it, you never want to sit still. You want to go, go, go, straight until dawn because you feel invincible, like there's nothing that can stop you because you...

You get the point.

Mania, while highly energizing, is also the point where you can spend vast sums of money you don't have, skip sleep or work to do something more active, or engage in risky behavior that you normally wouldn't.

"Be aware that in a manic stage, the first thing that suffers is judgment," said Dr. David M. Reiss, a psychiatrist in private practice and interim medical director of Providence Behavioral Health Hospital in Holyoke, Mass.

While medications, therapy, and other treatments can help stabilize your moods, you can teach yourself to use your mania to your advantage.

Stick to Your Plan

Jason Evan Mihalko, Psy.D., a licensed psychologist working out of Harvard Square in Cambridge, Mass., said it's important to have a plan before a manic episode happens.

"Having close relationships with friends or family help a person with bipolar disorder have an extra set of eyes on them—these close relationships can give feedback to a person if there are concerning behaviors," Dr. Mihalko said. "Living life on a budget day-to-day helps set a norm of how money is spent and managed. This provides a person to have a chance of noticing if the way they manage their money has changed."

Keep Your Wallet Light

Dr. Mihalko said sometimes it's useful to take a harm-reduction approach, like having a way to minimize the potential for harm.

"Examples of this might be having very low credit limits on credit cards, not having credit cards, and having a small sum of cash readily available and the majority of funds in bank accounts that are more difficult to access," he said.

If you set up restrictions such as an account with no ATM or debit card, or an account at an online bank that takes 2-3 days to transfer funds into an account that can be drawn upon, etc., it will force you to wait through a manic period before you can spend everything you have.

Get Artistic

No one knows for sure if creative types are prone to bipolar disorder or if people with bipolar disorder are drawn to the arts, but there is a strong link.

Great artistic minds such as literary greats Ernest Hemingway, Edgar Allen Poe, and Jack London, and artists Edvard Much, Jackson Pollack, and Vincent Van Gogh all displayed behavior typical of bipolar disorder.

These men used their mania to fuel their artistic fire, spending long hours at their craft to change the landscape of their generations and those beyond their years.

Don't worry if you can't slather *The Scream* onto a canvas, or bang out the next *Farewell to Arms* in a weekend. The goal of using art during mania is to create something instead of absentmindedly destroying something during mania.

"The key is to have a good sense beforehand of what behaviors or tasks you can take on while hypomanic that will not be disruptive, i.e., stay away from any tasks involving money, making significant decisions, involving interpersonal relationships, etc.," Dr. Reiss said. "Other tasks, like writing, art work, hobbies, basic paperwork, can be good outlets. But still be careful to be sure you don't get obsessively involved to the exclusion of necessary tasks and behaviors."

Exercise

Your mind feels like it's going a mile a minute, so that would be a good time to train your body to do the same. All the extra energy of mania is best put to use physically.

No matter what exercise you enjoy—walking, running, biking, hiking, or dog sled racing—use your mania to shed a few pounds, get around town, or practice for an Ironman.

Also, getting into a regular exercise routine does wonders for your health, especially for preventing depression symptoms and helping to beat stress.

Learn Something New

Do you know how to speak Cantonese? How about Portuguese? Or maybe wood-working, coffee roasting, or beer making?

Using your extra energy to learn a new skill is a healthy, productive way to capitalize on your mania.

To start, just sign up for a class or start watching endless free videos on the internet.

When you're done, there will be so much more that you know how to do. After enough manic episodes, you could be a genius, or at least a real life MacGyver.

Clean, Fix, & Repair

If your honey-do list doesn't exist, make one for yourself. Fix that squeaky porch door. Clean the cobwebs from the ceiling corners. Fix the shelf in the kitchen.

While doing this doesn't sound as fun as say, skydiving, it's a lot safer and a much better decision to make, and you'll have a much nicer, cleaner living space when you're done.

Stay True to Yourself

Mania may bring delusions of grandeur into your mind, or make you feel invincible, but you need to remind yourself of who you are during your mania. As much as you feel like it, you're not a superhero. You are human today just as you were yesterday. You have things you love in your life that need attention and forsaking them during your mania only hurts it.

Even if you need to get them tattooed across your forearms, your goals, ambitions, and hard work shouldn't be erased by the frantic, fleeting desires of mania. As you already know, the feelings won't last but the repercussions just may.

One Last Thing

No matter how great you feel during mania, remember that it won't last. You'll fluctuate back to normal, and possibly back into depression. Never neglect your treatment during mania, no matter how tempting it is.

Mania is temporary, but its effects may not be.

In Their Shoes: Understanding What BD Feels Like

Bipolar disorder is a confusing condition, especially for someone viewing it from the outside.

Mania

The mania part is awesome. I have tons of energy and don't want to stop.

The best part of mania is that I'm so optimistic about everything. You could crash a car through my house and I'd reply, "What a great time to build something new!" I'm my most creative during this process, so I'm doing as much as possible to capitalize on it. Artistic or constructive, I'm up for anything.

I have the most fun running around and entertaining people, making them laugh, and acting like a big clown. I get a lot of satisfaction from the laughs and smiles I can get out of people. It makes me feel invincible.

Every morning I wake up ready to go, even if I didn't get much sleep the night before. I don't really need that much sleep, so I just go and go and do so much. I see all of my friends, have a blast, get everything done on my to-do list, and more.

And do I talk. I'm all over the place, dominating every conversation. I've been told I talk too fast and switch topics so quickly that it's hard for others to keep up with me. Sometimes, I can't keep up with myself.

Unfortunately, this is when I go out more, spend all of my money, and drink too much. I've been in a few fistfights during my mania, but it's not because I was really angry. Getting into a fight at a bar with some dude twice my size is exhilarating. I know it's destructive, but it's the greatest form of entertainment because it's raw, tough, and totally dangerous. I've yet to be seriously hurt in one of these fights, so I keep escalating each time. It's like a game to me.

An upside to the mania is that my sex drive goes haywire. I crave a lot more sex during this period and sometimes it's a bit much for my girlfriend.

During my mania, I feel like a god. I feel like I can do anything, so my self-worth skyrockets.

I can't explain it, but when the mania burns out, I've got nothing left.

Without the highs of mania, I wouldn't be able to tolerate the lows of depression.

Depression

When I'm depressed, I want to be left alone. It's not that I want to be by myself, I want everyone to disappear. I don't want to go anywhere, see anyone, or do anything. It's like no matter what I do, people are telling me I'm doing something wrong, so the easiest way to feel better is to hide.

Seeing all those people, carrying on, living their happy little lives is an annoying reminder of my bipolar disorder and how I'll never have that kind of stability. What's worse is all the people I "entertain" while in my mania talk about how quiet I am and that I'm not entertaining. Do they try to cheer me up, or do something to make me laugh? No. They just want their clown back. It's annoying.

No matter what it is—work, hanging out with friends, exercise, etc.—I don't enjoy things because the smallest details annoy me. If friends invite me out, I imagine waiting for the bus, being cramped against angry people, waiting in lines, and all the other negative things. I think of every possible downside of something, which leaves me dreading the idea of doing anything.

I turn into this grumpy old man. I've contemplated suicide and have attempted it once before, but the more I understand the problem, the more I know that the depression is temporary and I don't always think clearly during it. That self-reminder helps me from doing anything stupid.

When I think about the future, I don't like what I see. I can only envision more troubles, endless work, and an endless string of letdowns.

The Middle

This is what I imagine it's like for everyone else, you know, normal people. I wake up in the morning and I feel fine. I don't dread going about my day. I go to work, get things done, and have plenty of energy throughout the day.

I can roll with the punches the average day gives me. I'm not freaking out over small problems, I enjoy the little things, and I'm not loathing the future.

I feel normal and it's how I see myself. I'm not some lunatic running around or some mopey, lazy slug.

I honestly wish I could stay in this mindset all of the time, but I know that won't happen. I've accepted that my moods will change on their own, so I enjoy the calm more when it's there.

Foods That Calm Your Mind

What to Eat During Mania

While many people with bipolar disorder love the manic side of it, there are times when it can get out of control. Thankfully, there are some foods you can eat to help keep yourself in control when things feel like they're getting out of hand.

These foods may help to relieve stress and improve the effectiveness of your medication.

Berries

Berries such as blueberries, raspberries, and strawberries all contain natural antioxidants and vitamin C. Combined, they all prevent a jump in cortisol, a steroid hormone in the body produced by the adrenal gland. These great little snacks can help if you're already feeling wound up.

Green, Leafy Veggies

Green vegetables are chock full of all sorts of good stuff, namely thiamin, folate, and other B vitamins, natural stress busters that can help calm your mind during mania. If your mania is getting out of hand, stock up on a salad full of leafy spinach, asparagus, broccoli, and other goods.

Fish

When stress and mania hit, you could use some omega-3 fatty acids. These powerful enzymes do all sorts of good for your body, including aiding the neurotransmitters in your brain so it can communicate with itself peacefully. Salmon is a great source of omega-3s, along with tuna, mackerel, herring, trout, halibut, and sardines.

Dairy Products

Milk, and dairy-based foods like cheese and yogurt, contain a good amount of riboflavin, a handy B vitamin that can help settle you down. Dairy also contains whey protein, which has been found to boost tryptophan, an important component in your brain's feel-good chemistry.

Apples, Oranges & Bananas

These three fruits do all sorts of wonders for your body: They include the cleansing fiber, muscle-relaxing potassium, and powerful levels of vitamin C. Even the slow process of peeling an orange can force you to slow down for a few minutes, which may be just as effective as the citrus fruit itself.

Herbal Tea

There are lots of calming teas on the market that can help settle your worried, anxious, or wild mind. Chamomile tea is a popular choice, especially if you're having trouble sleeping at night. In addition, adding a splash of milk to tea can aid in its calming effects.

Dark Chocolate

Chocolate is a great comfort food. But instead of chomping away at a bar of milk chocolate, go for the purest dark chocolate you can find. Just like berries, dark chocolate can lower levels of cortisol, as well as the harmful norepinephrine and epinephrine that can make a person feel nervous and anxious. It also ups the calming chemicals in the brain to make you feel better.

Foods to Avoid

When you're feeling a bit wired, avoid foods containing caffeine, alcohol, sugars, and processed ingredients. These can all contribute to a rise in stress hormones that can take your mania to places you'd rather not go. Stick with natural, fresh ingredients when you can and you'll be feeling better overall.

Module 3

Caring for the Mind



Caregivers: Caring For Yourself

Caring for someone else is a noble and worthwhile cause. Your care makes someone else's life better, and creates a dramatic impact in his or her life that can never fully be understood.

With a condition as complicated as bipolar disorder, your care reaps tremendous benefits for everyone. It also can be a daunting and tiring task. The day-to-day tasks and the fluctuations of mood can wear even the toughest person down.

Long-term caregiving can cause personal, emotional, and physical strain on your life and loss of personal freedom, according to the results of a 2003 study involving people who care for people with mental disorders.

So how do you cope? To continue to provide the best care for someone with bipolar disorder, it's important to take good care of yourself.

Here are some coping tips, so you can properly care for yourself while you're caring for someone with bipolar disorder.

Take Time for Yourself

All of the time you spend caring for someone with bipolar is well spent, but don't forget to spend time with yourself doing what you love. Caregiving can be time-consuming, but part of coping is scheduling in personal time to do things you need to do for yourself, whether that be tending to personal affairs, or simply having a few moments to yourself to clear your head.

Keep In Touch With Your Friends

Studies show that caregivers often feel isolated, experience a lack of support from family and friends, and feel restricted from pursuing their own activities.

With email, Facebook, Twitter, texts, and cell phones, there are nearly endless ways to stay in contact with your friends.

Instead of spending even more time in front of a computer, use that technology to arrange a meeting with your friends. Get together over coffee, take the dogs to the park, or even drop by just to say hello. Friends can offer you support, or at least let you escape the chores of caregiving for a little while.

Keep Up Your Own Interests

Your hobbies and passion say a lot about you, and help to relieve stress.

Remaining active in your hobbies, no matter what they are, can help you maintain your personal identity, instead of being lost simply as a caregiver to a person with bipolar disorder.

Even reserving a few hours a week to do what you love—from crocheting hats with fake beards to nude mountain climbing—is great for coping. It can help you feel connected to your own life and identity while still being able to care for your loved one.

Mind Your Own Health

This is more important than you think. If you're sick, or generally feeling low, keeping up with your health will give you enough energy to give the best care you can, while still having enough left over at the end of the day.

Exercising, eating right, and getting enough sleep are great coping mechanisms for anyone, but even more so for those who have to take care of themselves and someone with bipolar disorder.

Relax When You Can

The occasional pampering with a massage (or a pedicure) or any other relaxing tradition can be helpful in coping during crazier times. Even locking yourself in the bathroom with a bath and a book could help.

If you need to, tell the person you're caring for about how important your personal time is to you and request 10 to 30 minutes to yourself, especially when you get home from work. This will give you a chance to tend to things you need to get done without being subjected to a barrage of inquiries or other things.

Embrace the quiet, relaxing times and you'll be able to handle a little bit more without losing your cool.

Get Away

When you really—*really*—need some time to yourself, plan a vacation alone. This doesn't have to be a two-week stay in Hawaii, but it does mean it should be a long enough time to devote to

yourself. This can be something as simple as a few days away on a road trip to a scenic spot, or even a “stay caution” at a hotel or spa in your local area.

These breaks can be important not just for yourself, but also for the person you are caring for. But be careful: you don’t want to leave the person you are caring for if he or she is in the middle of a manic or depressive episode. That is when they could use you the most.

Dealing With Uncertainty of Bipolar Disorder

Uncertainty is a certainty with bipolar disorder. That is a fact. It can be an exciting part about being around someone with bipolar disorder, but it also can be disruptive and sometimes inappropriate.

Dealing with the uncertainty of bipolar disorder in any kind of relationship takes a bit of finesse and common language. Whether romantic or caregiver, a relationship requires reaching a middle ground on many issues. Here are some tips on finding that ground with someone with bipolar disorder.

Using a ‘Safe Word’

During less hectic times, you should both agree on a word to let the person know his or her actions are getting out of control. This word should be a signal during mania or other periods to notify the person about his or her behavior without publically embarrassing them. Said calmly, it can be an effective tool in controlling a possible sticky situation.

Your safe word can be something silly, or serious, but that’s up to you and the person with bipolar disorder. It should, however, be a word you wouldn’t normally use in daily conversation, so no one gets confused.

Sometimes the sillier the word or phrase, the easier it is to inject a little humor into the situation. Here are some examples you may consider for your bipolar safe word to calm things down when they get hectic:

- Chihuahua
- Soy latte
- Rollerblade
- Then again, the word “stop” is usually pretty effective.

Use the Energy

Mania can be a troubling time, especially if you need the person with bipolar disorder to sit still for more than 10 minutes. It's a hard feeling for anyone to control, but done right, that extra energy can be put to better use than, say, endless chattering when it's time to be quiet.

These activities can help keep a person focused and possibly get some things done on the to-do list. Oftentimes, people find booking a full schedule of things to do helps to guide them through mania and puts their energy to good use.

For example, if you have a dinner party at night, a day of exercise and activity can help the person with bipolar disorder burn off the extra energy so it's easier for him or her to act accordingly during a civil affair.

Keep Them Accountable

One of the hardest parts of caring or living with someone who is bipolar is dealing with the changes, especially when promises made are not promises kept. While it may be frustrating, you can help keep them accountable for when they say one thing and do another.

If your partner is habitually making promises and not keeping them, calling him or her out on these broken promises can help keep him or her accountable. It's also imperative to inform your loved one of how those broken promises jeopardize your relationship because it institutes a lack of trust.

While some spontaneous activity can add spice to a relationship, erratic and irresponsible behavior can severely jeopardize it.

Install Some Safeguards

This can be hardest while the person is under mania and is going on a rampant spending spree, even if they do not have the funds to support it. If you two share an account, protect the person from going too far by putting limits on the account, or stashing money away in another account. They may accuse you of being deceitful, but you'll know your actions are to protect everyone.

Be Understanding

A person with bipolar disorder will often have grand ideas during mania and may want to be by him- or herself during periods of depression. It can be difficult to not take any of it personally, but understand that the person isn't acting out of malice.

This doesn't mean giving him or her free reign to do as he or she sees fit, but it does mean keeping an open mind.

Don't Be Afraid to Laugh

Yes, things can get crazy, hectic, or downright near insane. However, that might be something worth relaxing about and having a laugh. The more you can laugh off the small things—like a person being a few minutes late or getting behind on laundry—the less they'll build up to bigger problems.

Caregivers: How to Help Someone with Bipolar Disorder

A person suffering from bipolar disorder has their own obstacles to handle, but caring for someone who is bipolar also has its own challenges. Whether you live together or are on the other side of the planet, there are steps everyone can take to help someone who is living with bipolar disorder.

Educate Yourself

Your loved one will surely tell you about his or her condition, but the more you can educate yourself with medically-reviewed information, the better you can understand what that person is going through, as well as what trouble signs to be on the lookout for.

Listen

This is one of the most important and helpful things you can do for someone with bipolar disorder. You don't have to offer advice or solutions to problems—acceptance and understanding is oftentimes more effective.

Be a Champion

During certain stages of bipolar disorder, it can feel like the world is against that person, so letting the person know you are on his or her side is amazingly reassuring. This could even be assuring the person that you promise to always keep his or her best interests at heart.

As bipolar disorder often carries feelings of hopelessness and worthlessness, simply affirming their strengths and positive qualities goes a long way.

Be Active in Treatment

Part of supporting someone with bipolar disorder is being there for important events. You won't be going to individual therapy sessions, but there will be times when you can accompany your friend or loved one to important doctor's appointments and treatment sessions. Some of these appointments can be complicated or intimidating, so being there can help take some of the burden off of the person seeking treatment.

Make a Plan

The symptoms of bipolar disorder can sometimes be unpredictable, so it's best to have a plan in place should you need it. This could be what to do if the person is feeling suicidal, if he or she gets out of control during a manic episode, or even something as simple as splitting up daily chores and duties. You should make these plans when a person is in a calm, logical state of mind, and both pledge to adhere to the plans.

Support, Don't Push

No matter how good your intentions may be, sometimes a person needs to come to conclusions or learn lessons on his or her own. While you may feel like your advice should be heeded, you need to keep in mind that your job is to support the person with bipolar disorder, not save him or her.

Be Understanding

Any mental condition, especially bipolar disorder, can be difficult to understand, especially for the person going through it. He or she may switch moods several times a day and won't have an explanation for how he or she feels. While difficult for everyone, keep in mind the person isn't doing it on purpose to be spiteful. The more compassion and understanding you can offer your loved one, the more positive your influence will be.

Don't Neglect Yourself

When you're caring for someone else, you still need to care for yourself. Besides making sure all of your personal affairs are tended to, you need to go out and do the things you want to do. Also, make sure to take care of yourself with good nutrition and regular exercise. The better you take care of yourself, the better you can take care of your loved one.

Be Patient & Remain Optimistic

Unfortunately, there's no one thing to say or do to make everything better. Treating and overcoming bipolar disorder takes time, so while the end may not be immediately in sight, the journey is an important one. Patience and optimism can help smooth the road everyone goes down.

Know When It's Too Much

There's only so much one person can handle, so it's important to know when it's time to ask for help. If the person you're caring for uses guilt trips or other games, becomes verbally or physically abusive, or becomes too much for you to handle, it's time to get other people involved.

Doctor's Advice

Jason Evan Mihalko, Psy.D, a licensed psychologist from Cambridge, Mass., offers these suggestions for building a relationship with your friend or family member with bipolar disorder:

- Ask them what helps
- Ask them what doesn't help
- Ask them to show you what their warning signs are for when they are heading off the rails
- Ask them for ideas of what are helpful ways to get back on the path when they've gone off the rails.

"I think we spend too much time fragelizing people with bipolar disorder," Mihalko said.

Despair, Guilt, & Remorse: How to Stay Away From Self-Blame

Guilt is our conscience telling us we've done something wrong. It's a handy tool to keep us accountable for what we do, yet for some people their conscience blows things out of proportion and overruns their minds with despair, guilt, and remorse.

Guilt is a common symptom of bipolar disorder. Often, patients replay things in their heads repeatedly and question themselves. They feel that because of their condition they are doing something wrong.

If you have bipolar disorder, you're probably familiar with feelings of guilt. You may feel like you're not doing enough good, or that everything you do isn't good enough. You may feel obligated to satisfy others, which makes you agree to do whatever people ask of you because you want to please people. You never say "no" to other people's requests, especially for work, which keeps you busy nearly all of the time.

Guilt & Self-Esteem

Real or perceived, guilt is a debilitating part of bipolar disorder because the mind starts to sabotage itself with negative, dark, and hopeless thoughts. You can feel stuck in a loop of negativity as the mind rehashes, repeatedly on end, about even the smallest situation like a nagging voice inside of you.

No matter how hard you try to fight it, your body language gives away the nervousness of the real or perceived guilt. Both the manic and depressive states of bipolar disorder can have effects on self-esteem: the depressive state carrying low self-esteem and the manic stages carrying elevated self-esteem.

In essence, low self-esteem is the feeling that you're not good enough, worthy of love, or can't meet people's expectations. None of that is actually true, but negative emotions get in the way of reality.

Unfortunately, there is no quick trick that will instantly remove despair, guilt, and remorse from your mind. It takes practice, determination, and drive. You have all of that, and you know it.

First off, there's nothing wrong with you. You're not crazy. You're not a freak. You have a condition that's not your fault.

Most importantly, you're not alone. About 8 million Americans have bipolar disorder, and around 83 percent of those cases are classified as "severe," according to the National Institute of Mental Health.

Helping Your Condition

Self-confidence can be a vital tool for people with bipolar disorder. It can help prevent self-blame and install a sense of duty to yourself and others.

Here are some things you can do to boost your self-esteem:

Get to Know Yourself

You should take some time to get to know yourself. This could include paying close attention to your thoughts and reactions, keeping a journal, or simply giving yourself a few minutes at the end of the day to reflect.

This is important for both manic and depressive points in mania. Pay attention to not only what you feel, but when the emotion started. These kinds of things may be helpful to bring up with your therapist.

Meditation is a great form of self-exploration. Regular meditation can help you better understand your surroundings and calm a frantic mind. While meditation won't change the world, it can change how you perceive it and react to it.

Give

Sometimes if you can't make yourself happy, doing something for someone else is a good way to get started on feeling better. Donating your time with a local charity helps improve your community and can help boost your self-esteem.

Charity and non-profit groups are always looking for help. Even if you only want to agree to a one-time event to start, food pantries usually need help stocking and sorting, as well as local libraries. Feel free to try different organizations and events to see what you like.

It doesn't have to be a formal process. Even something as simple as offering to mow your neighbor's yard, or picking up garbage while you go for a walk can go a long way. The exercise will also benefit you as well.

Work on It

If there's something about yourself that you really don't like, work on changing it.

Attempting to change the way you perceive things—especially with a complicated condition like bipolar disorder—is difficult. Before you even begin, know that making changes to any part of your life won't happen immediately. It takes work, but it's worth it:

For example, if you think people are only saying negative things about you, pay closer attention to what they are saying. There's a good chance you're skipping over the good things and only focusing on the negative.

Slow Down

You may think that you have to do a million things a day to feel better and get things done, but when you're rushing through things without giving yourself enough time to think, chances are you're going to make mistakes.

This is especially true during the manic stages, but can also become apparent during depression if you're attempting to stay busy to avoid dealing with your feelings. Even if it is difficult, keeping a pace that you can keep up with can really help with the difficulties of bipolar disorder.

Make Lists

Forgetting things can be frustrating, as well as a quick path to blowing things out of proportion. Everyone forgets things, but if you do it enough you could slip into guilt. That's why it's important to write things down.

Lists are also great ways to show yourself how much you're getting done.

Put small things on the list, like laundry or doing the dishes. You do them normally without writing them down, but crossing anything off a to-do list is satisfying. The more small things you can get done, the more accomplished you'll feel.

Learn Something New

If you doubt how smart you are, get smarter. Learning something new—like a language, a new hobby, or a craft—can boost your self-esteem. You must promise yourself that you'll have fun with it or you'll get stuck into a deeper rut of self-loathing.

A new hobby can be a good place to put your manic energy and it could be something to invigorate you t

hrough a depresssive state.

Practice

No matter what you're trying to do or change, it's going to take practice. Go easy on yourself, learn from your mistakes, and move on.

If you choose to learn something new, the practice should be part of the fun. Try not to allow yourself to become discouraged as you learn new things.

Celebrate Small Things

As you're working through your personal changes, don't forget to stop and celebrate the little victories. This can be something small like the first time you notice you didn't overreact to a situation or you haven't missed a workout in a few weeks. After all, a victory is a victory.

Calibrating Seriousness

When you're caring for someone with bipolar disorder, there are going to be some unpredictable moments.

The depression side of bipolar disorder can take a person to dark, lonely places. These can lead to isolation as one goes through feelings of despair, guilt, remorse, and low self-esteem. These, if left untreated, could lead to thoughts or ideas of suicide. In the worst case scenario, a person could attempt suicide.

On the other hand, during mania people will typically feel good. So good, in fact, they often feel invincible. This can lead to risky behavior, including, but not limited to: increased alcohol or drug use, promiscuity, or engaging in other dangerous activity.

While you don't want to overreact at every minor event, the duty of a caregiver is to protect a person from possibly harming themselves if their behavior is getting out of control.

Here are warning signs of some risqué behavior that you should be aware of:

Depression

Men and women often manifest depression differently. Women typically express their depression by:

- Feeling guilty, sad, or helpless
- Sleeping more
- Eating more and gaining weight

Men, however, are more likely to express their symptoms of depression by:

- Using drugs or alcohol
- Acting irritated or angry
- Eat less and lose weight

Women may attempt suicide, but unlike men, they are often unsuccessful. However, any attempt at taking one's life should be taken very seriously by contacting a mental health professional immediately so that the person can get the help they need.

While a person may talk about suicide, threats or detailed, specific plans should be dealt with immediately, which may include having the person hospitalized.

Mania

Mania brings with it certain type of challenges, most of which revolve around erratic behavior.

This doesn't mean that excessive talking or running around a lot is a bad thing, but you should pay attention to drinking, drug use, promiscuity, and more. As these periods have the potential to wear away trust between someone who is bipolar and his or her caregiver, here are some signs where someone's mania could put him or her in danger; or pose threats to others:

- Aggressive behavior
- Staying out late
- Shoddy explanations of actions
- Becomes easily defensive
- Dramatic weight loss
- Unexplained injuries
-

Some of these show signs of extreme distress, but your watchful eye can help the person you're caring for from losing control to their condition and potentially harmful behavior.

Paying close attention to your loved one's behaviors during mania could prevent causing harm physically, emotionally, professional, or romantically while mania sweeps over a person.

How to Be Affirmative Without Being Bossy

Trying to keep a person on task during erratic mood swings may feel like attempting to herd cats, but it's a necessary part of caring for someone with bipolar disorder.

This takes a particular amount of mental stamina, especially when it comes to caring for someone with an unpredictable mental condition.

As a caregiver, you'll most likely have to remind your loved one to take medication and other daily tasks. You'll have to tell him or her to calm down or cheer up. You'll have to deal with telling the person what to do more often than you would like.

Here are some tips on getting a point across to someone with bipolar disorder (or anyone for that matter) without coming off as bossy.

Compliment While Correcting

If you're always criticizing a person, they'll start to think that they don't do anything right. The important part of helping people improve themselves is affirm positive behavior while trying to curb negative behavior.

Try to avoid using "I love you, but..." because that "but" almost negates the positive emotion. Keep the criticism and compliments in separate sentences, but make sure if there's some negative that there's plenty of positives.

Constructive criticism—the kind centered on helping the person with their problems—will always be more powerful than making someone feel bad, wrong, or little.

Do Not Expect Perfection

No human will ever be perfect, even without bipolar disorder. Everyone faces challenges in his or her life and will falter at some point.

If you expect someone to be perfect, they will always fail to live up to your expectations. The same goes if you expect yourself to be perfect.

Bipolar disorder increases a person's likelihood to make mistakes, especially during the wild points of mania. The more you can accept that your loved one will make mistakes, the easier it will be on everyone.

Remain Patient

This is far beyond the strongest point that needs to be emphasized. Patience is key when helping someone cope with any major problem, especially bipolar disorder.

Frustration is a normal part of life. Just as you can't expect your loved one to be perfect, you shouldn't expect the same from yourself.

While you might become frustrated with the person you are caring for at times, patience is key in helping maintain long-term positive impact on a person's life.

If you feel like you're about to lose your cool, step back from the situation and give yourself a chance to calm down.

Reach a Consensus

You can try to tell someone what to do until you're blue in the face, but that won't get much done if the person is in a mood to stand his or her ground or be defiant.

There needs to be some give-and-take when it comes to everything, from deciding who has to do the dishes to when it is acceptable to act out.

The more you make decision making a back-and-forth system, the more you'll find decision-making situations will

Accept Criticism

Criticism is a two-way street. If you're going to be correcting your loved one's actions, expect some in return.

Your style may not immediately suit the person you are caring for, and no one should have the "my way or the highway" mentality. Try not to take anything too personally.

Because you're human, you'll make mistakes. The whole goal is to develop a system that works for everyone.

Don't Tolerate Abuse

However, that doesn't mean you should take any kind of abuse. Name-calling, threats, or anything else along those lines should never be tolerated by anyone. If the person gets truly out

of hand, you may want to speak to his or her therapist, or, if things get really bad, hospitalization may be in order.



Module 4

Famous Faces of Bipolar Disorder



Famous Faces of Bipolar Disorder

Bipolar Celebrities

Bipolar disorder refers to cycling between episodes of extreme high and low moods, involving periods of elevated temper or mania alternating with depression. Symptoms of the disorder include inflated self-esteem and delusions of grandeur, making it a fitting psychosis of celebrities. Common symptoms include binge eating, drinking, drug use, sexual promiscuity, and spending sprees. Since it's difficult to diagnose, the media often cite it as cause for a celebrity's erratic behavior or substance abuse.

Russell Brand

Russell Brand, the British comedic oddball, has essentially made a career out of his disorder. He is known for his instability: he withstood an unhappy childhood, a heroin and crack habit, bulimia, and sex addiction. His bipolar disorder, however detrimental to his sanity, has shaped his career as an unpredictable combination of ambition and vulnerability.

Catherine Zeta-Jones

After a stressful year watching her husband, Michael Douglas, suffer from cancer, Catherine checked herself into a mental health facility for treatment of Bipolar II, which is marked by longer bouts of depression and less elevated "up" periods. She only sought treatment briefly in order to ensure her mental health before returning to work.

Kurt Cobain

The grunge rocker and cultural icon was diagnosed with ADD at a young age and later with bipolar disorder. Despite the success of Nirvana, Cobain committed suicide at age 27. *Time* magazine listed him as one of art, music, and literature's "manic geniuses."

Graham Greene

English novelist Graham Greene led a hedonistic life—he would swing from periods of elation or irritability to despair, and was guilty of repeated infidelities. He was an alcoholic who abandoned his wife and children in favor of a series of affairs with married women. He was a devout Catholic who was tormented by his behavior, and expressed the moral struggle between good and evil in his novels, plays, and films.

Nina Simone

The famous singer of *I Put A Spell on You* was a political activist, vocal during the Civil Rights movement of the 1960s. She was prone to fits of rages, and because of her instability, was labeled

a “difficult diva.” Nina experienced greater freedom of expression and authenticity, and ignored the pressures to conform to “normal” social conventions—she was known to be a seductress and posed nude.

Winston Churchill

Some believe that it was because of his bipolar disorder, not despite it, that Churchill was able to succeed. When all odds were against Britain, a stable leader of sober judgment might have given up hope. Churchill often referred openly to his depression, calling it his “black dog.” A controversial statue depicting Churchill in a straightjacket was commissioned by a British mental health charity in 2006.

Tom Waits

The eccentric singer, songwriter, and actor took to heavy drinking in an attempt to ease his depressive moods. During his bipolar mood swings, he recorded songs portraying pessimistic and cynical moods: alcohol, heartbreak, and darkness are constant themes in his works.

Alvin Ailey

Abandoned by his father as a child and raised by an impoverished teenage mother, Alvin Ailey grew up in an unstable environment. Despite his illness and internal conflict about his sexuality, Ailey achieved great success in the American arts landscape as a renowned modern dancer and choreographer. Ailey suffered from bipolar disorder, which was aggravated by his drinking and drug use.