

Taming My Bipolar Disorder

Free Sample Chapter

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Chapter I – The Discovery

Bipolarity

Sanity's boundary line.

From holiness to immorality.



From joy to sadness.

From powerfulness to total weakness.

From the spirit that flies like a free bird

The contradiction of prison in an abyss.

From genius to mediocre

From positive to negative.

We are different from "normal" people.

But in reality, they are more insane than we are.

Within seconds, we can influence the behavior of intelligent people.

Of those who believe in their dreams.

Yes, we cry, and we laugh,

But we learn from that.

Remember: many geniuses were or are bipolar.

So, unleash the genius that exists in you.

And, certainly, you will be surprised.

Discover yourself...

I WAS SUPERMAN

I was absolutely convinced that I was Superman.

I was admitted to a psychiatric hospital, experiencing a tremendous explosion in my mind. My mind was spinning on a totally abnormal frequency... But what a pleasure it gave me! I got to the point of doing 2000 sit-ups in less than an hour, ran to exhaustion, I even tried to jump off the hospital wall; I really believed I was made of steel.

But what causes a person to exhibit these symptoms?

BIPOLARITY

Simply put, we can say that bipolarity has two main facets. There are two sides that, however antagonistic, are present in the same individual.

As the word implies, there are two poles, and as opposites, the antagonism of the disease is formed. One is Depression; the other, Mania. We all have heard of depression, and much is known about it. But what is mania? According to the definition of the Encyclopedia and Dictionary - Kogan / Houaiss (1997):

> Mania - s.f. / Psicopatol; State of super-excitation of the psyche, characterization by the exaltation of the temperament and triggering instinctive and affective impulses.

The two poles strongly influence the personality characteristics of the person with bipolar disorder, generating in us, people with the disorder, a particular view of the world

Shall we get to know more of the two sides of bipolarity?

THE MANIA POLE

According to Dr. Geraldo José Ballone**1**, psychiatrist, and professor of psychiatry at the Faculty of Medicine of PUCCAMP (Brazil), for 21 years:

- "... The high mood of a Manic Episode can be described as unusually good, cheerful or excited. Although the elevated mood is considered the prototypical symptom, the predominant mood disturbance may be irritability.

- Inflated self-esteem is typically present, ranging from self-confidence without critical sense to an intense grandeur that can reach delirious proportions.

- Almost invariably, there is a decrease in the need for sleep. The person usually wakes up several hours before the usual time, feeling full of energy. When the sleep disturbance is severe, the person can go through days without sleep and still feel no

tiredness.

- Individuals can talk nonstop, sometimes for hours. Their thoughts can run, often, at a greater speed than they can articulate. There is often an uncontrolled flow of ideas, evidenced by an almost continuous and accelerated incoherent talkativeness, with abrupt changes from one subject to another.

- The person can simultaneously take on multiple new business ventures, without considering possible risks or the need to complete each of these projects satisfactorily.

- Individuals often exhibit psychomotor agitation or restlessness, walking around without stopping or holding multiple conversations simultaneously (for example, over the phone and in person at the same time).

- Social expansiveness, unwarranted optimism, grandiosity, and feeble judgment often leading to reckless involvement in pleasurable activities such as shopping spurts, reckless driving, foolish financial investments, and unusual sexual behavior for the person, in spite of the possible painful consequences of such activities.

- The impairment resulting from the disturbance may be severe enough to cause serious damage to the person or to require hospitalization in order to protect the individual from the negative consequences of actions resulting from poor judgment (e.g.: financial loss, illegal activities, loss of employment, aggressive behavior). "

THE POLE OF DEPRESSION

This pole is also very well described by Dr. Ballone:

- "... The sense of depreciation or guilt associated with a Major Depressive Episode may include negative and unrealistic assessments of one's worth, guilty concerns, or ruminations about minor failures. These individuals often misinterpret trivial or meaningless events of everyday life as evidence of personal defects and have an exaggerated sense of responsibility for adversity. The feeling of worthlessness or guilt may assume delusional proportions.

- Self-recrimination for being ill and failing to fulfill professional or interpersonal responsibilities as a result of depression is very common.

- Many individuals report impairment in thinking abilities, concentration or decision making. These people may be easily distracted or complain of memory difficulties. "

We have to assume that these symptoms of bipolarity are not always manifested so acutely. However, if they are not managed and treated by medication and psychotherapy, the already manifested characteristic may be accentuated, or even other concomitant symptoms tend to appear.

BEING DIFFERENT

For us, the ones struggling with the disease, bipolarity may be uncomfortable to face since being different in our society is perceived in a negative way. However, being a person with the disorder also has a positive side; I'll show you that throughout the book. At first glance, it is hard to believe that this is true in a way because if we have any disturbance (be it behavioral or in our mind) our social acceptance becomes difficult. And as a result, we are marginalized.

Do not think I’m exaggerating. People with bipolar disorder often do not admit their disease fearing the reaction of others. For example, taking medication can be seen as a defeat; It looks like a crutch we will have to use our whole life. Even the act of

buying it, for some, is a gigantic task, for it seems that the pharmacist looks at us suspiciously.

Family members and friends themselves can feel ashamed or even ridicule the fact that someone in their family or their circle of friends has such a disturbance.

People, in general, think of following fashion trends or adapting to the members of their group; this is natural. But it must be said that it is only natural if it is done to a certain extent, otherwise, it results in people losing their identity and failing to be who they really are. Thereby, it seems to them that the most important thing is to please the group. Being different is out of the question.

As I mentioned earlier, my goal is to destigmatize bipolarity and the people with the disorder. In addition, show the families and the person with the disorder that the knowledge of the disease will facilitate the acceptance of the person by society.

In view of this, I invite you, reader, to travel with my mind. It'll be like a roller coaster ride; I'm sure the experience will be interesting and enlightening.

LET'S CUT TO THE CHASE

What to do if you get the diagnosis? No need to despair. Everything in life is bipolar... Or rather, it has two poles or two sides.

Let us consider the reasoning of a person with the disorder on the discovery of the disease:

> "*... I only started to live from the moment I learned of my condition; I learned to know myself and my life became worthwhile. Before the treatment, I was a person with a constant change of mood and the result was that I didn't get along well with anyone. Now I'm someone else.* "

I myself did not think there was any solution to my problem. For that reason, I consider it of great importance to discover the diagnosis and to begin a new chapter in life. With proper treatment, people with the disorder will be able to recover pleasures that were slumbering inside their mind. They will see that it is great to be alive! And wanting to die is, in fact, a waste of energy.

Of course, people generally ignore how small pleasures are important to our well-being, how tiny details of everyday life can bring happiness... To the person with bipolar disorder, the small, the detail, does not exist.

Do you want to rescue the pleasures slumbering inside your mind and regain your zest for life? So, let's start from the beginning: the discovery and admission of the disease.

ADMISSION REQUIRES HUMILITY

Do not think that being humble is synonymous with weakness. One must have the courage to admit the disease!

I once visited a hospitalized friend. I can say that he was in a psychotic outbreak or, in clear English, 'totally out of his mind'. He was emphatic in saying that he had no illness whatsoever, that his mother was mad, and that she wanted to see him there, hospitalized in a mental institution. He even refused to take the medicine.

In fact, most of the patients believe they are well, and they shouldn't be there:
"Crazy are the ones out there."

While agreeing in part with this statement, putting my critical sense to work, I ask: what are the mechanisms of the human mind that lead us to attribute to others our own shortcomings? Or yet, why do we not consider it possible that adversities of life may hit us?

Wouldn't it be an inability to look at us from the outside? Do we think that our opinion is always sovereign to the point where we do not realize that others are not always wrong?

When the problem hits us, the tendency is not to accept that we have been hit. We believe it should happen to our neighbor and not to us, whether it be the death of a relative or the diagnosis of a disease. That was the mechanism my friend used to express his frustrations. He could not admit that the problem was in him and blamed his mother.

As long as we use such defense mechanisms, we will be unable to recognize our limitations, and we will never admit that we need to change our way of facing the facts.

Another factor is that sometimes we are unaware that it is not our fault. Bipolar disorder, for example, is a disease that cannot be acquired; we were born with it. The environment can be vital in its triggering and in its appearing, but this is no reason for someone to feel guilty, whether the individual or his family.

Of course, if we do not recognize the need for treatment, we will not move forward. And the worst thing is that besides our relatives, the biggest harmed will be ourselves, the ones with the disorder.

IN MY CASE

In my case, perhaps different from many who struggle against their diagnosis, it was a great relief to identify my condition. I knew that from that moment on nothing would be worse than it had been before; now I had in my hands the option to change my future! But until I was given the correct diagnosis, it was a long and painful process... Coming from stages of depression and euphoria or almost mania, I tried suicide without success.

My first diagnosis was a severe depression, being hospitalized for the first time as a mean of preserving life. In the hospital, I received antidepressants, and this is perhaps the biggest mistake made against bipolar. Treating only the depression, in the short term we feel better; however, after this is stabilized, the other pole becomes more evident: the mania.

Depending on the degree of bipolarity, we can enter into a psychotic outbreak which, translating, would be the loss of contact with reality. As a consequence, we are exposed to hazards in disastrous circumstances.

LEAVING THE HOSPITAL

I left the hospital after a few days, medicated for depression, without the desire to die and with the feeling that I was given a new chance in life. I was overwhelmed by the false impression of well-being provided by the antidepressants, and of course, this effect would be temporary, since the other side of the disorder had, I would say, come in the form of an alien. The strange, devastating and inconvenient manifestation of this 'Alien' came with a great cost to me and my family.

I was much worse off than when I was admitted to the hospital. More daring, more intense, less responsible; I 'threw everything up in the air', leaving behind my family, my job and even my spirituality.

But as that saying goes: BEHIND A GREAT MAN (I am looking at myself in this way) THERE'S ALWAYS A GREAT WOMAN. Sonia, my wife, still had 'some hope' in me. She remembered me saying during my hospitalization: "... if life gave me lemons, I'll make a lemonade." These words were not of a depressed person; after all, when the depressed one receives a lemon, he makes himself a drink and sinks lower into his disease!

How could I have gotten out of a depression so quickly and, in a few days, be so fantastically well? I was excited, feeling full of life and very happy. This happiness did not match with those who had just left a psychiatric hospital as a mean of avoiding suicide.

These were two extremes that did not match with the idea of being only depressive. At this time, intrigued by my condition, she read a book called "TEMPERAMENTO FORTE E BIPOLARIDADE" (STRONG TEMPERAMENT AND BIPOLARITY - there is no version in English), written by the Brazilian writer Diogo Lara. It has a positive approach in discovering the diagnosis of the disease and seeking treatment.

I was 'forced' to read it too, and indeed I was struck by the truths present in it and how the description applied to me. But unfortunately, the whole diagnosing process went on longer. I returned to the doctor and, although he diagnosed me as a bipolar person, he was very concerned about my obsessive idea of suicide. At that moment, even in the euphoric state, I felt the urge to kill myself. The doctor prescribed a more powerful antidepressant... The result? I went into a psychotic outbreak and was hospitalized for the second time.

Then 'I lost it'. I entered the mania state and, as I mentioned, I became Superman. I even tried to jump over the hospital wall, and in that attempt, I realized I was not made of steel! I almost became a 'eunuch' bumping against some protective grids on my way down. A very wise and, why not say, clement nurse helped me out of that embarrassing situation. I was lucky, to say the least.

A FRIEND WITH A WEIRD NAME

In the hospital, I was treated by another psychiatrist, who is my friend today, Dr. Luiz Henrique Wizniewsky. He was decisive in my case; he treated me as a bipolar patient for the first time, cutting off the antidepressants and replacing them with mood regulators. That was the moment I was introduced to LAMOTRIGINE. I remember I knelt down and begged him not to take away my antidepressant. But he was firm and said, "You'll see how you'll feel better ..."

THE TURNING POINT

I got stabilized, and at the end of thirty days, I left the hospital. I went out with a difficult task: to rebuild my life and my marriage. It was not an easy undertaking; but thanks to my God and to my wife and my daughters - THE AMAZING WOMEN - I have been able to return to the path of sobriety.

The diagnosis and the beginning of treatment were game changers in my life. I was able to, though only gradually, return to enjoy small activities and to see that the disease really has its silver lining. Above all, I went back to life without the desire to die.

After telling my experience to you, I reaffirm the importance of discovering and accepting the diagnosis so that the ones who need it can take the appropriate treatment. This is how the person with the disorder lives a life that makes sense. Today, in particular, I think: Now I live! Before I just improvised... The treatment brought me back to life.

Likewise, friend, know that there is a possibility of reversing the picture and being happy. But before that, whether you are a person with the disorder or a family member of one, let's see at what point your case or that of your relative fits into this universe.

Do this: lick your finger and turn the page to find out how to determine the 'TYPE' of bipolarity that fits you or someone you know.

Want to keep reading?

This was Chapter I of *Taming My Bipolar Disorder: Stories of a Bipolar*, by Alexandre Fiuza.

Get the full book — 11 chapters covering discovery, work, family, fear, anxiety, prejudice, and more — at **livro.swfnaturaltherapist.com/en**