

LIFE WITH BIPOLAR

PEOPLE WITH BIPOLAR DISORDER SAY IT FEELS LIKE:

Being misunderstood

An amazing feeling that leads to feeling horrible

You feel everything at once and then you are numb to the world

Mania is speed. You must start and finish everything now—you can't stop moving

Busy brain, busy senses, busy libido

Unending back and forth with yourself

When the mania burns out, you've got nothing left in you

Frightening to be so out of control and off-balance

Having so much energy that you stress out your mind and your body

Things are going great and it's scary because you know it will not stay that way

"Normal" people are annoying because you'll never have that stability

Being constantly in activities that take up time with hardly any results or satisfaction

Being on a see-saw of human emotion

Flipping a switch in your mind

The future quickly goes from bright to bleak

Trying to catch up to your own mind

You do not want the high of the mania to end; then after the high of the mania is over, the lows set in and reality becomes a problem

Exhilarating. You finally feel like you're normal, until the anger sets in

Difficult to tell if you can trust your own perception of reality

Productive, carefree, and then exhausting



OR 1.7% OF AMERICAN ADULTS BETWEEN THE AGES OF 18-64 WILL HAVE BIPOLAR DISORDER IN A GIVEN YEAR.¹



THAT'S MORE THAN THE POPULATIONS OF:



SAN FRANCISCO



SEATTLE



NASHVILLE



INDIANAPOLIS



NEW ORLEANS

COMBINED²

#mentalillnessfeelslike



Share what life with bipolar disorder feels like for you in words, images or video by tagging your social media posts with [#mentalillnessfeelslike](https://www.mentalhealthamerica.net/feelslike).

Posts will be displayed at [mentalhealthamerica.net/feelslike](https://www.mentalhealthamerica.net/feelslike) where you can also submit anonymously if you choose.

- Speak up about your own experiences
- Help others who may be struggling to explain what they are going through to figure out if they are showing signs of a mental illness
- Break down the discrimination and stigma surrounding mental illnesses
- Show others that they are not alone in their feelings and their symptoms

BIPOLAR DISORDERS ARE REAL ILLNESSES THAT INVOLVE EXTREME SHIFTS IN MOOD CALLED MANIA AND DEPRESSION.

MANIA CHANGES:

THOUGHTS

Causing: racing thoughts, unrealistic beliefs about one's abilities, feeling invincible or "on top of the world", excessive optimism, or in severe cases, delusions and hallucinations.

BEHAVIORS

Causing: rapid speech, restlessness, extreme irritability, less sleep, impulsivity, engagement in risky activities, or taking on more projects or activities than usual.



DEPRESSION CHANGES:

THOUGHTS

Causing people to feel: inadequate (like they aren't good enough), extremely sad, guilty, irritable, lonely, empty, pessimistic (having a negative outlook), preoccupied with death or suicide, unable to focus, or unmotivated.

BEHAVIORS

Causing: withdrawal from social activities, decreased interest in sex, slowed speech, difficulty finishing (or even starting) tasks, or not keeping up with daily responsibilities.

BIPOLAR DISORDER IS NOT:

- Moodiness
- Being overly emotional
- Having multiple personalities
- Being a "drama queen"
- Artistic, or for geniuses
- Violent
- Switching between happy and sad
- A choice
- A sign of weakness
- A character flaw

TIPS FOR TACKLING BIPOLAR DISORDER



Learn from others who have bipolar disorder. Find a peer support group where people meet to share resources and provide support based on their histories and personal knowledge. You can find peer support groups through mental health organizations in your area, like your local MHA affiliate (mentalhealthamerica.net/find-affiliate).



Be aware of your personal patterns. Is there something that you start or stop doing a few days before symptoms of mania or depression go into full effect? Once you identify your patterns, ask a friend or family member to help alert you when you start to show early signs.



Keep a mood journal. Write a little about what happened and what kind of mood you were in each day. By doing so you'll be better able to monitor changes, identify potential triggers, and keep track of what helps you to feel good.



Make a routine and stick to it as much as possible. Try to wake up, eat, and go to sleep at the same times every day to get your body operating at a steady rhythm. Don't forget to block off time for things you enjoy doing!



Be careful when it comes to substances. Stimulants like caffeine and nicotine can interfere with sleep and intensify mania. Drinking alcohol can trigger mood changes, worsen depression, and interact with medications commonly used to treat bipolar disorder.



Embrace exercise. Physical activity is great for your mind and body. During times of mania, exercise is a positive way to use your extra energy and may help you to sleep better. During times of depression, exercise helps lift mood by releasing endorphins into your blood stream. No need to spend hours at the gym; a simple 15-minute walk can help.



Know when to seek professional help. There are things you can do to manage symptoms, but if you find that you're having symptoms more often or that they are getting worse, doctors and therapists can help.



Add Omega-3 fatty acids to your routine. Omega-3s (found in fatty fish) have been shown to be effective in reducing mood changes in people with bipolar disorder. Omega-3s are also really good for your body in general!



820 37th Place
Vero Beach, FL 32960
www.mhairc.org
772-569-9788
772-569-2088



SOME OF THE MOST COMMON TYPES OF BIPOLAR DISORDERS INCLUDE:

Bipolar I, Bipolar II, Rapid-Cycling Bipolar, Mixed Bipolar, and Cyclothymic Disorder.

To learn more visit:
mentalhealthamerica.net/bipolar

SCREENING CAN HELP CATCH MENTAL HEALTH PROBLEMS EARLY—B4STAGE4.

If you think you may be showing signs of bipolar disorder, take a screen at mhascreening.org.

A screening is not a diagnosis, but it can be a helpful tool for starting a conversation with your doctor or a loved one about your mental health.



www.mhascreening.org
Anonymous • Free • Confidential

If you or someone you know is in crisis, call 1-800-273-TALK (8255), go to your local Emergency Room or call 911.



SOURCES
1 KESSLER, R. C., PETUKHOVA, M., SAMPSON, N. A., ZASLAVSKY, A. M., & WITTCHEN, H.-U. (2012). Twelve-month and lifetime prevalence and lifetime morbid risk of anxiety and mood disorders in the United States. *International Journal of Methods in Psychiatric Research*, 21(3), 169–184. <http://doi.org/10.1002/mpr.1359>
2 <http://factfinder2.census.gov/bkmk/table/1.0/en/PEP/2014/PEPANRNSRIPUS12A>