

BIPOLAR DOESN'T MEAN CRAZY,

BIPOLAR: BREAKING STIGMA

IT'S TOUGH TO MAKE THAT CLEAR

BY JOSEPH REARDI

BIPOLAR CAN BE A LONELY ILLNESS. Perspectives of the disorder can be as equally disjointed as the mind of someone suffering with it. To some it can be terrifying, considering that 60% of people with bipolar will attempt suicide at least once in their lives. With bipolar, mania – a feeling of invincibility and grandiose – is drained. Left behind is a person overwhelmed with severe depression, unable to regain the motivation to live. Yet some notable figures with bipolar like Kanye West reclaim the illness, claiming it's not a handicap to life, but a 'superpower'.

"There's a lot of things in this world we don't understand," admits Professor Allan Young, an NHS mood disorder consultant. Since he took interest in psychiatry as a

form of medicine, Professor Young has dedicated his life to researching bipolar. "There's probably more of an understanding of what causes bipolar now than there ever has been," he says. Despite advancements over the last 40 years, progress is still limited. In the 1980's, bipolar was named 'manic depression' – a simplified term of the changing moods. Now it's understood there's a genetic contribution, which may depend on environmental factors like early-life stress, chaotic lifestyles or substance abuse to fully manifest.

"Bipolar isn't simply one thing," says Professor Young. There are two main subtypes, both cycling between some state of mania and an episode of depression. Type-one bipolar patients suffer with extreme

mania that becomes infused with a person's thoughts and actions. "Any person on a bus would recognise there's something wrong with them," he states. Stereotypes of intensely exaggerated 'crazy' personalities reside from this sub-type. If untreated, this mania could last from three to six months.

Type-two bipolar is often a less vivid 'hypomania'. "It's not a particularly severe illness in itself, but it's a diagnostic marker of having a type of bipolar," says Professor Young. "Anyone, even professionals may miss signs of hypomania – especially if their depression is more apparent."

Hypomania can be somewhat enjoyable, as it's mainly pressured speech and an eccentric personality. But extreme depression and risk of suicide is the overlying concern.

Since investigating into bipolar and stigma, I have realised how widely misunderstood the disorder is. Some people may not recognise signs of mania or hypomania. Bipolar people are stereotyped as unapproachable or crazy. Others see the title 'bipolar' as a cool personality quirk. "It's often very difficult to tell a sharp boundary between mental health and emotional experience," Professor Young explains. It's then difficult for anyone to diagnose the disorder. "Bipolar is over and under diagnosed," the Professor believes. Peers and doctors may misjudge genuine excitement as mania or mistake characteristics for another diagnosis.

BIPOLAR AND STIGMA

Lithium is the most common drug long-term drug for bipolar



Depression most commonly masks and misdirects the diagnosis of bipolar. Two-thirds of people with bipolar may have a depressive episode before experiencing hypomania or full mania.

Consequently, doctors, family, friends or even the person undiagnosed may mistake the elevated feeling of mania or hypomania as returned happiness from escaping depression. To Professor Young, it's the utmost importance that patients examine their moods overtime – as it's difficult for doctors or psychologists who only see patients in short intervals to detect mania.

80%

Did not know beforehand there are different subtypes of bipolar and assumed it was one thing

90%

Did not know someone personally who suffers with bipolar disorder

40%

Believed that it is a patient's responsibility to control their mania and not affect others

SIMON KAROLY TOOK to alcohol and drugs in his early adult life while mistaking his type-two bipolar for depression and anxiety. These issues caused a lag in his diagnosis, and he was only correctly diagnosed last year.

Simon is now sticking to a routine - taking his prescriptions and avoiding substance abuse. "My whole adult life has in some way been defined in dealing with mental illness," Simon tells TIME. Indications of his mental illness cropped up at 17. "It's been a relief in that sense that I'm now diagnosed, but it's been a bit of a tricky disorder." While his age-mates were enjoying their youth, Simon was continuously hospitalised due to his erratic behaviour. He admits, "it just becomes unbearable."

It was difficult for Simon to maintain control of his life when

incorrectly diagnosed. His social interactions and aspirations were at a halt, as he couldn't correctly medicate himself. Now he takes six different medications yet is still tweaking the correct dosages. "I think we're finally reaching a sweet-spot," he predicts proudly.

Ironically, his dad is a psychiatrist, his mother a doctor and his sister in medical research – yet as Professor Young had explained it's easy to miss the signs. When Simon felt depressed, his dad had stepped back from the situation as a psychiatrist. "He didn't want to be in the position of diagnosing his own son," he explains. In essence, it's easy to see why Simon's hypomanic episodes were missed as they were overshadowed by his anxiety and depression.

At 15 years old, Simon's addiction to drugs and alcohol formed. That, with his hypomania lead to 'out of character' behaviours like stealing money from his parents for morphine and a violent altercation with his father. "That was my route to socialising, my form of self-medicating." Simon opens up "the reality is, a lot of my 20's is essentially a blur of a reckless lifestyle and drugs. Mental illness had completely hampered every aspect of my life."

When I had spoken to Professor Young, he expressed concerns about self-treating with addiction, as 56% of bipolar patients had formed drug or alcohol addictions once in their lives. "What you're self-treating, is the addiction or the withdrawal of a substance," describes Professor Young, "while you're drunk you may be less anxious, but when it wears off the anxiety could be intensified." To

him, the solution is simple. "The notion of self-treatment has got to be challenged," he concludes.

With Simon correctly medicated, what's next for him? He has a positive outlook, to continue in where his mental illness had previously held him back. One thing he's considering is returning to university, after previously withdrawing due to panic attacks. Although he feels his adult life is defined by mental illness, he does not want to push that narrative – to him, he's privileged that he has supporting friends and family. Simon isn't resentful of his disorder, "I have a conceptualisation of who I am, my personality is my own."

DAVID FEINGOLD IS AN ARTIST who's had both type-one and type-two bipolar disorder for 17 years. He wasn't officially diagnosed until later in his life when he was 50-years-old.

Like Simon, David made it clear that he's battled depression throughout his life. "I was hit by a car in a hit-and-run," he recalls his teenage years. His survival costed him damage to his Amygdala, or what he titles it

IF YOU TELL SOMEBODY EARLY ON YOU HAVE BIPOLAR - IT'S A KISS OF DEATH

"the seed of emotion." This became the genesis of his poor memory, directionality and perhaps bipolar. "I lost my train of thought," admits David as he reveals his past "which... which is part of it."

"It's like an alien came in and took over David," he quotes his sister-in-law. What was once a very reserved and caring persona, became a man who drastically dyed his hair blonde, wore dangling earrings and had a marital affair.

My bipolar caused the divorce and it affected the rest of my life," he opens up. Due to rising tensions inflicted by the bipolar, David lived alone from his ex-wife and two children. Despite the separation, he still made it his mission to live nearby and provide the appropriate support to his family. Being bipolar doesn't have to simply be a toxic force to raise children in, not if an effort is made to care for yourself and your family.

That's not to say it didn't affect other relationships though. Since his divorce, social stigma against bipolar made it difficult to romantically engage with someone. "If you tell somebody early on you have bipolar - it's a kiss of death - they won't want anything to do with you," he says. "But if you wait until they now know you and tell them, you're a scoundrel because you hid it." Despite the difficulty in adjusting how he'd approach new people, he's now in an understanding relationship.

"There's something that really puts people off when they see signs of bipolar" says David. When working to obtain a social worker licence, he became tearful in a group session, the group

however were awkwardly silent. A silence which he can relate to. Discovering he was bipolar “was a purity of disbelief, just like everybody else, I was silent.”

Stigma is one of the many obstacles that come along when adjusting to being bipolar. “I don’t want people to reject me, isolate me and stigmatise me. That strips every positive thing away from a person,” asserts David. After years of adjusting, David feels somewhat in control. Any darkness engulfed is now expressed through the form of his art. His dark and disturbing visuals are displayed at conferences or art shows, as an educational insight into a mind tormented with bipolar. People share the same reaction he’s experienced his whole life when they see his art - an off-putting level of silence. □



David Feingold is self publishing a book to share more of his art (like this) and bipolar experiences