

Introduction

This is a book about bipolar disorder. Or if you're a free spirit or an R. D. Laing enthusiast who doesn't believe in a pathological explanation of your extreme mood states, it's a book about living with the highs and lows everyone else in North America is calling "bipolar disorder" (the punks!). I'm supposed to use this introduction to tell you my personal story about being bipolar, but that can wait.

Right now I've got a hankering to write about shin splints.

I got shin splints when I was thirteen. They hurt. My Anglophilic boarding school made everyone participate in enforced jaunty after-school sports (and, every spring, supposedly jaunty sniper drills on the lawn). After a single week on the cross-country running team, jogging along behind the meaty-calved senior boys, my shins started to feel weird. Little shoots of pain sprang up each time my shoes hit the pavement. It really hurt, but I winced and kept running. If I ignored the problem, it would probably fix itself. Four practices went by. I limped along. During the fifth practice the coach (of whom I was terrified) rode up behind me on a bicycle and shouted, "Stop running! You're limping! Go to the infirmary!"

Confused and embarrassed, but relieved, I turned around and walked to the school physiotherapist's office, where a team of smokin' hot sports therapists treated me for shin splints. Going to physio was fun and cool: there were always tons of people there getting their ankles wrapped or their sprains ultrasounded, or just hanging out in the whirlpool drinking from sketchy-looking Nalgene bottles. The physiotherapists teased me about letting my shin splints get so bad without asking for help. I did the stretches and exercises, got a better pair of running shoes, and eventually started running again.

Total days of pain: less than five.

Social approval of shin splints: high.

Overall experience with shin-splints diagnosis and treatment: supercool!

Six years later, I was a junior at the University of British Columbia, majoring in English literature. No more sports, no more sniper drills. This was the West Coast, baby—poetry readings, pot, and rainy-night house parties. I lived in a funky old house in Kitsilano that had a rich history of student debauchery and was known to several generations of UBC students as the place to go for anything involving mint juleps and knife throwing. Six of us lived there, and it got loud.

In January of that year, I started having trouble sleeping. Writing it off to the constant noise and stimulation in the house, I didn't pay much attention. By February I couldn't sleep at all, and my mind was swimming in thoughts and rhymes. Box! Fox! Haha!

In lectures, I either scribbled furiously in the diary I carried with me everywhere, recording my urgent in-sights ("He was an ornithologist. He was bornithologist into it!"), or I stood up abruptly to leave partway through and weep in the bathroom or wander in the forest that surrounded the campus. At parties, I would give my phone number to several different guys, then panic and jog home through the night, all the way from East Van to Kitsilano. At my part-time job as a bagel-stand cashier, I would prop my ever-present diary over the cash register and worry about the people who came to buy bagels: whether they knew what I was thinking, if they might be interested in coming to a fabulous party I was planning. At night, I would lie down in bed as a formality, then spring back up ten minutes later when sleeping didn't work out. Eventually, the mental chatter in my mind intensified so much that it felt like there were "four of me" whose constant arguments and repartees were alternatingly sinister and hilarious.

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It really hurt, but I winced and kept going. If I ignored it, it would probably fix itself. Time passed. I limped along. Even though whatever was wrong with me was more pronounced than a physical limp and should have been more obvious, there was no coach to ride past on a bicycle and shout, “Stop running!”

So I didn't.

I felt like a ceiling light whose switch was stuck in the on position. Whatever I did, I couldn't turn myself off. Confused and tormented by my condition, I nevertheless strode through the days, handing in essays, going on dates, and calling my parents long distance for normal, how's-the-weather conversations. Even though I was falling apart inside my head, I wasn't doing anything that had enough obvious craziness to attract anyone's attention. Not running down the street in my underwear. Not trying to convince the bank teller I was Jesus. Just wandering around having thoughts that went off like sparklers and a body that had forgotten how to fall asleep.

When I finally went to see a doctor at the walk-in clinic down the street, it wasn't because I wanted to help myself or because I thought I might have a medical disorder. It was out of shame. I had started crying and rambling in front of my roommates one night because I couldn't sleep, and I felt so embarrassed for crying in front of them that I was determined to get sleeping pills so it wouldn't happen again. I waited in the exam room, feeling guilty for taking up the doctor's time when there were three-year-olds with runny noses waiting to be seen, and when the doctor came in, I started crying all over again. When she asked what was wrong, I blurted, “I can't do this anymore!”

That's when someone finally said, “Stop running.”

Over the next few weeks, I went through the usual mental-illness maze of being misdiagnosed with unipolar depression, becoming hypomanic (again) from antidepressants, being rediagnosed with bipolar II, and choking down a series of different antipsychotics and mood stabilizers until I hit on a combination that didn't make me want to bury myself in a hole. I spent a lot of time in the waiting room of the UBC hospital, which was neither fun nor cool, because everyone there either had an STD or a mental illness and there was no freaking whirlpool.

Total days of pain: lots and lots.

Social approval of bipolar: not obvious.

Overall experience with bipolar diagnosis: kinda really bad.

My dad flew out from Ontario to see how I was doing and make sure I wasn't completely crazy. We blasted through the Chapters bookstore in downtown Vancouver, and he bought me every bipolar-related book on the shelf. We made a stop at the Starbucks. As we were power walking down the street, my dad hailed a taxi midsentence, hopped in, and rushed off to catch his flight back to Ontario. I stood on the sidewalk with a bag of bipolar books in one hand and a half-finished Green Tea Frappuccino in the other.

The party was just getting started.

In the days that followed, I returned most of the bipolar books and used the money to buy poetry books—not because I wasn't interested in the former, but because they made me feel tainted and messed up. They were too adult, too clinical, too alarmist, clearly written for family and caretakers at their wits' end, and designed to look authoritative and medical. They didn't answer any of the questions I had about bipolar, and I felt like a huge tool for even having them in my room, their ALL CAPS titles blaring out at the world. I thought there should be a book that was a little more honest, a little more badass, and a little more sympathetic to the average teen or twenty-something's first experience of the mental-health system.

So here's that book.

This book is mainly about how to live with bipolar, but it's also about how to think about bipolar. Sure, you can think of bipolar as a chemical imbalance in your brain, but you can also imagine it as a video game, a shamanic journey, a crash course in existentialism, or a plain old pain in the ass.

If you're reading this book and you've just been diagnosed with bipolar disorder: welcome to the jungle. Hope you brought bug spray, 'cause the spiders in here are as big as your face. Taken your meds? Good.

Now let's get started.

Chapter 9

Voices Not in Your Head: Dealing with Friends and Family

Telling someone you have bipolar is like showing them your snake-eating-a-unicorn tattoo for the first time. What if they think you're crazy? What if you're embarrassed? What if it slips out in public? Can I get this thing removed? Solid friendships and relationships are the foundation of any healthy life, especially a life with bipolar. This chapter covers everything to do with your nearest and dearest.

Part 1: The Dating Game

Dating someone when you have bipolar is a lot like dating someone when you don't have bipolar, except when you have bipolar, your significant other (or S.O.) has to be cool with things like meds, depression, and occasionally being locked out of his own house at 1 a.m. while you spontaneously rewallpaper his bedroom. You also need to decide when your S.O.'s making a valid observation ("You seem manic") and when she's just using your diagnosis to score points and win arguments.

A lot of the time, the fact that you have bipolar disorder will be completely unnoticeable to whoever you're dating, but for the times when it does come up, you need an S.O. who's insightful, understanding, and well-informed.

“When and how should I tell my new boy- or girlfriend I’m bipolar?”

When should you make out with someone for the first time? On the first date? On your wedding night? Anytime, as long as you've both brushed your teeth?

People can say what they want; rules about when to kiss someone (or tell someone you're bipolar) are meaningless. What really matters is the spirit in which you do it. On night one you can have beautiful, happy tongue hockey or guilty, unhappy tongue hockey, and the difference isn't anything inherent to night one, but the fact that you chose to establish certain feelings around it.

Similarly, when and how you tell your potential love monkey you have bipolar aren't as important as the attitude you communicate when you do it. If you're squeamish and tiptoe around the subject, you'll burden it with unnecessary secrecy and anxiety. If you're upfront and casual about it, you'll establish that it's cool to talk about.

No matter how nervous you feel about telling your S.O. you have bipolar, remember that you're the one choosing to be nervous, and you can just as easily choose not to be nervous about it. Trust me: if you establish an attitude of openness and positivity about bipolar in your relationship, you'll be doing yourself a huge favor. Once you've communicated that you're cool with being bipolar, your S.O. will catch on, and he/she/it too will be nonchalant. It will be cool to talk about it, cool to ask you questions, because when something's in the open, it's not so scary anymore. (If they're not cool, then do as Dan Savage says and DTMFA.)

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You don't need a special script or special time to bring up bipolar. Rehearsing a mental script implies that you're still kind of anxious about it, so if you're doing that, you should really be working on your own attitude before you bring it up. I know what it's like: it took me two months of taking "heart medication," going "to the post office," and rehearsing mental scripts before telling my first post-diagnosis boyfriend I was bipolar. All that planning and worrying filled the subject of bipolar with extremely awkward mojo. When I finally told him, my terrified expression was more disturbing to him than the news itself. I burned with embarrassment for days afterwards, and we never talked about it again.

Over the next few years, as I became more confident and less of a spazz case (kind of), my approach to bipolar changed—and so, naturally, did the mojo surrounding it. I told my current boyfriend I have bipolar on the night we met. It came up naturally, as part of a fun, casual discussion and has remained a completely comfortable subject ever since. As long as I complete his "mood checklist worksheet" every night and agree to random blood-serum-Seroquel inspections, he doesn't even make me sit in the "quiet box." Not anymore.

Do as Chinese author Wang Xiabo does in his fiction: treat heavy things lightly and light things heavily. Bipolar can be a heavy thing; don't weigh it down further by adding burdens of guilt and anxiety.

"Why is it so hard to tell someone I'm bipolar?"

When you disclose a mental illness to someone, you get freaked out because you can't control their reaction or their image of you. You worry that they'll look at you differently, think you're stupid or weird, or that there will be an awkward silence and you'll start babbling to fill it. You take responsibility for the other person's reaction, when it's entirely out of your control. You're like a tennis player on one side of the court, trying to direct the other player's serve through telekinesis.

The truth is, you're worried for good reasons. People do react badly to being told somebody they are interested in (and could potentially be "stuck with" for a while) might not always be "the same person." That's a scary thought. So yeah, you might not always get the reaction you want. But the less you stress, the better it'll go.

And guess what? Hormones'll do the talking for you. People are pretty irrational. Even if it were a terrible idea to date you, and if they were told that every two months you turned into a bloodthirsty, evil, Satan-worshipping dragon that tore the countryside asunder and listened to tween pop, they'd probably find a way to rationalize liking you: "Well, it's only Satan." "C'mon, it's just the Jonas Brothers." If someone really likes you, they're probably going to find a way to bend this new information into still liking you.

Successfully telling someone about your bipolar disorder doesn't mean controlling or anticipating their reaction, but being completely comfortable with not having control. Let's say you tell your boyfriend you have bipolar, and in response he cries, vomits, and tries to roll and smoke his own underwear. So what? Eventually, that particular moment in your life will be over, and the next thing you know you'll all be laughing and getting a burrito. Or you'll decide he's neurotic and controlling and dump his sorry ass. Instead of wasting your life being freaked out and nervous, just be cool. Be cool! And realize, on every level, that if other people aren't cool, that's their problem and their choice. Freedom is nothing more than the constant, thrilling awareness that you're free, that you choose your own attitude from moment to moment—and that you can't control other peoples' choices.

"Screw that, how do I tell my boyfriend I have bipolar?"

Sigh. Fine. Rehearse in front of a mirror one of the following:

- (at a lull in any conversation) "Hey, did I ever tell you I have bipolar?"
- (in the middle of passionate sex) "Hey, did I ever tell you I'm bipolar? But, like, I'm only type II, and so its not like, type I which you may have seen in movies and stuff, and . . . Oh! Oh! Oh!"
- (when you're reading the paper together) "That Zyprexa scandal's some fucked up shit! I have bipolar."

Pros and Cons of Cohabitation

I don't believe in doing a lot of sobering, cost-benefit-analysis forethought stuff, which is why I moved in with my boyfriend ten days after I met him. But what I lack in prudence I make up for in luck: not only has living with Seth been a constant source of happiness, but it's also had an unexpected stabilizing effect on my mood cycles. I think the social-rhythm-therapy people are onto something: having a stable rhythm of daily interaction with Seth, after a lifetime of alternating bursts of isolation and sociability, was the missing link for me. I even sleep better when he falls asleep easily next to me. Not to mention the fact that exercise and regular bedtimes are much easier with the lure of a beloved partner to do them with.

But take heed: I'm pretty sure the move-in gods dispense bliss and havoc in equal measure, and if you're the thinking type, here are some points to consider before shacking up.

Moving in together will definitely affect the following areas: sleep habits, eating habits, habit habits, and social rhythm. Moving in together will affect each of these categories to some degree. If you need absolute, nonnegotiable control over any one of them, you should proceed with extreme caution.

Sleep Habits: Can she get behind going to sleep at the same time every night? What time can we agree on? Can I deal with agreeing on a bedtime that's earlier or later than I prefer? Do we always need to go to bed together, or are we comfortable going to bed at separate times? Do I take my sleep meds whenever I feel like, or do I let my partner know before taking meds that make me drowsy? Do I need absolute quiet and darkness to sleep, and is this possible if we live together?

Set up your living space so that even if one of you goes to bed early, the other one can still move around and do stuff without disturbing them. A curtain around the bed is good for blocking light, and earplugs and a sleeping mask work wonders. Have an alternate sleeping place, like a couch or spare bed, for nights when one of you is sleeping restlessly or is too hot or cold for the main bed's temperature level. Finally, don't be unnecessarily rigid, but don't sacrifice your health. If you need to get eight hours of sleep in order to stay level, let your partner know how important it is.

Eating Habits: If your new roomie/paramour is the kind of person who skips breakfast, has a chocolate croissant and a shot of espresso for lunch, and orders an elaborate Indian buffet at 3 a.m., it can be really hard not to do the same. Sticking to your own particular food plan (and budget) is tricky, but important if your sanity depends on regular mealtimes and lots of oatmeal.

If you move in with someone who drinks more than you, you'll probably start drinking more. If you move in with someone who drinks less than you, you'll probably start drinking less. Same applies for stuff like smoking, recreational drugs, exercise, and TV watching. Think about: Do I want this person's habits? Can I hold my own, or will I drift towards their habits? Look, I don't mean to dispense general-purpose relationship advice—just asking you to keep these things in mind.

Social rhythm: Is he going to have a bunch of friends over every night? Do you feel pressure to constantly hang out together, or can you comfortably be around each other while doing separate things? Are you going to have other roommates? Are there separate parts of the house or apartment where you can escape to if you feel like being alone while she's hanging out with people? Do you need a lot of time to yourself, or do you want to be around her all the time?

Notes: At best, cohabitation can drastically stabilize and improve your life. At worst, it can turn you into a quivering ball of psychotic putty. Make sure you always have a place you can go to be by yourself—be it a room in your house or at your parents' house, a friend's basement, or even a campsite in the woods.

Ways to make your bipolar disorder Easier on your Partner

- Take care of yourself. There's nothing more frustrating than watching someone who could be healthy and happy dig themselves into a hole. Your partner will feel much better if he/she can tell you're taking care of yourself. So take your meds and lay off the 3 a.m. whiskey binges, already.
- Tell them when you think you're cycling. They may have already noticed—or not. If they have, they'll be relieved to know that you know that you're cycling, and are taking steps to maintain insight. If they hadn't noticed, it can help to know they hadn't, because it tells you that you aren't way off track yet.
- Keep other support networks current. Don't stop hanging out with your friends now that you have a significant other. Keep going to your support group, your yoga class, and Sunday dinner at your aunt's house so you don't depend on your S.O. exclusively for love and support. That way when you're manic, you'll have more than one person to tell about your plan for infiltrating the White House.
- Keep them informed. Be open and forthcoming about how you're doing. Keep them in the loop about which meds you're taking and their side effects. There's no need to start a constant RSS feed about your mood states, but checking in when something comes up is reasonable. It's way less stressful to be with someone who's upfront about being depressed or manic than someone who tries to hide all their feelings.
- Be gentle. Both depression and (hypo)mania can make you irritable and prone to lashing out at your partner. Take special care to be gentle with their feelings when you're depressed or (hypo)manic. And remember that they need back rubs just as much as you do.

Part 2: Friends and Family

Your friends and family are the people you eat with, gossip with, watch Star Wars marathons with, and generally like. They're also your most important support network. Your relationship with them goes two ways: they support you, but they also need your support. In this respect, they're not like psychiatrists. If you don't love them back, your relationship will wither. They have a vested interest in your being sane, healthy, and happy—you're more fun that way than when you're unstable and crazy. Take care of your friendships, and you'll have a much better time of life. Help your friends and family understand what bipolar is, and you'll all be able to take better care of each other.

Friends and Family: Keeping them informed and Happy

“Was I the last person to realize I was crazy? Did all my friends and family know it all along?”: Most people don't recognize the signs of mental illness. Unless you're out on the street in your boxers, muttering to yourself about aliens (and even then, some people will just think you're fun to have around at, you know, space parties and stuff), most people won't connect things like mood swings and insomnia to mental illness until you get diagnosed. And then all the little oddities they couldn't quite put their finger on “suddenly make sense.” My friend started med school this year, and halfway through the first semester his roommate, who had no history of mental illness, was hospitalized for psychosis. He was shocked; he'd never seen anyone “go crazy” before and couldn't believe he'd cheerfully, cluelessly witnessed his roommate's psychosis without catching on that something was wrong or reaching out to help. Similarly, when I had my first struggles with bipolar, none of my friends recognized the signs. But when I told them the diagnosis, they said that, in hindsight, it explained a lot of things.

In the wake of a bipolar diagnosis, parents, friends, and relatives who didn't recognize the signs of mental illness are probably thinking:

“I thought he was just stressed out by exams.”

“I tried to be nice to her when I saw her.”

“I just thought he was drunk.”

“I thought she really was pregnant with Steven Colbert's baby.”

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“He did always talk about a lot of weird stuff.”
“I thought she was just working too hard.”
“He seemed perfectly normal.”
“She was always so cheerful. I can’t believe she was depressed.”
“If only I’d paid more attention, I could have gotten him help sooner.”
“I had absolutely no idea.”

Your friends and family might know less about bipolar than you think, so explain it to them. Lend them a book about bipolar. (How about this one? On second thought, don’t lend. Buy them books. Buy all of them books. How about this one?) Most people who don’t have one are fascinated by mental illness. They’ve never experienced mania or psychosis and would love to hear your stories. (Without warning, feed them high doses of magic mushrooms. Ha! Now they understand; serves them right.) Close friends often feel privileged to be offered a window into this very raw, private part of your existence. And once they understand that your depression isn’t moodiness and your hypomania isn’t belligerence, they won’t be as hurt or confused when these happen.

You can also take a parent, friend, or significant other with you into the doctor or psychiatrist’s office, so they can ask questions and feel more involved in your treatment. If you ever get hospitalized, it will be good to have a friend or parent around who knows your doctor and can help make good decisions—decisions you might be too crazy to make on your own.

Being open and well-informed about bipolar yourself will make it much easier for your friends and family to be open and well-informed too. If they have preconceptions of or biases against mental illness, talking about it will help them realize where and how they’re wrong. You can’t force people to understand, but you can leave the door open.

Dealing with Parents

Your parents’ reaction to finding out you have bipolar can be more intense and harder to deal with than anyone else’s. Parents get all sorts of stressed when they find out their kid has a mental illness. Guilt, anger, worry, disappointment, and over protectiveness are just the beginning. And why not? After all, they just failed as parents, right?

Some parents are awesome; they understand, help when appropriate, back off when appropriate, stay cool. And some parents flip their lids and suddenly look at you like you’ve replaced their perfect child with a demonic imposter. Instead of being mad or hurt at their reactions, try to understand where they’re coming from. Maybe they need support only you can give. Maybe you need cash only they can give. It works out. Here’s what they might be feeling:

- **Guilt:** Some parents feel guilty for passing on the bipolar gene to their kids. Maybe your mom’s mom was bipolar. So Mom has seen how it can mess you up, and she feels terrible for putting you at risk for it. Guilt can often masquerade as anger or resentment.
- **Anger:** Parents who don’t understand that bipolar is genetic and out of your control might respond with anger: “How can you do this to us? You’re such a screw-up!” They mistakenly assume that you’re “doing it on purpose” or “making a scene,” and might demand that you stop doing that bipolar thing the same way you tell someone to stop leaving dishes on the counter or knock off that racket in the garage. As Yoda tells us, anger is a close cousin to fear: bipolar disorder is an animal they don’t recognize, they don’t know what the frack they’re supposed to do when they run into one, and the only surefire plan is to pick up a big stick and threaten it.
- **Worry:** “Do you want to move back home? Should we send your big brother out there to take care of you?” Parents worry—especially if you live far away, and they can’t see you to know you’re OK. They worry that you’re more crazy than you really are, that you can’t take care of yourself, and that you’ll crack without a constant supply of homemade cookies. (That last one might be true.)

- A need to take control: There's nothing more annoying than being asked if you've taken your meds when you always take your meds, or being asked about your mood every day like a toddler being asked by the nanny if he's made a poo. (Side note: it's even more annoying being asked if you've taken your meds when you haven't been taking your meds. But maybe they have a point—maybe you should come down from that tree and take your meds.) Many parents turn to overcontrollingness to deal with their own feelings of fear and worry in the face of your apparently “out of control” disorder.
- Disappointment or anxiety: “What will this mean for medical school?” “Can you still take over the business?” “You were in hospital through the entire football season!” “Well, call me again next semester, I guess.” Parents hang a lot of hopes on their kids, and your bipolar disorder is one of those things that makes them realize your life is yours, not theirs. Just as you have to face a future of bipolar episodes, they're faced with a new set of worries about the future—some justified, some not.

Other possible aspects of parental flip-out:

- False beliefs about bipolar: The summer after I was diagnosed, I was working in Jasper, Alberta, and looking into buying my first beater car so I could get around to hiking trailheads. I found out from a nearby relative that my parents had alerted them to the perils of my condition: “Don't let Hilary drive. She's got monomania!” I was highly insulted—I'm a very prudent driver—and was outraged that my parents were “warning” relatives about me (I later realized that the original words were probably nothing like the message my aunt seemed to remember these things get bungled all the time). When people don't know much about a subject that's suddenly relevant to them, they sometimes start to pull beliefs out of thin air, or cobble together things they've heard, things they've read, and things they made up from scratch. Often this is out of a spirit of protectiveness. Let them down gently. (“Seriously, Dad, I only drive 200 mph at 3 a.m. when there's like nobody else on the road.”)

- Non-responsiveness: You've reached out to them, and all you get is radio static. If you bring up your bipolar disorder, one of your parents changes the subject abruptly. “Don't they understand what a big deal this is?” you wonder. Non-responsiveness is probably the most confusing reaction you can get from a parent, because it gives you nothing to chew on, lean on, or even fight against. Some parents just have a hard time talking about sensitive things, —or they're afraid you'll get mad if they ask you questions. The best thing you can do in this situation is to keep on being open and communicative, and not get frustrated by their perceived lack of response. Maintaining this stance is not easy, but at least it's not destructive. Some parents eventually come around and open up about it, and with others the subject of mental illness remains a closed book. In the latter case, it's especially important to find a friend or counselor with whom you can spill your guts about your moods and meds.

In order to deal with all of these reactions effectively, most parents need three things: involvement, information, and reassurance. If your parents want to feel involved in your treatment, let them go right ahead and spend hours on the phone with the health insurance company. Most moms and dads would be thrilled if their kids asked them for advice, so even if you don't take it, make your dad feel good and ask him what he does when he's depressed. If your parents are totally ignorant about what bipolar is, nurture them with information. If they worry about you constantly, throw them a bone; invite them over for dinner so they can see how happy you are, how well you're doing, and how bad a cook you are.

No matter how hysterical or inappropriate your parents' reaction is, don't let it get to you. You can only do your best to help them through your diagnosis. The rest is up to them.

Dealing with Friends

Friends have slightly different needs than parents. They don't need to know if their offspring will still make it to medical school and don't want to know the names of every doctor you've seen. Your friends need a fun, cool person to

hang out with—a person who cares about them as much as they care about you. How can you keep your friendships balanced when you frequently have manic or depressive episodes that need a lot of attention, and they just don't?

Most of the things I wrote about parents and significant others also apply to friends. Establish an attitude of openness about bipolar. Keep them informed and involved in your life. If they get mad at you for being manic, or feel hurt when you get depressed, understand that it's because they don't know much about mental illness. Help them learn. A friend who doesn't know anything about bipolar might think you're drunk when you're really manic, or that you're mad at them when you don't return their phone calls when you're depressed. It's easy to misinterpret these things. Be gentle with your friends' feelings, and forgive them if they misunderstand.

You're going to need to work out how much of your mood cycles to share with your friends. Do your friends need a play-by-play recap of your every depression, your every hypomanic discovery? You want to let your friends into your life, but you also don't want to be the hypochondriac uncle who calls up the whole family every time he has indigestion. It's best to find a happy medium. If your bipolar is acting up, mention it, but don't let it dominate your relationship.

Last thoughts on Friends, Parents, and Significant others

Getting diagnosed with bipolar is a great opportunity to become a more open person, a more honest person, a more caring person. Having all these people care about you makes you realize how much you value them—and how much you can return their love. If you can be open about bipolar, you can be open about other touchy things—(dirty family secrets, anyone?). Being “crazy” is a great excuse to speak your mind and ask awkward questions—it can even be a catalyst for taking big steps like coming out of the closet. You can use bipolar as an excuse for cracking open taboo issues in your life, and if doing so completely backfires, just blame it on the mania!