

## **Heads Up – Bipolar Disorder**

### **What helps? – Coping Strategies**

Although monitoring of early warning signs is an important initial step in developing self-management skills, monitoring these signs is not enough. The next aspect of self management is to develop coping strategies.

Coping strategies are most effective if they are applied before our mood is at the more severe end of the scale. If you can recognise at an early stage signs that your mood is becoming depressed or elevated, you have a better chance of intervening with coping strategies and preventing things from escalating.

### **Getting the basics right: Self Regulation**

A chaotic lifestyle can contribute to the development of further mood episodes. Many people who have experienced bipolar disorder will report how helpful they have found “getting the basics right”. What they mean by this is ensuring sleep, work, exercise, balanced eating, social life and other daily activities are maintained in helpful routine. Maintaining a routine requires work, monitoring and planning and will not happen on its own.

Having a structured routine, including regular eating, exercise and work-life balance can be helpful in supporting a regular sleeping pattern. The use of a diary or timetable planner can be helpful in assisting you to pay attention to your week to week schedule in order to ensure that important things such as sleep routine are prioritised.

Low and elevated moods can make maintaining a structured routine more difficult. This is addressed in the sections below on ‘Activity Scheduling’ and ‘Reducing stimulation’.

A person’s ability to self regulate and get a balance across achievement, pleasure, and relaxation focussed activity can be influenced by psychological factors. For example, if someone is perfectionistic and has high standards of achieving (such as in their profession), they may be tempted to work long hours and avoid sleep to focus on work. Such a person may criticise themselves if they judge themselves as failing to achieve or live up to their high standards, contributing to depression and withdrawal. It may be important to consider such issues if you are finding it difficult to establish a balanced daily routine.

### **Sleep**

Sleep disturbance is one of the most common problems experienced by people with bipolar disorder. During episodes of hypomania or mania, people are much more active than usual and typically sleep less, often accompanied by a diminished sense of a need for sleep. However, this can typically contribute to the worsening of hypomania or mania symptoms and eventual exhaustion.

There can be many reasons why our sleep is disturbed and the majority of people will experience difficulties with regular sleep from time to time. Changes in our social arrangements, late nights or social events can often result in significant disruption to our usual sleep routine. Likewise, work related stress, deadlines or positive developments could also result in difficulty getting to sleep, owing to an increase in work or excitement due to upcoming positive events or developments.

Sleep deprivation (not having enough quality sleep) can be a trigger for mania, and people can over-sleep during the day due to depression, leading to insomnia at night. Trying to protect good sleep habits (called 'sleep hygiene') can help combat the early signs of mood changes and prevent things from getting worse.

People with bipolar disorder need to pay particular attention to this if travelling abroad through time-zones, with some studies indicating that eastward travel can contribute to the triggering of hypomania or mania and westward travel being more likely to contribute to depressive symptoms. Some principles to try to put into practice are:

- going to bed and waking up at the same time each day
- avoiding napping during the day if it causes insomnia at night
- avoid over-stimulation (e.g. exercise classes) at night
- try to combat a busy mind at night (a useful resource can be found here: <https://www.mentalhealth.org.uk/podcasts-and-videos/wellbeing-and-sleep-full-works>)

## Thought Challenging

When people are depressed, their thoughts about the world, the future and themselves can become uncharacteristically and persistently negative and bleak. On the other hand, when people are feeling high, thoughts can become unrealistically positive and optimistic, with a care-free attitude that can contribute to problems later, particularly when decisions are made with about longer term areas of personal importance, such as occupational, financial or relationship decisions.

During mood episodes, extreme thoughts can emerge in our minds without any particular focus or effort and they can often feel very real, despite objective evidence to the contrary. Due to the ease in which these thoughts present themselves in our minds, psychologists refer to these as '*automatic thoughts*'.

People in the early stages of an episode of mania or hypomania can sometimes be aware of slight changes to their usual thinking, often marked by a series of thoughts that are characterised by an increased sense of confidence and wellbeing, such as an enhanced sense of importance and control over the future. People with bipolar disorder can often recognise subtle changes in how they are thinking, including very positive experiences, such as a surge in creative ideas or thinking. In addition to a change in thought content, people often report a sense that the speed of their thinking is beginning to change, with the view that their thoughts are starting to race. For those who initially find this difficult to notice, these changes can often be seen through the behaviour of others, such as the sense that those close to the person

are unfairly failing to share the person's optimism or are somehow unable to follow the person's chain of thinking.

An additional useful aspect of self-management would be to learn to recognise and make sense of *automatic thoughts*. These thoughts are usually brief and associated with extreme emotions and accompanying behaviours.

## **Identifying “Automatic Thoughts”**

It can be useful to record or capture thoughts, particularly when they are extreme in nature, or are associated with extreme changes in mood. It can be useful to try to make sense of the situation that led to these thoughts. Write them down.

Thoughts are not facts. They are our interpretation of events or situations and these interpretations affect how we feel and what we are likely to do. Our mood also influences the way we are likely to interpret an event – potentially in an overly negative or overly positive way. It is important therefore to check out our interpretations (automatic thoughts).

Once you have identified your automatic thoughts, it is important to question them and consider if they are reality based or perhaps overly positive or negative and challenge these thoughts in order to be sure you have the best or most realistic evaluation of your situation.

## **Challenging “Automatic Thoughts”**

Ask yourself some of the following questions:

- **What is the evidence?**
  - What evidence do I have to support my thoughts?
  - What makes me think that...how do I know that is the case?
  - What are my reasons for believing that?
  - What evidence do I have that my thought is not true?
  - Have I been in this type of situation before? What happened? Is there anything different between this situation and previous ones? What have I learned from prior experiences that could help me now?
  
- **What alternative views are there?**
  - How would a friend/ someone else view this situation?
  - What would I say to a friend in this situation?
  - How would I have viewed this situation in the past/ when my mood is stable?
  - Are there any other ways to see this situation? What evidence is there to support that interpretation
  
- **What is the effect of thinking the way I do?**
  - Does it help me, or hinder me? How?
  - Could it lead to problems later?

- **What thinking error am I making?**

- Am I thinking in *all-or-nothing/ black and white* terms (e.g. overly harsh or perfectionistic)?
- Am I *jumping to conclusions*: jumping to overly positive or overly negative conclusions about myself or the future without all the facts?
- Am I *mind reading*: guessing what others are thinking or feeling?
- Am I taking something *personally* which has little or nothing to do with me?
- Am I fretting about the way things *should or ought* to be instead of accepting and dealing with them as they come?
- Am I using a double standard – how would I view someone else in my situation?
- Am I blaming myself for something that is not my fault?

How did your original automatic thought affect your mood? Having considered things in more detail and asked yourself some of the questions above, does that shift your perspective on your automatic thought? Is there another way to see the situation/ a more realistic or balanced perspective? Write that down. What effect does that have on your mood and on what you do/ or want to do? The link below takes you to sample thought diaries you could use to record and challenge automatic thoughts.

<https://www.getselfhelp.co.uk/docs/ThoughtRecordSheetAnger.pdf>

<https://www.getselfhelp.co.uk/docs/ThoughtRecordSheet7.pdf>

**Completed example:**

<https://www.getselfhelp.co.uk/docs/ThoughtRecordSheet-example.pdf>