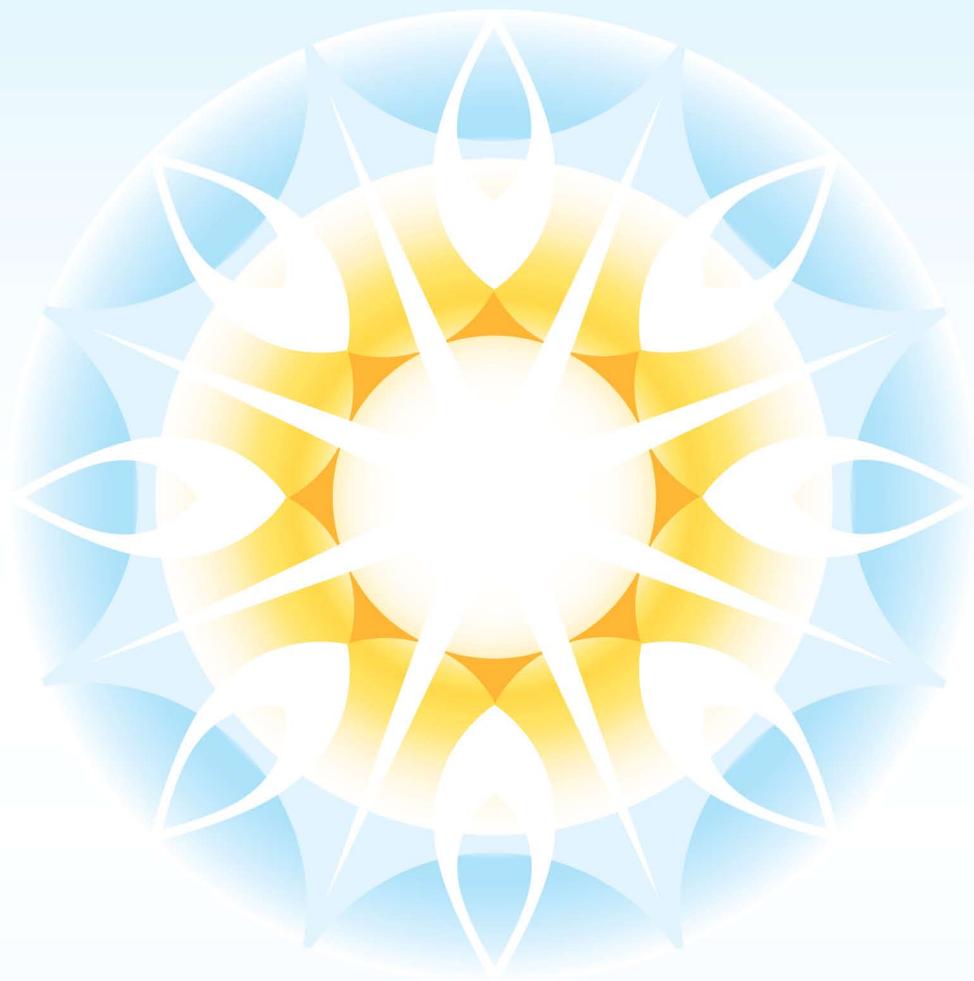


# Tips for Talking With Health Care Professionals



Everything You Need to Know  
to Talk to Your Doctors With Confidence

by Julie A. Fast

author of

*Loving Someone With Bipolar Disorder, Take Charge of  
Bipolar Disorder and Get It Done When You're Depressed*

## A note from Julie Fast

**As with all of my work, I want to remind you that I'm not a health care professional. I do write books with health care professionals such as my book *Loving Someone with Bipolar Disorder: Understanding and Helping Someone with Bipolar Disorder* written with Dr. John Preston. I'm a writer who has bipolar disorder. I check my facts carefully and am always mindful of what I write, but as is the case with all books, the information in *Tips for Talking with Health Care Professionals* is not a substitute for professional medical care. Thank you and remember: bipolar disorder is an illness, not your life.**

## Introduction

*I want to tell my doctor to remember that I am a person and not just a patient.*

*It's as though the minute someone says doctor before their name we turn over all of our will and ability to take care of ourselves.*

*When are the doctors going to realize medical school isn't the only reliable place to become medically educated? When are they going to realize that they work for us, and to talk down to the boss and insult him or her while proudly asserting personal beliefs is wrong? When will doctors seek the truth instead of the Pharmaceutical Industry's party line? How is it that the US spends more in healthcare per year than any other country in the world, and we are consistently the sickest people in the world? Pharmaceuticals treat symptoms. If that is all they are doing, guess what? We will have a lot of other symptoms we need help with.*

*Sometimes I just feel too tired to deal with this illness. This is when I really need help from the people I have chosen to be on my health care team. I may get a massage or maybe call my therapist. I need that safety net. This is so hard to deal with sometimes and I can't do it alone. The people I see to help me with this illness are invaluable. I couldn't manage bipolar disorder without them.*

*I believe in being informed, assertive and an advocate for myself and my family. I believe most doctors are doctors because they truly want to help people. I also believe it is easy to allow the drug companies to run your practice. Too many patients have to be seen in a day to get more than the national average of twenty minutes with your physician. No wonder malpractice is so high. How could you possibly have a real understanding of what is going on with your patient and come up with a plan both of you can live with in twenty minutes? Someone please tell the HMOs we aren't cattle.*

*I would not be here if it were not for my therapist and doctor. Period.*

People with bipolar disorder spend a lot of time talking with health care professionals. If the person is really ill, their family members often have to do the talking for them. But what if the health care professionals you're talking to don't listen very well? Or what if you're not really good at expressing yourself? This causes problems on both sides and can become one of the most frustrating parts of having or loving someone who has bipolar disorder.

The good news is that there are skills you can learn to effectively communicate with the health care professionals in your life. There is such a relief in knowing there are people you can turn to when you're ill and being able to effectively communicate with them makes the process even easier.

## About this Book

*Tips for Talking with Health Care Professionals* will explore the common communication problems that people with bipolar disorder and the people who love them often come up against when trying to get help for this illness. It will then offer ideas on how to bypass these problems to create loving, mutually beneficial and productive relationships with health care professionals.

### **Author note:**

The purpose of this book is to create better relationships with health care professionals. The purpose is not to put down or degrade the very important work that health care professionals do. If you're like me, the role they play in our lives is paramount and we want them to continue helping us. We just want to be able to communicate with them a bit better.

Another goal of this book is to help you find balanced health care. There are many options out there when you create a health care team. This book will explore some of your options and how you can talk with each health care professional about your needs.

The quotes throughout the book are from the letters I regularly receive from readers at [www.bipolarhappens.com](http://www.bipolarhappens.com). There are also excerpts from my upcoming book, *Take Charge of Bipolar Disorder* that will be published in 2006. Please note that the term health care professional will be abbreviated as HCP in the following text.

## What are Your Main Concerns?

The main communication issues I notice from the letters I receive and the people I meet on my book signings regarding talking with health care professionals include the following:

- ◆ Doctors don't have enough time to give me the help I need.
- ◆ Doctors don't listen.
- ◆ Health care professionals don't really understand bipolar disorder: It takes a lot of time to explain the illness to someone who is not familiar with the symptoms and then the appointment time is done.
- ◆ Therapists want to discuss life issues when it's actually bipolar disorder causing the problems.
- ◆ Doctors are impatient, arrogant or overly stressed.
- ◆ I feel scared and too intimidated to talk with them and tell them what I need.
- ◆ Doctors are more educated so they always think they know best: I have this illness and I know what works for me. I need a partner in healing, not a boss: Who am I to tell them what I think? I don't have a degree.
- ◆ I don't have the communication skills to really let them know how much I need from them.
- ◆ There just isn't enough time for all I need.

## What are the Concerns of Friends and Family Members?

- ◆ Worried the health care is not good enough for their loved one.
- ◆ Too much to do at home to help person.
- ◆ Need more outside help.
- ◆ Need language to talk with doctors.
- ◆ Feel that health care professionals don't listen to them because they're not the person with the illness.
- ◆ Not sure how to deal with the fear and worry.

It's obvious that this is a large and complex issue. Though it may feel overwhelming to think that you as a person with bipolar disorder or as a friend or family member of someone with bipolar disorder will have to deal with health care professionals for the rest of your life because of this illness, there are ways to significantly increase your communication skills and find the help you need from the people you choose to have on your health care team. This book offers suggestions on how to create a productive and friendly relationship with a health care provider right from the beginning. This is especially important if you or someone you love has just been diagnosed. You are in the position of really thinking about who you want to have in your life to help you with this illness. If you're already in a relationship with a health care professional, the following tips

will help you increase your communication skills so that you can ask for and get the help you need.

## Tips for People with Bipolar Disorder

*Our time is valuable too. If we're late we miss our appointment, but if they're late we have to sit there. It's not right.*

*I do have monthly appointments with my doctor, but I don't feel that they are helping. These visits consist of the doctor asking me about my meds and writing prescriptions while I talk. Sometimes I feel as if he doesn't even hear what I'm saying. I've taken so many different medications that I can't even remember them all, and I am now on 20 mgs of Lexapro, 450 mgs of Wellbutrin, 1500 mgs of Depakote and 25-50 mgs of Seroquel everyday. I am beginning to feel like I'm a walking pharmacy. I would desperately like help on learning how to recognize and control my symptoms, but I just don't know how to deal with all of these medication changes and side effects.*

### Tip #1: Learn to Effectively Talk with Your HCP about Drugs and Side Effects

This may be one of the most difficult topics to discuss with a HCP. Our current treatment plan for bipolar disorder almost exclusively emphasizes drug therapy, even when it's obvious that drugs don't always work in the way that they should. Statistics show that 20% of people diagnosed with bipolar disorder after their *first* episode respond optimally to medications. In other words, there are millions of people with the illness who have to search for quite a while to find the correct combination of medications and even then, people struggle with side effects. There is also a group, myself included, that simply can't tolerate medications at all unless a new medication comes out with less severe side effects. Though there is no doubt that drugs save lives and are a very important part of bipolar disorder treatment, it's equally important that we advocate for our physical health and mental well being while taking these drugs. I've received thousands of letters from people with bipolar disorder who complain that their doctors simply will not listen when they ask for help with medications. There are many reasons for this, the main one being that many doctors don't know of any other options except trying new medications.

Talking with your HCP about your medications is a skill you will really need as you go on the bipolar disorder treatment journey. Being able to clearly stick up for yourself and still accept that you will probably need medications for this illness is a fine balance. I know that when I gained 80 pounds from medications a line had been crossed. I remember sitting in my doctor's office begging her to help me with the weight gain. All she would say is, "We need to get you stable

first.” Later of course, I found out that much of my rapid cycling was due to medications and never taking anti depressants would have been the correct treatment plan for my type of bipolar disorder. You probably have similar stories and frustrations. Here are some tips for talking with your doctor about side effects:

### **How Long Should I Wait for Results?**

There is always a time period for drugs to work. This can be from days to weeks or even months, so it’s important that you know when a drug should start working. You can research this information and then talk with your doctor about your concerns.

As the weeks go by on a new medication, you may experience some symptom improvement, but if it’s not dramatic or if you’re having trouble with noticeable side effects, it’s natural that you will want to talk with your doctor about medications. Many times you will be told to just stay with the medication so that it can have enough time to work. There’s often a good reason for this since many people do benefit if they stay on medications long enough for the clinical effect to kick in. One of the most common problems is a combination of unpleasant side effects and a lack of response. It’s understandable that this can lead to discouragement. The facts are that given these circumstances, a lot of people will just stop taking the medication against medical advice and often will get sicker, ultimately having to start all over again with medications.

This is why it’s so important to be open and frank with your doctor if you’re at that place where you’re unwilling to stick with your medications. It might be good to say something like this:

"I understand that your recommendation is to just keep taking the medication. I believe that it’s important for me to be able to be open and honest with you about my treatment. I need you to know that I’m at a point where I’m probably just going to stop the medication on my own, and I’d like to kindly ask you to please consider other options. Would you be willing to let me know other medication choices that you think might be an alternative to what I’m currently taking?"

Talking with your doctor about side effects can be difficult especially if they respond to you in the following way:

- ◆ Just give it time – the side effects will calm down.
- ◆ We just need to see how this drug will work before we make any changes.
- ◆ The weight gain is just a part of the drugs, once you are more stable we can deal with the weight gain.
- ◆ We have to wait and see what happens before we try something new.

This is one reason taking charge of your own treatment is so important. You have to decide what you can and can't tolerate in terms of side effects. There's a fine line between what's considered normal for side effects and what's unacceptable. If you're sleeping 14 hours a day and have gained 40 pounds, then it's time for you to talk with your doctor. If you can't live your life because of a certain specific side effect such as a respiratory problem or a serious rash, it's time to talk with your doctor. This may be difficult as it's often hard to get an appointment and may be quite intimidating to stick up for yourself, but it has to be done especially if you're thinking of missing doses or stopping your medications because of these problems. If side effects are significant and clearly not tolerable, it's time to talk with your doctor.

### **Talking with Your Doctor about Medications**

The following suggestions can help you talk with your doctor about medications:

- ◆ Can you please tell me why I'm on this particular medication?
- ◆ I know that it's important that I stay on medications and I'm willing to do that, but these side effects are simply too strong for me right now. I can't function normally if I am sleeping all day or constantly running to the bathroom because of stomach problems. What are my options?
- ◆ How long do you think I need to wait to see results from this medication and what if I can't wait that long?
- ◆ What ideas do you have for reducing side effects? What do you know about microdosing?
- ◆ Are there any new medications coming out that will work with less side effects?
- ◆ I could really use help with this. Do you have any suggestions on where I can find more help?

### **Tip #2: Tell Your HCP What Mood You're in – Educate Them on Your Particular Symptoms**

So many of us assume that our health care professionals understand bipolar disorder. In reality, it's safer to assume they don't know what you go through and they certainly don't know what mood you're in when you see them. It really is okay for you to tell them how you are as soon as you start your appointment. This goes for all health care professionals from your dentist and masseuse to your general doctor or psychiatrist. If someone knows you're down, anxious or that you're slightly manic, they can adjust their services to help you more effectively. For example, if you have a lot of dental problems due to medications (as I do) it may be that going to the dentist is a stressful and expensive process. When I go to

the dentist with yet another cracked tooth, I always explain why I'm crying and why the procedure is so upsetting. I don't go on and on about it, but I felt it's very important that he knows that I'm not crying because I'm scared of the procedure or that I just dislike dentists in general. I say, "I'm quite upset about having more dental problems. I was on medications for many years and they really wrecked my teeth. Having to come in again brings back a lot of memories and causes me to have a down swing." My dentist has been very compassionate about this. And whenever I come in, he remembers what going to the dentist means to me. Here are some tips for letting your HCP know what mood you're in:

- Keep your explanation simple. *I'm in a down swing today which means I may cry a bit. It has nothing to do with you and I could use your help to remind myself that it's an illness. Or, I'm really feeling up. I know I'll talk too much. Can you help me with this? Or, I'm psychotic today. It will be hard for me to look you in the eye, but I am listening to you.*
- Remember that it may take a few times for your HCP to know that they need to know what mood you're in before they can help you, but they can learn.
- Never be embarrassed to let someone know you're in a mood swing. These are health care professionals, not coworkers or other people you may be scared to talk to about bipolar disorder. This should be a safe place for you to communicate.

### Tip #3: Take Someone with You to an Appointment – Find an Advocate

If you really feel too sick to help yourself, it's fine to take someone with you to your appointments. This can be a friend, family member or anyone else you think might be helpful. They can sit with you in the waiting room and advocate for you in the appointment. Of course, you will need to clear this with your HCP, but if you feel having someone with you to take notes or just be with you as a friend during a stressful time, don't hesitate to do it.

### Tip #4: Write a Complaint Letter

When Ivan (my wonderful ex partner who has bipolar one) moved to England earlier this year he had to find a new medications doctor to help with his Tegretol and Prozac. He was assigned a nurse and waited quite a while for the appointment. His move from France to England had been very stressful and the depression was pretty strong. He was hoping to get some compassion as well as help with the stomach problems caused by the medications. His appointment did not go well. He called me afterwards and said the person he saw was not understanding. She basically got on his case for being sick. Well, Ivan lived with

me for many years and has read all of my books. He knew what to do. He quickly wrote a professional, non histrionic, but very strong complaint letter. He called the clinic and asked where he should send the letter and then actually sent it. (So many of us think of the letters, write them and then don't actually send them!) Here is his letter and their reply:

Dear Madam,

I had my fist visit at your centre on Tuesday 5/10 at noon with Maureen Salder. The beginning of the visit went fine. At the end Ms. Salder lost her temper and told me I was not cooperating. She told me I was not giving her enough background information.

I think it was most inappropriate, especially after telling her that I was suffering from bipolar disorder and that I was currently under treatment. It is not professional to tell off a patient and especially one suffering with a mental health disorder.

I would like to get an apology from Ms. Salder as I don't think her behavior was appropriate. She may need some training in how to work with someone who has bipolar disorder. Could you, please, make sure that this doesn't happen again? I suggest she looks at [www.bipolarhappens.com](http://www.bipolarhappens.com). I designed this web page along with my former partner who writes books on bipolar disorder.

Yours sincerely,

Ivan Kanis

*Here is the reply:*

Dear Mr. Kanis,

I am very sorry that you were very unhappy with your consultation with Ms Salder on 4th October 2004. I have now had the opportunity to discuss this with Ms Salder and also with Dr. Whaler the Clinical Support Doctor.

Through our discussions Ms Salder detailed the consultation that you had with you and we all agreed that communication was the issue in this particular case. Ms Salder does apologize that the consultation was not an easy one, as a result of this Ms Salder has used this opportunity to review her consultation skills and also the problems associated with mental health.

I would like to thank you for your feedback, it is important that we do hear the views of our patients. If you would like to discuss this further I would be happy to meet with you.

Yours sincerely,

Grace Evanston

Practice Manager

### Tip #5: What to Do When a Doctor Says Something Unkind

*I had a psychiatrist tell me one time (while hospitalized) that I was causing more problems than anyone else on the unit and wasn't as sick as they were.*

*I once saw a naturopath who looked at my chart, looked at me and then said in a very disdainful voice, "Wow. You sure do come in here a lot."*

There is nothing worse than hearing something unkind from the person who is supposed to help you get well. Bipolar disorder makes us do a lot of things we don't like. We can be hypochondriacs. We get needy. We go to the doctors a lot when we're sick. You would think that HCP's would know this and treat us appropriately. Saying something mean to someone with a mental illness only makes the illness worse. The difference between constructive help and meanness is a fine line. If your doctor says something unkind, it's up to you to calmly and professionally tell them that what they said hurt you and how they can better communicate with you in the future. You can do this through a complaint letter as Ivan did or you can tell them in the moment. It's hard to stick up for yourself, but the more you can teach your HCP to treat you with compassion, the more quickly you can learn the skills you need in order to get stable. Here's an example:

*Naturopath:* Julie, you sure do come in here a lot.

*Julie:* (I literally feel my mood go to the bottom of my shoes and onto the floor. I feel like dying.) I come in here a lot because I have bipolar disorder and the medications don't work for me. By coming here I take care of myself in the only way I know how. I'm trying all I can to get better. Do you have any experience with medicine resistant bipolar disorder? Do you have any idea what my life is like when I'm sick? Maybe we can talk about this some more.

There is no guarantee that talking with your HCP in this way will help them understand you more, but it will certainly help your mood because you were able to stick up for yourself without causing a scene.

Here are some more scripts for what to say if someone says something unkind:

*I understand that my behavior frustrates you. It frustrates me as well. The truth is that most people with bipolar disorder have this kind of behavior. None of us like it but sometimes it's hard to help it. It embarrasses me. I'm here to get your help with this. When you get frustrated with me, it only makes it worse.*

*I need your help. I need you to see what is the real me and what is bipolar disorder. If you're clear on what bipolar looks like it may be that you can recognize it in me. It's not something personal. I'm not trying to be difficult. The illness makes me difficult. I need your help with this.*

As you can see, the more you can appeal to their compassion, the more chance you have of their finally understanding that you KNOW that your behavior appears to be something you can always control, but it's actually a result of an illness and not something under your control.

## Tip #6: Be Reasonable: Know When Bipolar is Talking and When You're Talking

It also helps if you can remember that your doctor is a human being just like you with the stresses and problems of any person who is trying to help people with a serious illness in a very short amount of allotted time. Because of this, it's very important that you make health care decisions when you're relatively stable. If you react and fire your doctor because of a bipolar disorder mood swing this is an example of an impulsive decisions you could later regret.

You're normal if bipolar disorder makes you say and do many things you later regret. HCP's are not immune from your behavior. When you start with someone new, it's important to remind them and yourself that there will be times that you will not be reasonable. If they see this unreasonable behavior in you during an office visit, on the phone or maybe in an email, they need to have a safe way to let you know. The Health Cards System for Bipolar Disorder can really help with this. If there are things you say and do regarding HCP's when you're sick, you need to write them down and share them with your HCP during your office visits. For example, if you get very negative and picky when you're depressed, you need to remind yourself that nothing your HCP does when you're in this mood will feel good enough. You may think they're incompetent or uncaring. And it may all be your mood and have nothing to do with them. The more you can talk about this *before* it happens, the more tools you will have at your disposal when you have a tough visit. Here's an example of what you could say if you're having a tough day when you sit down for your visit.

*As you will soon notice, I'm in a rotten mood today. Nothing feels right. Everything is upsetting me today. I don't think I'm being very reasonable. I don't want to take this out on you and ruin our visit. I need your help with this today.*

Talking like this can be uncomfortable at first. It's so much more personal than many of us want to be with a HCP, but when it comes to bipolar mood swings, it's always important to ask yourself, AM I REASONABLE? before every visit.

### Tip #7: What to Say When Doctors Ignore Your Concerns about Weight Gain

*I get depressed about my weight. Doctors really don't understand that the meds that make you fat are stopping you from getting depressed but you still get depressed because you are fat! They aren't wonder drugs they're aids. We need help with our health as well.*

After three years of medications I weighed 260 pounds. I'm 5'6." I've never been more embarrassed or depressed in my life. The weight gain doubled my depression. And my doctor simply didn't understand this. Her entire focus was getting me stable, and yet in hindsight it's so obvious that the medications were making me more ill than the illness alone. Why was she so blind to my constant concerns about weight gain? I think it's because she honestly didn't know what to do. She was trained to deal with medications, not their side effects. Weight gain was just something that happened.

Weight gain is inevitable with some drugs. There are new drugs out now that say they have less weight gain and this is helpful. But weight gain is still a real issue with many people on drugs for bipolar disorder. It is up to you to monitor your weight very carefully the minute you try a new drug. This is the only way to prevent excessive weight gain from certain medications. If you're on a medication that is causing continual weight gain, it may be time for you to talk with your doctor and try a new medication. Yes, it's a trade off between stability and physical health, but how you look and feel is a very important part of your mental health. Don't sit back and let the out of control appetite continue. If you've gained more than ten pounds, it's not okay. You need a plan to lose it, keep it off and then prevent it from coming back. Easier said than done, I know. But it has to be taken care of.

### Tip #8: Write it out First – You Won't be Sorry

Doing things in the heat of the moment can lead to problems. I've found that writing something down first helps. I then leave it for a few hours and come back

to it. This is especially important with email. When you're communicating with a HCP, especially if you feel quite heated about the situation, it really helps if you can write out what you want to say, let it sit, revisit it later and then decide what to do. This also helps if you have to talk to someone at a set time. For example, if you want to talk with your HCP about something that is bothering you and you only have a 20 minute appointment, you can have your issue written out and ready to go before you get there. Complaint letters are the same. Write them and let them sit, then decide if they are reasonable. This saves a lot of future stress. When Ivan wrote his complaint letter to his clinic, he sent it to me first for an edit. This assured that it wasn't sent in the heat of the moment.

### Tip #9: Find Someone New

You can fire your HCP you know! You're the one they are helping. You're the boss. You have the power in many cases. What probably holds you back is fear. Another problem is that HCP's, especially medical doctors are so deified in this world that we simply get tongue tied when we want to stick up for ourselves. When you want to change doctors, you will have to make sure you are being reasonable, that you're not asking for something impossible and that you're not burning bridges if you have limited options. But if all of that is taken care of, then do it. Take care of yourself and get yourself the kind of health care you need. I know that when I changed psychiatrists from one who was overworked and very burned out to one who was compassionate and really human towards me, my health really benefited.

### Tip #10: Learn to Talk to Your Therapist

*I love my therapist. She's willing to learn about this illness and never judges me for being sick. Her office is the one place I can really, really cry about being so ill. I can tell her what a burden it is to have a mental illness and how scared I am about my future. She listens and then we create a plan for dealing with these feelings.*

I have a truly gifted and wonderful therapist named Robin. I know that working with me has been a challenge for her. I've had a lot of downswings in the past year right in front of her. It's hard for her to know what's me and what's bipolar disorder. She uses the Health Cards with me, so she knows a lot of my symptoms. It can be really tough to figure me out when I'm sick though. I sound so totally convincing when I talk. Especially when I'm hypomanic. I even convince myself about things and then when the mood lifts I think, my god, what

have I done? So, I wrote Robin a letter one day just to remind her to look for signs of the illness when we're together. Otherwise, we may focus on something when we meet that's not the real me. Such as my worries about being single after ending my last relationship or deciding that I don't ever want to write another word about bipolar disorder. (Both regular occurrences when I'm ill.)

Here's my letter to Robin:

Hi Robin

I hope you had a nice weekend. I'm still very sick and very, very tired of it. But I'm moving forward. I did a lot today and will just have to keep reminding myself that it's an illness.

I actually had a few hours of relief last night, so that is my lighthouse. It will be like that in the future. I just have to get through this.

I'm writing to remind you that when you see me, I'm quite ill and many of the things I say will sound confusing, such as my ideas about relationships. I know it's hard to tell what's me and what's the illness right now. Even when I say I think something is me it may not be. The only way to know for sure is to wait until this down swing has been over for a while and you can talk with the real me. Believe me. The real me is not in my head very much at the moment, but it is fighting to return.

I appreciate your support. Seeing you is one of the highlights of my week when I'm sick. I always learn a new way to manage this wicked illness.  
WICKED!

See you soon. I hope you are doing well.

Julie

Do you have a great therapist? They can make such a difference with this illness, but it's very important that they know what the real you says and what the illness says.

Tips for what to say to a new therapist:

*I cry a lot when I'm in a down swing. It doesn't mean my life is terrible- it just means I'm sick and need to focus on taking care of bipolar disorder. When I'm slightly manic, I talk really fast and seem really excited. I jump into new situations without thinking and rarely think things through to the end result.*

*This doesn't mean we need to address my desire to do too much. Instead, we need to address the bipolar disorder. I need suggestions on how to prevent the mania instead of a discussion on what I'm doing wrong in my life because of the mania. You may notice that there are some days when I'm unnaturally upset about my life even though I was just fine the week before. This probably makes you think that I'm really unhappy about something and that we have to dig deep to find the causes of my unhappiness. The truth is that bipolar disorder often makes me upset about my life. It tells me that my life is pointless and worthless. This is part of the illness. It's so important that you ask me if I'm in a mood swing when we meet especially if you notice that I'm different from the last time we met. I'm working hard on learning to manage my mood swings and I need your help with this task.*

Talking with your therapist about bipolar disorder can lessen your therapist's confusion over your behavior and can educate them on the role bipolar disorder plays in your life. Therapy can be a very important part of your healing process, but if it addresses the issues and behaviors caused by bipolar disorder as something psychological instead of physical symptoms of an illness, progress can be slow. Once you teach your therapist what is real and what is the illness, you can truly make some amazing progress.

Before I was diagnosed, I had so many therapists who wanted to look at what was wrong with my life. For over ten years I looked to therapy for help and not one therapist ever thought of looking for bipolar disorder. This is so frustrating for me. All of those years spent talking about my compulsive relationships and why I spent so much money and it turns out to be an illness! Now I know that I need to teach my therapist how to help me.

I honestly feel that there is no better friend and advocate than a concerned, productive, compassionate therapist who understands the difference between the bipolar disorder you and the real you. It's very important that your therapist at least have a basic knowledge of bipolar disorder. It truly helps if they have been trained to know the difference between a mood swing and a true life issue. You can help with this by teaching them what to look for when you're sick.

### Tip #11: Get a Handle on Your Emotions- Especially in Tough Situations

Here are the facts, no one wants to deal with someone who is hysterical, unreasonable, sobbing, throwing things, or yelling. Period. I know that I often receive email from people who are very upset with me for something I have supposedly done, such as not returning a request for a phone call or not responding to an email. I then receive some really mean email that accuse me of being in this business only for the money. I want to reply to these letters and

remind people that if a health care professional is only in it for the money, they certainly would not be working in the mental illness field!

If you can remember this when you get angry and remind yourself that those of us who work with brain disorders do so because we want to make a difference in the world, this can help diffuse some of the anger you feel. I do try to remember that the aggressive behavior I and other people in the field are up against is often due to bipolar disorder and not something we've done personally. Usually, if I reply in a nice way, the person writes back and apologizes for being so rude. They explain that they are sick and have not slept in days, or are so depressed they have no joy left in life. I DO understand this, but I'm human and your other HCP's are human as well. If you really feel out of control, angry, overwhelmed and in a frenzy, this means you're sick. It doesn't usually mean that your HCP has done something wrong. I know that when I learned to control my out of control emotions, I got better health care. I'm now very honest when I need help. I'll say something like this when I see my doctor:

*I'm in a really, really bad mood today. I'm sick. I feel pretty rotten and don't want to take it out on you, but I do need some help. I feel that I'm not getting the health care I need. I want to yell and scream about this, but I know it doesn't help. I know you are doing your job. Can you help me with this? The bipolar is really bad today.*

This works. I use it regularly, especially when I have to make an appointment or see someone who is running late. It's normal to be overly sensitive and emotional when you're sick, but taking this out on a HCP does not help the problem. There are other ways of relating.

## Tip #12: Explain the Bipolar Conversation to all of Your HCP's

I write about the bipolar conversation in all of my books. Here is an excerpt from the *Health Cards System for Bipolar Disorder* explaining the conversation:

How can friends and family members possibly say the right thing when someone says, "I'm a failure and I want to die." What if a person in a psychotic episode says to the person they love, "I can tell you're going back to your old partner and you don't love me any more." What if a child says something terrible to a parent or a person at work suddenly tells a boss that the job sucks and they are leaving to travel the world? Most people naturally react to this scary bipolar disorder language by listening to what is said and then taking it seriously. They react to the actual words and start what I call the Bipolar Conversation.

This conversation happens when the person you love is sick and bipolar disorder is doing the talking, but you react to what they are saying as though everything is normal. This leads to a lot of problems. The conversations are circular- the ill

person keeps saying what bipolar disorder is making them say and you keep reacting to what they are saying and usually try to get them to see that they are making no sense. For example, a typical response to hearing that a person feels like a failure and wants to die is, "You're not a failure! You've done so much with your life! Why are you so unhappy? Why do you want to die? So many people love you!" Talking this way doesn't work for a few reasons. First, when the person you love is sick, bipolar disorder is doing all of the talking. You will recognize this very clearly once you have a long list of the symptoms for each mood swing. The language of bipolar disorder is always the same and reacting to it simply doesn't work. The second problem is that reacting to what the ill person says does not address the real problem: bipolar disorder. If you can see that bipolar disorder is talking, it makes sense that a normal conversation simply is not possible. The bipolar disorder must be treated first if you want to have a normal conversation.

It helps if you can learn what bipolar disorder language sounds like so that you can avoid these bipolar conversations. There is a detailed chapter on the Bipolar Conversation in *Loving Someone with Bipolar Disorder: Helping and Understanding Your Partner*, but for now, try to change to way to talk to your loved one when they are sick. You really can learn a new way to respond to bipolar language. When you learn this new way of responding, you can write down your ideas in the How You Can Help column in the Health Cards. Here are some tips on how to respond to bipolar disorder and avoid the Bipolar Conversation.

What Works: For example, when a person is depressed there are certain ways you can respond that cut through the depression and get to the real problem: they need help with bipolar disorder. For example, using the above example of hearing someone say they are a failure and want to die, you can respond, "I hear you and I know you're depressed. You have bipolar disorder and this is normal. I've seen you like this before. Let's get out the Health Cards and see what we need to do to stop those thoughts and get you some help." This addresses the real issue and doesn't lead to a Bipolar Conversation. You really can make a big difference in the life of someone with bipolar disorder if you can learn and remember to respond to the bipolar disorder mood swing with what helps treat the illness instead of reacting to what the person is actually saying.

As a person with bipolar disorder, you know how hard it is on your friends and family when you're sick. You may feel frustrated with the way your family responds to you. One way to deal with this is to get very specific with what you need from them so that they don't feel so helpless. You can teach them about the bipolar conversation and what they can do when they feel one is starting. It may seem odd to tell someone how to talk to you when you are ill, but it is an effective tool that can save a lot of relationships.

Explaining the bipolar conversation to all of your HCP's can make a great difference. You can even print out his section and give it to them.

### Tip #13: Make Very Effective Use of your Office Visit Time

It sure can be hard to say what you want to say when you're sick and only have 20 minutes to talk with your HCP. I can remember feeling flustered and very emotional after waiting so long to see my doctor and then having so little time to talk with her. One way to get around this is to make a list throughout the weeks before you talk with your HCP regarding what you want to talk about.

You can then edit this list and make sure that you cover exactly what you need to cover when you get there. Even if you're crying or manic you will have the list to let you know what needs to be addressed. You can even hand them the list and let them read it. This is a lot quicker than having to explain each item.

Another way to make use of your office visit is to make sure you arrive on time. This may seem obvious, but when you have so little time to see someone, you have to make sure that you're there when you need to be there. Of course, it's inevitable the HCP will be running late, but this will give you even more time to go over your list. This is especially important when you're seeing someone for the first time. I can remember being very sick and having to see someone new and not being able to find where I was supposed to go. This can lead to a lot of anxiety. I now make sure I have the directions exactly and that I give myself plenty of time to arrive and relax before I go in. This goes for dentists and any other HCP I have to see.

It can also be helpful for your HCP if you keep a mood chart. They can look for rapid cycling and talk with you about the triggers for certain mood swings.

### Tips for Making Appointments Easier

- ◆ Create a file for all bipolar disorder oriented paper work. Carry this with you and add anything to it from the appointment.
- ◆ Put a calendar in the file.
- ◆ Put your list of topics to cover in the file.
- ◆ Make sure you add any medications questions you may have.
- ◆ Make sure you are clear on the length of the appointment and that you use your time wisely.
- ◆ If the appointment is in a new location, check on parking, driving directions and plan accordingly in order to reduce your stress.

## Tip #14: Really Get to Know Your HCP

### Health Care Professionals Have Problems Too!

Have you ever thought about your health care professional's personal life? We think about our troubles and limitations all of the time, but for some reason, when we pay to see someone we often forget they're human too. What a tough job they have. Maybe they had a fight with their partner that morning, but for the rest of the day they have to listen, help and ultimately decide the treatment of many people throughout the day. How do they keep their head clear? Maybe they're worried about the insurance issue or the fact that so many of their clients are suicidal. This must be quite a burden.

Here are some questions to ask your current health care professional in order to get to know them better:

What is it like for you when you have to see so many ill people day after day?

How do you manage to keep your spirits up when you see so many people who really have a tough time with mental illness?

It's hard for me to only see you a few minutes at a time. I feel I need so much more. Do you get frustrated with the time limits you have to impose on your patients?

You can think of other questions to ask. This lets them know you see them as human beings and not just machines who are there to help you get better.

Who knows what defense mechanisms a doctor has built up over the years in order to deal with the pain they witness daily? The better you know your HCP and the professional challenges they face, the more compassionate you can be about their frustrations.

## Tip #15: Know the Answer to *What is Bipolar Disorder?*

Send this information ahead of time if needed.

I've found that it's a really good idea to have a memorized response to the question, What is bipolar disorder? Most people are genuinely curious and want to know. If you're seeing a new HCP who has not worked with the illness before,

your explanation can really make a difference in the way they work with you. It helps if you have a set response that explains the illness and then explains your form of the illness and where exactly you need help. This is a bit of a heads up for your HCP and can really help communication. How do you want to explain bipolar disorder to a new HCP?

### Tip #16: Find a HCP Who Understands Bipolar Disorder

It really does make a huge difference to work with someone who has direct experience with bipolar disorder. A GP who has a working knowledge of the illness as well as clients who have bipolar disorder can really make a difference. This goes for all of the people you see. Understanding bipolar disorder implies that they understand that it's an illness and not a psychological problem. They should understand what the different mood swings look like. It's especially helpful if the HCP you see has a family member with bipolar disorder. You can certainly call ahead and ask for this information.

### Tip #17: Make Sure Your HCP's Know Bipolar Disorder's Risk of Suicide

Here are the facts:

Statistics say that there is an up to 20% suicide rate in bipolar disorder. This is a really serious number. I think that people, especially some HCP's take this too lightly. For those of us who regularly battle suicidal thoughts, it's extremely important that the people we work with understand that suicide and bipolar disorder go together. There's often nothing wrong with you when you're suicidal other than bipolar disorder. In other words, being suicidal doesn't mean that you really want to end your life because of something specific. You can be suicidal simply because you're sick and the illness is strong. If your HCP understands this, they will be more able to help you with the illness instead of trying to figure out what's wrong with your life. In other words, educated HCPs know that suicidal thoughts are sign that you're having mood swings. They're not necessarily a sign that your life is a mess and you need therapy. If you have a tendency towards suicidal thoughts, it's important that you talk with your HCP about this before you get suicidal. Let them read your Suicide Health Card so that they can be aware of what you think, say and do when you get suicidal. This can prevent a suicide attempt and help you find stability more quickly.

### Tip#18: Find a HCP who is Open to Complimentary Treatments

*Julie, I really appreciate all you've said in this radio interview because I am bipolar I and I have been on many meds as well and also I have rapid cycling*

*and three different doctors have prescribed Zyprexa for me and it has very negative side effects such as weight gain, diabetes, rapid heartbeat, tardive dyskinesia!! Not for me!! I mean I do have the right to refuse some meds, I think!! I wish I could find a naturopath in the area where I currently live so if you know of one, please let me know!!! Thank you for your insight!!! I know I need some medications, but I'm willing to try other things such as diet and exercise to help reduce my symptoms.*

*I've really explored other treatments for bipolar disorder. I think that having a personal trainer who really helps me work my body correctly has made a great difference. I try to get massage and facials - that really helps with anxiety and depression. Chiropractic treatments help. I use homeopathic remedies for a lot of symptoms and I am watching my diet. This all helps. I don't know why, but these non western doctors seem to have a lot more time to listen to me and what I need. My doctor always seems so busy and focused on medications. I know I need the medications, but I need a lot more as well. Can't they make a handbook for us or something?*

There are many ways to treat bipolar disorder. Medications are always the first response. They save lives and certainly play an important role in your treatment plan. But if you don't have optimal response to medications, and few people do, it may be that you will want to look for a HCP with training in complementary treatments for bipolar disorder. This includes amino acid treatment, herbs, diet, exercise, homeopathic treatments, and body work. No, I'm not saying this is all you need to treat bipolar disorder. The illness, for most people needs to be treated with a combination of western and more alternative treatments. The most important thing is for you to make sure the HCP has experience with bipolar disorder and understands the seriousness of the illness.

### Tip #19: Help Your HCP Listen to You

I think that all of us with bipolar disorder have to become educators. People really are quite ignorant about what we go through. We naturally expect the majority of HCP's to understand what they are treating, but if you think about it, this really isn't possible. They have to see way too many illnesses to actually understand what each person goes through. So it's up to us to teach them what we need. If you feel that someone is just seeing you by rote, in other words you feel like you're just one in a long procession of daily clients, then say something. Look them in the eye and say, "I really need you to listen to what I'm saying. I feel like you aren't hearing me. Can we talk about this?" It's so scary to do this at first. Asking someone to listen better feels like stepping over the line, especially if you're intimidated by your HCP, but you simply have to do this if you feel you're not being heard. Think of ways you can teach the people in your life to listen

better. Sometimes it means you have to become a better listener first and then teach them to do the same.

### Tip #20: What to Do When You Want to Change Doctors

I think that many of us get to a point where we realize that the person we're paying to help us simply is not doing their job. Maybe we're intimidated by the HCP. Maybe they're burned out. Maybe they're arrogant. Maybe they don't believe you when you talk about your symptoms. You may need more quality time or compassion, or maybe there is simply a personality clash. This is normal and nothing to be ashamed of. It doesn't mean your doctor isn't a good doctor, but simply that they're not the best doctor for you. It can be very intimidating and scary to see someone you don't connect with and it certainly doesn't help you find stability. Isn't it interesting that we're regularly taught to leave relationships that cause us trouble, especially romantic relationships, but when it comes to something as important as our health care, we all tend to stick things out to the bitter end. It doesn't have to be this way. Your health is far too important to settle for someone who is not helping you stay well.

Whatever the reason, if you really feel that you need to change HCP's there are some steps you can take to make it easier. It may be that you can simply call your doctor's office and ask to see someone new. The receptionist may be able to do this without much hassle. You can also call your insurance company and ask about your options. These of course are the best case scenarios. For many people, it's not very easy to change doctors. Especially if you're on assistance or don't have any kind of insurance. But there is hope. Don't stop until you get the help you need. Call around. Ask for help and be very clear, patient and calm when you do this. As said before, it's so important that you don't make decisions when you're sick and fire a perfectly competent doctor because you're paranoid for example. (I've done this, so I speak from experience.)

If you're unhappy with your health care but can't change the people you see because of financial or insurance reasons, then it's time for you to try to change the way your doctor interacts with you. Be honest and tell them in realistic and reasonable terms what you need. Be calm and professional and ask them to step up and provide better health care. It may be that they're just simply tired and have forgotten that they need to give a personal touch to their appointments. You can be the one to remind them. You can be honest and tell them that you feel rushed and worried after an appointment and then ask them for their ideas on how you can both improve the situation. This will at least start a discussion between the two of you.

### Tip #21: Remember that They're the Employee – You're the Boss

Something happens to us when we have to see a HCP, especially for something as serious as bipolar disorder. We tend to simply give ourselves over to them for care and expect them to do what's right in a friendly and professional manner. We forget that we're the ones paying for this service. This means we have the right to ask for the best service possible. We have the right to fire someone if they don't meet our reasonable needs. We have the right to expect professional and kind health care. We have to take back the control we have given to the health care profession and remind ourselves that we have more say in our health care than they do. This makes some people nervous. I know that I've struggled with what to do when I receive poor health care. Things changed when I realized that I was entering into the health care relationship in the wrong way. I walked in thinking they were gods and I was just supposed to listen to them. The day I took charge of my health care and saw my health care professionals as a part of my team and not the leaders of my team, I received better health care because I looked for and asked for what I wanted and needed. You really can do the same.

### Tip #22: Be Very, Very Clear on What You Need

When you see a HCP it helps if you have a goal in mind for the meeting. If you're seeing someone who tends to talk too much about their personal lives and you find it stressful, you will need to tell them. If you see someone who doesn't listen to what you want but instead does what they think you need, you will have to tell them what you need and make sure they listen to you. This can be really difficult, but it really does get easier once you get through the first time of sticking up for yourself. If you have a therapist who tells you their personal issues, you have two options. To ask them to stop or to find someone new. If you have a doctor who treats you like you're dumb and they have all of the answers, well, you're taking care of yourself if you point out that this treatment is not helping you and then tell them what you do need. All of this is hard at first, but once you learn to be this way with all of your HCP's, you'll wonder why it took you so long.

### Tip #23: Know Your Official Diagnosis

Your official diagnosis really does make a difference when you see a HCP. For example, someone with rapid cycling bipolar disorder should not take antidepressants without strict supervision for rapid cycling. Bipolar I and Bipolar II are often medicated differently as is bipolar disorder that is more on the mania side than the depression side. There is no doubt that if you're diagnosed with bipolar disorder, you need to know your correct diagnosis exactly, especially if you're seeing a general practitioner who prescribes drugs. If someone has diagnosed you without getting really specific about the form of the bipolar disorder you have, you need to go back in and get an official, written diagnosis.

### Tip #24: Educate Yourself on Bipolar Disorder and the Medications Used to Treat Bipolar Disorder

The more you know about your particular form of the illness and what medications you've tried in the past as well as what you're taking currently, the better healthcare you can receive from your HCP's. Taking medications blindly is no longer acceptable. It's perfectly okay for you to carefully question your doctor on why they are giving you specific medications. You can say, is this an anti depressant? Are you aware that anti depressants are not usually recommended to treat this illness unless they are used with a mood stabilizer? You can say, I tend to have a lot of side effects with anti psychotics. Is this one different from the ones I've tried in the past? I personally took medications blindly for three years before I woke up and realized that the medications were not working for me and that I needed a different kind of help. I now know all of the different types of medications used to treat bipolar disorder. I never take a medication without knowing why and how it's used to treat bipolar disorder. And if a medication has unbearable side effects I let my HCP know and we have a discussion about it and I then make the decisions about what I put in my body. Of course this all rests on whether I'm stable or not. I have to make sure I'm being reasonable, but I now know that I am the one taking the medications, not the doctors, so I am going to make darn sure they are the right medications for me. You can do the same.

### Tip #25: Tape Record Your Doctor Visits

Doctor appointments can feel so rushed. If you're having a tough day, especially one where you're having ADHD type symptoms, it's really important that you plan carefully for your doctor appointments. As mentioned before, one of the best ways to do this is to have your questions written out and ready for the doctor. You can even have them read the questions and answer them one by one. The next step is to tape record their answers. This is really helpful if you feel spacey and sick.

### Tip #26: It's Okay to Interview a New HCP

It helps if you ask yourself some questions about what *you* want before you choose a new HCP. It really is true that many of us spend more time in a grocery store picking out fruit than we do interviewing and choosing the people who help us stay stable.

Here are some questions you can ask yourself before picking a new HCP:

- ◆ Does the person take time to talk with patients? Do they explain what is involved in the diagnosis and treatment of bipolar disorder?
- ◆ Does the person understand the physical issues you may have due to the mood swings and medications?
- ◆ Does the person talk in a language you understand? Do you feel you are working together as a team? Do you feel listened to, understood and respected?
- ◆ Does the person understand that bipolar disorder affects your personal life as well and that you need help in that area?
- ◆ Does the person emphasize wellness and self care by encouraging you to take charge of your own healing process so that you can find physical health and mental stability?
- ◆ Is the person open to your supplementing more traditional treatments with complimentary treatments?
- ◆ Can you reach the person at night or on weekends in case of an emergency?

Questions to directly ask a prospective HCP:

- ◆ How much experience do you have with bipolar disorder?
- ◆ Are you familiar with the latest medications?
- ◆ What are your ideas on treating this illness successfully? Can you tell me a little bit about yourself, where you went to school and your treatment philosophy?
- ◆ What is your philosophy on complimentary treatments?

### Tip #27: Share Your Health Cards with Your HCP's

It's very natural for me to tell everyone about my Health Cards. It's no secret that I have bipolar disorder and that I write books on the topic. All of my HCP's get a copy of my books. If we work together regularly, they will need to know what my symptoms are for specific mood swings. If it's appropriate, it's a good idea for you to share your Health Cards with your HCPs. You do need to make sure they have the time and inclination to read your cards, but if appropriate, your Health Cards can be a great addition to your HCP's tools.

### Tip #28: Take Care of Yourself First: Create a Hierarchy of Needs

I know that one of my main challenges when I was first diagnosed was that I was so sick, there was no way that seeing my doctor once a week for 20 minutes was enough. I simply needed more. I was shocked by the news that I had bipolar

disorder (especially after all I went through with my partner being diagnosed with bipolar disorder the year before) and I felt my world had been turned upside down. I became very, very needy and I looked to my doctor for way too much help. And when my doctor was not available, I overburdened my friends and family. I seemed to lose the ability to take care of myself, but the ability was there. It took me three years to find the strength to say, "I know what I need and I'm going to go find it." I was very sick when I made this decision, so it's not like I was well and had a clear mind. But something in me knew that if I didn't make some significant changes I would be dead. I went back to my natural medicine roots. I changed my diet and started exercising. I stopped the drugs that were making me so ill and stuck with the ones that did help. I looked at my options. And I slowly got better. One of the ways I did this was by creating and sticking to a hierarchy of needs. When I'm feeling really needy, I remind myself that the people in my life have their own lives. I have to spread out my needs very carefully.

The following excerpt from *Bipolar Happens!* explains the hierarchy of needs:

### NEEDY

It's easy to become very needy when you're ill with bipolar disorder. Depression is so very lonely and the only way you can feel alive is to be with others. This makes sense to you- but is it working for the people in your life? Are you needing too much from the people you love? Are you looking for help from the wrong people? Are you overwhelming people with your needs? Can you examine that and see if you can make some changes? I know, believe me, I know how hard this is. But one of the ways that you can help yourself get well is to realize the effect you have on other people when you're sick. I lost so many friends and stressed so many people by simply needing them too much. I knew I had to change and here is what I do now:

1. I try to help myself before I go to others for help- I get out the Health Cards and see what I can do for myself
2. I turn to professional help if at all possible- professionals are used to mood swings
3. I find people who understand my needs and are not overwhelmed when I'm ill
4. I use diet and exercise to help myself when I'm really down
5. I tell people that I'm ill and if they offer help I take it- if not I look elsewhere. I don't hold this against them
6. I take the medications I can tolerate (I wish I could take more!)
7. I really try to understand who can help me when I'm ill and who can't
8. I join professional groups that offer support in other ways (such as Toastmasters) and then when I'm down or ill I can be in a supportive environment that has nothing to do with bipolar disorder

9. I do something I love, such as singing
10. And when I really need it, I call a friend and say- I'm down. I have done all I can to get well and I would just love to do something active so that I can get better
11. I don't call my mom and cry on the phone every night- as I did the first years I was so ill. My poor mother. She never let me down, but my calls really were way too much for her
12. I accept that being needy is a sign that I'm depressed and that feeling needy is normal when I'm depressed. I know now that I have to treat the depression first instead of acting on the neediness

So, get help from others when you really need it- not just as a reflex. People need breaks too.

\*\* end excerpt\*\*

It's easy to overwhelm your HCP and the people in your life with your needs. You can create your own list like the one above and spread out your needs to that you don't burn out the people in your life who want to help.

### Tip #29: Remember That You are Only One of Many

When you visit your health care professional, they are your *one* resource, but for them, you are one of many, many people who turn to them for help. When you're sick, this is easy to forget. You need so much and they only have so much to give. When you see your HCP, ask yourself how many clients they will see that day. How many clients do they see in a week? A month? How much energy can they realistically have for you? The more you are aware that you really are one of many, the easier it is to see why they may not be able to always help you in the way you need to be helped.

### Tip #30: See Your HCP When You're Well

If you can, see your HCP when you're well so that you can check in and work on a plan for what you both need to do when you get sick again. If your HCP only sees you when you're sick, there is no way they can know what the real you acts like. They will only see the mood swings. The work you do with your HCP when you're well sets the foundation for when you get sick. This is especially important for the person who does your medications. When you're well, you can do the following:

- ◆ Create a plan for what you will do if a crisis hits and you have a serious mood swing reaction.
- ◆ Create a chain of command for whom to call if you need immediate help.

- ◆ Talk with your HCP about what it feels like to be “normal” for you so that they can use this information when you’re sick and not making sense.
- ◆ Take the time to focus on what is going well in life and remind yourself that there is hope with this illness.

It’s also very important to see your HCP when you start to feel manic. So many people only visit a doctor when they’re depressed.

### Tip #31: How to Communicate When You’re in Crisis

Asking for help when you’re really sick is very hard. If you’re suicidal, it takes over your life. There is little room for even picking up the phone and saying, “I need help.” The best way to communicate when you’re in crisis is to have something set up ahead of time that you can use when you just get too sick to communicate at all. I use the Health Cards for this. When I’m too sick to talk about what’s going on, I can manage to say, “You may want to look at my Suicide Health Card.” My HCP’s already know this card and can get it out and know what to do. This takes preparation.

If you’re well right now, you can get started on a plan for when you’re in a crisis. This is really difficult if mania is the problem. By the time you’re in a manic crisis, your ability to ask for help is gone. Once again, you need to have HCP’s who are aware of your mania signs so that they can help you as soon as they see it starting. Yes, this is hard. Your resistance will be strong. But it’s a reality of the illness that you need help managing the mood swings. I know that I have taught the people in my life to vigilantly look for signs of mania. It upsets me when they do it because I’m usually caught up in the first stages of mania and I just want to have some fun for once, but they know that I need this help when the illness is strong. An understanding therapist is one of your best tools when you’re in a crisis. The more you teach them to look for signs that you’re getting sick the better chance you have of catching the mood swing early enough to do something about it before it goes too far.

And finally, it’s perfectly all right to say, “I’m too sick to help myself right now.” You may have to call your HCP and say this. It’s not a weakness. It’s a part of having bipolar disorder.

### Tip #32: Understand HCP Burnout

Some HCP’s are simply burned out. They need a break and they need more time with their patients, but the system they work in dictates how much time they get with a person, how much they charge and what medications to use. This is tough.

Even though we have raised doctors to near mythical heights in our society, your health care professionals are very human. They may have struggles that you can't see and on top of it all, they have to help sick people all day. They worry about suicide and whether you will be okay after the visit. They have to learn not to take your problems home with them. They struggle with wanting to help and not wanting to burn out. They struggle with insurance and paperwork and the medical system that often worries about money more than helping clients. They are often the only thread that keeps a person alive. Just imagine that responsibility the next time you see your health care professional

When I started my work with bipolarhappens.com, my entire goal was to help people find relief from bipolar disorder. I had been very ill for many years and when the Health Cards gave me my life back I wanted to share the system with other people. I also wanted to finally be able to support myself as I was not able to work full time for many years. I had this vision of writing my books and helping others find a way to live a stable life.

I had no idea what a struggle this would be health wise. I became a health care professional without even knowing it. Soon I received thousands of emails asking for help. People wrote who were suicidal, angry, depressed, manic, psychotic and very, very worried about work, family and life in general. I received letters from absolutely desperate friends and family members. At first I answered all of my email. I reasoned with myself that answering this mail and helping others would make my books stronger. But the toll on my health was much more than expected and I eventually had to stop answering email completely. I understand what a doctor must feel. There is only so much one person can do. People kept writing anyway and some accused me of only being out to make money off of sick people. Those emails were not what I needed, as you can imagine. But I have a commitment to this work and I will keep going. It's the same for the HCP's that you see. They want to help people, but it's easy to get really burned out from helping so many people.

I'm learning to find a balance, but it has been hard. I imagine it's hard for your HCP as well. They may have a burning desire to help people who are ill only to be burned out by the bureaucracy of the health care field. It's okay to ask them about this. It may make your relationship stronger.

### Tip #33: How to Deal with an Arrogant Doctor

*When are the doctors going to listen to me! The medications aren't working. I am sicker than I was without them. What are my options? Why won't they help me? I can't keep trying all of these meds. It's too expensive and they make me so sick physically. My doctor just acts as though I have no idea what I'm talking about!*

*Listen better and understand that I'm scared. That is all I want my doctor to do.*

*I can't talk with my doctor. He's arrogant and thinks he knows more than me.*

When you're sick, the last thing in the world you want to deal with is a doctor who doesn't listen, treats you like you're meaningless, won't look you in the eye, doesn't have any time for you, blows off your concerns about side effects, never listens to your ideas and then of course sends a big bill. Luckily these nightmare doctors are rare, but if you do get one, they can really affect your ability to find stability. Your best choice is to change doctors. There really is no excuse for arrogance. If your concerns are reasonable and you're sure you're not paranoid, then you have every right to let go of an arrogant HCP. If changing doctors is not possible, the next step is to change them and how they treat you during an office visit. You can do this with a complaint letter like the one Ivan wrote in tip #4 or you can literally call the doctor on their behavior. When the doctor says something or does something particularly hurtful, you may have to get up your courage and say the following:

*You're probably talking to me this way because they taught you this in med school, because you're burned out or because you have forgotten I'm a scared human being who has a really serious illness. Maybe you're talking to me this way because you've seen so many people in this office you forget that we are people and not robots. I need more from you. I need you to look at me and hear what I need. This is what a doctor/client relationship is about. I'm sick. I'm not able to manage this illness on my own. I see you and pay you because I need your help.*

Oh yes, this is very hard at first. But once you do it a few times, you'll be amazed at how well a HCP will respond. If you have some great HCP's in your life whom you trust, ask them their opinion on what to do about an arrogant doctor. Arrogance is often a mask for a lack of social skills. If you can remember this and teach your doctor some of these skills, you have a better chance of getting the help you need for bipolar disorder.

### Tip #34: Create Better Communication with Your HCP

One way to create better communication during an office visit is to ask questions. Questions are non threatening and allow you to get more information before you make a snap decision about your health care. Here are some sample questions you can ask if you're feeling frustrated about your relationship with your HCP:

- ◆ I often feel stressed because we have so little time to talk about my treatment. Do you have any suggestions on how to improve this?
- ◆ I need more help with this illness. Do you have any suggestions?

- ◆ I know that you're very busy, but I need to know the ideas you have on how I can treat this illness more effectively.
- ◆ The med side effects are too much for me right now. I need your help. I know I should stay on these meds, but as of now, it's not looking too good. Do you have any ideas?

You always have the option of telling your health care professional what you're really thinking. This is much better than going home stressed and worried about your treatment future.

### Tip #35: How to Deal with a HCP Who Doesn't Have Enough Time

*The hardest thing for me is the limited time I get to see my doctor. I get flustered and can't remember what I want to say. It seems the time just flies by and all we do is talk about medications. I need a lot more than this.*

*Having a compassionate health care person who has time for me keeps me alive and I'm not kidding.*

*My doctor doesn't seem to have enough time and often seems annoyed during my visit, perhaps because I have so many questions and need so much help and there's no way he can get to all I need him to get to. All he wants to do is talk about my medications and that is only one little part of what I need to talk about!*

Time. This seems to be the biggest complaint people have when they write bipolarhappens.com about their problems with HCP's. Accepting that this is going to be the norm when it comes to seeing traditional doctors is one of the best ways to stay calm and focused during your appointments. Most doctors are rushed. Most wish they had more time to really talk about your case in depth. The facts are that they don't have enough time and probably never will. The more you can accept this, the easier it will be. Western doctors are trained to quickly access a problem and prescribe a treatment. Talking and learning about their patient in detail is usually not part of the training. Of course, there are exceptions to this description, but as those of us with bipolar disorder know, seeing a doctor who doesn't have enough time is what we can normally expect. Things are changing. Slowly. Luckily you have options.

If you see someone who doesn't have enough time, you can change to the type of HCP who usually has more time to talk with you and learn more about you. These include nurse practitioners who can prescribe medications. Naturopaths who can work with your medications doctor. Therapists who understand bipolar disorder and a variety of other HCP's who can help you with everything that the too busy doctor can't. It may be that you keep a medications doctor and then see other

people for all of your other concerns. Yes, this can be expensive. And if you don't have insurance to help you out, it may feel impossible. Don't give up. If you're on assistance, look around until you find someone who has time for you.

### Tip #36: How to Respond to the *Let's Just Give it More Time* Response

“Let's just give it more time and see how it goes.”

Oh how I used to hate those words. My first psychiatrist wanted to help me. But all she seemed to know was drugs. One after another until I had tried 23. I was physically ill every single day for three years due to medication side effects. I gained a huge amount of weight, lost teeth, my muscle strength and my fingernails. I had skin problems, sleep problems and memory problems. The side effects were literally endless and yet she kept giving me new drugs for three years. I was too sick to know any better. I thought she knew what she was doing. Well, she didn't and I wish that it had not taken me three years to say ENOUGH and change doctors.

There is a reason behind this as many medications do take time to work and the side effects can calm down. But what if the side effects really are too much and you are going to quit the medications anyway? What if you're very overweight, lay on the couch and cry all day? Action is needed and you need to be heard.

Being truly honest with your HCP can help in this situation. You can say, “I know you want me to give this more time, but the truth is that I'm out of time. I know I won't stick with this treatment plan if the side effects stay as they are. I want to be honest with you about this. The whole situation is too difficult for me and I need more options.”

I know that if I knew then what I know now, I would have waited for the old drug to clear from my body before I tried the new drug. I would have said after gaining fifty pounds that things had gone too far and we needed to do something different. I would have believed in myself more. Even when you're really sick, you know when enough is enough. You are the one who has to tell your HCP, “No, I'm not going to give it more time and see how it goes. I need help now. It has been long enough. I need more help.”

### Tip #37: Use the Internet Wisely

I have heard HCP's say that there's nothing more annoying than a client who comes in every week with new and contradictory information that they get from the internet. There is no doubt that the internet is a great resource, but it's also a place to find a lot of conflicting information. You should use the internet to find out information about bipolar disorder, but it's also important that you not overwhelm your HCP with your questions and suggestions about all of the latest treatments. Use your information wisely. This goes for email as well. Email is so quick, but it is very time consuming for the person on the other end. Email also lets you say things you would not normally say. I suggest that you only communicate by email if your HCP specifically asks you to do so.

### Tip #38: How to Talk with Doctors Who Don't Give You Enough Information

*Where can I get information about how to tell which kind of bipolar illness I have? My doctor thinks I have bipolar II but he didn't tell me why. He said there is something called bipolar III too. What is this all about and how can I find out? So far my web search is not turning up much. Any info from him would be appreciated. I was able to get a Doctor to work with me for a week on a crisis basis - but now - 8 days later I'm at home and online trying to find some way to help myself. The doctors in my area cost \$175 an hour and even if I had that kind of medical coverage they don't direct bill! What am I supposed to do?*

First of all, a HCP that won't give you information is a troublesome HCP. Part of being in this profession is answering questions. If your HCP won't answer them, it may be a sign that you're not with the right person. You can try the following and if it doesn't work, changing to someone who will talk with you may be your only option. There is often a simple way to get more information out of your HCP.

*I have heard that there are many different types of bipolar disorder. I also know that it's especially important to have a specific diagnosis of either bipolar one or two as the treatment plan for each might be different. I also know that I need to know if I have rapid cycling. I have a few questions about this. Where can I get my thyroid tested? I know it's the first thing a doctor does after a tentative diagnosis of bipolar disorder. Do I have mania or hypomania and what is the difference? If you are not sure of these questions, I would very much like to see a specialist who regularly diagnoses bipolar disorder and knows what medications and other lifestyle changes I should try.*

## Tips for Friends and Family Members

*You know what? I've figured something out. If you're a loved one, doctors don't understand what you need. If a health care professional doesn't have enough time for their own patients, they certainly don't have time for friends or family members.*

### Tip #39: When an HCP is Rude

What on earth do you do when someone you love is sick and the person who is supposed to help you is rude? First of all, it always helps to remember that HCP's are often tired and have seen ill people all day. You are not the person with bipolar disorder and they may see you as just one more obstacle in their day. You take their time and they don't have time. Many HCP's forget the sheer terror you feel when someone you love is sick. *They* are used to sick people. Unfortunately, in order to do the work they do, especially in a hospital setting, they have to become somewhat immune. Your job as a loved one of someone with bipolar disorder is to kindly remind them that you're human and that you need individual attention.

Do you remember the movie *Terms of Endearment*? In this film the Debra Winger character is dying of cancer and her mother played by Shirley McClaine walks in her hospital room and sees that the morphine drip is stuck and her daughter is in pain. She goes to the front desk and says she needs help. No one really pays attention to her. She bangs her hand on the counter and screams, "My daughter needs drugs!" They finally listen.

This may be what you have to do in order to get your loved one the help they need. Sometimes it takes acting like a roaring mother or father bear to get the HCP's to see that you're desperately trying to save the life of the person you love. At other times it takes a calm, rational approach. Of course this takes judgment on your part. You can't rage all of the time and expect special treatment when there are other people that need just as much help, but if there is a situation where your loved one is in danger and the HCP's are not giving you the help you need, then you have to get firm.

When my partner Ivan came out of the hospital he was really too sick to be home. If I had known more and if the doctors and nurses had been more helpful in telling me what I needed to do, I would have helped Ivan go to a halfway house or another hospital. I was very naïve and just wanted him home because I missed him. But he was barely able to take care of himself. I had just started a business and had very little extra money and our insurance dropped Ivan as soon as they

heard the diagnosis was bipolar disorder. (WHEN are we going to have insurance reform in the United States?)

Ivan was placed with a social worker, doctor and nurse at a community psychiatric center. The care was minimal. All of the staff were very overworked. They were so busy they had little time for me and my questions. One day, I went to an appointment with Ivan and his nurse. I started to explain that Ivan was not doing very well. He was getting depressed and the lithium made him shake so badly he couldn't write. He had trouble concentrating and I was very worried for his future.

The nurse looked at me and basically said, "Is this really any of your business?"

I knew very, very little about bipolar disorder at this time. I had been living with it for years, but would not be diagnosed until the next year. My ONLY hope was with these health care professionals and they failed me miserably. I think the seed of my mental health activism started here without my knowing it. I knew that I was keeping Ivan alive. I knew that he was not able to function on his own, but I just didn't know where to turn for help. I'll never forget how I felt on that day. I knew that Ivan was getting sicker and sicker. He had just spent three months in the hospital in a manic/psychotic episode. I had no idea what was happening and I naturally turned to his nurse for help. The nurse dismissed my concerns and called me interfering.

A few weeks later Ivan went into a severe downswing, tried to buy a gun and went back into the hospital.

All of this could have been prevented with better health care. With health care professionals who had the time and energy to give me tips on what to do to keep him safe Ivan would not have had to do another emergency visit to the hospital. I would not have had to go through months and months of unbelievable stress. The system failed us. I know so much more now.

It's painful to even write about this ten years later. HCP's are often our life line, but when they are rude to family and friends, we MUST take a stand and tell them to stop and help us instead of putting us down. We are talking about life and death when it comes to bipolar disorder.

If you love someone with bipolar disorder and feel they are not getting the help they need and the HCP is rude to you when you ask for their help, first of all remember to be reasonable and very rational when you talk and then just let them have it. You do have the right to be brutally honest. Here is how I would talk to nurse today if I were in the same situation:

*"I take care of Ivan 24 hours a day. He is not able to work or even do the basics*

*needed to take care of himself. I'm not interfering by wanting to keep him safe. I need you to help me find what I need to do to get him the help he needs. He is getting depressed. He was severely ill and in the hospital for three months and I now I see him getting sick again. I need help now. He needs help now."*

Then I would write a very pointed and professional complaint letter and make sure the agency apologized to myself and Ivan and then found us a new HCP. Yes, it would be very scary to do this, but it's scarier to look back and realize that if Ivan had bought that gun and I had not been the "interfering" partner who did everything possible to get him back in the hospital, Ivan might not be here today. When the person you love is really ill, you do what you have to do. Period.

#### Tip #40: Working within the Broken System is Difficult but Possible

I lost my ability to think rationally in some of the situations I found myself in when Ivan was in the hospital. We had to go across the street to the small court room for a trial that would determine if he could stay in the hospital longer. He was so psychotic they had to strap him to the wheel chair. He could not communicate with me at all. He kept thinking that someone was trying to shoot me. When the judge would talk he would say, "Did you hear that gunshot?" At one point the judge asked him if he felt he was well enough to go home and he looked at the microphone on the table in front of him and said, "Yes, I am fine," in a clear voice. I just about screamed. Was the judge going to listen to him? Was this judge crazy? Were the lawyers crazy? Why were they asking a very obviously ill man if he felt he was competent? He was psychotic! Why wouldn't they listen to me or my brother who had been appointed his guardian as a non biased third party? I was just getting ready to say something when the judge asked the question again and Ivan replied, "No, I'm not fine. Has Julie been shot?" It was pretty obvious then that Ivan had no idea what the judge was saying and just answered whatever came to his mind, but the whole process was scary and ridiculous to me. It was obvious he was sick. I know the court process is done to protect the mentally ill from being unnecessarily committed as used to happen before laws were created. But there has to be a reasonable way to deal with this. What we have now is all for the patient and does little to help the family.

My whole issue with the situation (and I still have a big issue with this) is that the system we have created only listens to the ill person. It does not listen to the family members. This makes it very hard for family members to maintain a calm demeanor when faced with the system. The history of mental illness and the commitment of people to life long stays in terrible mental institutions really hangs heavy over the memories of our law makers. They don't want involuntary commitment of well people to ever happen again just because a family member wants to get rid of them. The problem is that it has gone so far in the other direction that friends and family are often left out of the decisions and very obviously sick people are let out of the hospital simply because THEY say they

are fine and don't want to be there. It's obvious that a balance needs to be found. To expect someone in a serious bipolar disorder mood swing to make their own decisions is dangerous. Isn't it ironic that as friends and family members we often have little say in treatment plans, but we are 100% responsible for the person when they are let go from the hospital.

What are your options if you are in this situation as a friend or family member? The first is to be very, very clear when you talk to HCP's about your loved one. This is when it pays to be calm in a crisis. In most states in the United States, an enforced hospital stay requires that the person is a danger to themselves or others. This means you have to prove this by what you say in order to get someone the help they need. This means you need to be very clear when you talk with the person who decides if your loved one goes to the hospital. It means that you may have to talk with police officers who have arrested your loved one or the social worker who has been assigned to the case.

Here is an example of what you will need to say if the person with bipolar is obviously in an out of control mood swing:

*I'm worried for the safety of my loved one. He has not been himself and has decided that he doesn't have an illness and that he no longer needs his medication. In the past, this has proven very dangerous and I'm scared he may hurt himself. I'm also scared for myself as I'm not sure if this psychosis is violent or not. I need help here. I can't do this on my own. He desperately needs professional help.*

Police officers, social workers and hospital intake workers listen when you talk this way because they have to. They are trained to hear the words danger to himself or others and that is what they react to.

Of course, this needs to be a true worry, but I think you get my meaning here.

#### Tip# 41: Remind the HCP that You're Scared and Need Their Help

When Ivan was in the hospital, everyone in my life acted as though life should go on as normal and yet my life was falling apart – I was scared out of my mind every single day. No one really understood. The doctors acted like it was an everyday occurrence to wake up next to a really psychotic man. They had forgotten the fear I was going through. They needed to remember my fear. I honestly thought the person I loved the most in the world was never going to come back. I thought he was going to be this ill forever. The HCP's knew this was not true, but somehow they forgot that I needed to hear it every day.

It's okay to tell the HCP that you need a lot of information and a lot of help during a crisis. They will probably direct you to a mental health organization, but at least they are hearing you. Write out your questions. Ask for help from the right people and don't stop until you get the help you need. Remember, when you're scared, it means you're lacking information. Often, the HCP has the information you need and has just forgotten to tell it to you.

### Tip #42: How to Stick Up for Yourself as a Family Member, Partner or Friend

Mental health laws in the United States today favor the patient. Period. No matter what state you live in, the facts are that the person who is mentally ill and often very sick will be asked to make decisions right in front of you even though it's completely obvious the person is too ill to function, much less make decisions about their own treatment. You will have to learn the system. You have to learn who in the mental health system makes the decisions and what laws they have to follow and what laws can be bent. You need to find what your rights are and then what you need to do to make sure your loved one gets the help they need. Finding an HCP advocate is often one of the best ways to do this. I know that there were many wonderful nurses when Ivan was in the hospital. I still remember the name of my favorite one and I know that he helped me make it through the most traumatic time of my life. It's easier to stick up for yourself if you find the right person to help you. Here are some tips:

- ◆ Social workers often make decisions regarding who stays in the hospital. Learn what rules they have to follow and learn to talk with them respectfully, but never be intimidated. They are there to help you and sometimes you just might have to remind them of this fact.
- ◆ When you feel the balance shifting to the ill person, remind the staff that you're the one who will take the person home and that you need help on what to do when that happens.
- ◆ If anyone says that you don't have a say because you're not a "spouse," "member of the family," etc, etc, remind them that nevertheless you are the one who cares for the ill person and you need to know what's going on. This may not work, but you can certainly try.
- ◆ Expect frustrations. As said before, the system is not for you, it's all for the patient. You will have to speak loudly to be heard.

### Tip #43: How to Talk to Hospital Staff

Talking with health care professionals when your loved one is in the hospital can be quite a challenge. People in the hospital see someone like your loved one all

day long. They are used to restraints, suicide attempts, medication refusal, violence and lack of response. But for you, it's devastating to see your loved one so sick. For many people, the shock of putting someone in the hospital can last for years. I know it did for me. I also know that the nurses were very kind to me when Ivan was in the psych unit for three months. But they did not give me any tools for dealing with what I was personally going through. They had forgotten that it was all new for me. It wasn't new for them, but for me it was terrible, scary and life changing. Here are some tips for talking with hospital staff:

- ◆ Make eye contact. Get them to look at you as a person and not just someone visiting one of their patients.
- ◆ Remind them that this is all new for you and you need resources.
- ◆ Turn to people who seem more willing to help.
- ◆ Accept that you probably will not meet the doctors. Nurses are often the ones who run the show.

When Ivan went to the hospital the second time, he was very ill and could not communicate at all. They strapped him to a bed and asked me to wait in the waiting room while they called a social worker. I literally had no idea what was going on. I could hear him yelling nonsensical things as I sat looking at some a football game on the TV. I was scared and had no idea what to do. I saw a nurse go into his room and then come running out. She seemed upset. She said, "I don't think it's safe to go in there. He is violent and just tried to urinate on the floor." She said this in a very unthinking and cruel way and I was just devastated. Violent? Ivan? He had never been violent. His behavior made no sense to me. Her reaction only made it worse. Even now, ten years later it makes me livid to think of how this woman dehumanized Ivan and never once thought that her words might scare me even more. She worked as a night nurse in a very busy state emergency room and she acted as though she had never seen a psychotic person in her life. She acted as though he was an animal. I truly wish I knew then what I know now, because this woman would have been reported to the hospital manager.

Thankfully, I do know a lot more now and I know how I would respond to her behavior if it happened today. I would say, "Ivan is ill. He is a kind and gentle man who has an illness called bipolar disorder. He can't help his behavior when he is this psychotic and manic. I would assume that you've seen many people with bipolar disorder and there's no reason for you to act as if his behavior is something abnormal. It's not. He deserves your respect, not your fear. I suggest that you learn more about this illness so that you are not so shocked the next time you see someone who is having normal symptoms of mania and psychosis."

And then of course, I would write that complaint letter!

Unfortunately, we don't live in this perfect world where we know all of the facts and have the words to say right when someone upsets us. Ten years ago I had no idea what bipolar disorder was and I certainly didn't know that Ivan's behavior was normal. But ALL of the HCP's in the hospital had been dealing with bipolar disorder for years and for them not to sit me down and tell me what to expect is simply negligent. If this is happening to you now, it's up to you to change things. The more skills you learn to talk with hospital staff, the more help you can get for your loved one.

#### Tip #44: Talking with Social Workers Takes Some Skill

Social workers have rules to follow. The more you know about the rules, the less frustrated you will be. I know that when I had to commit Ivan to the hospital and the on staff social worker said he couldn't be admitted because he had not tried to hurt himself or me, I just couldn't understand the social worker's absolute blindness to our situation. Ivan was strapped down in the other room yelling about using water as medicine and this social worker was telling me that he didn't meet the criterion for being committed to the hospital. I was shocked and frustrated when I came up against that obviously broken system. And the social worker just looked at me and coldly said I would have to take him home. I now know that I had to use a different communication style to get through to him. Here is what I would say today:

*I understand that you are bound by law to tell me these things. I understand the system. But I need help here. This is a person who is no longer functioning normally. He is strapped down in the other room because he is no longer reasonable. I need more options than this. I need your personal help to get him the help he needs. I am desperate here and you are my only option at the moment. What do I need to do to get him the help he needs?*

Ultimately, if you're not getting the help you need, go to someone else. Don't try to reason with someone who is obviously not going to help you. Stop, say thank you and find someone else. Social workers care or they would not have chosen the profession, but can you imagine what they go through year after year of seeing mentally ill people? You will have to remind them of why they went into this work in the first place.

#### Tip #45: Know Who to Call in an Emergency

If you love someone with bipolar disorder, you need to know exactly who to call if your loved one gets out of control manic or psychotic. You need to know what to do and who to call at the first signs of suicidal behavior. The Health Cards are a good place to keep all of this information. I know that I have all of my HCP contact information on my cards so that my family has access to the numbers in case I ever get too sick to help myself. As a friend or family member of someone

with bipolar disorder, you're often the lifeline that gets them the help they need. Your role is so important which is why it's important that you sit down with the person and find out exactly who to call if they get sick.

And one final tip...

### Say Thank You to All of the Wonderful Health Care Professionals in Your Life

I don't know about you, but I would not be here if it were not for the people who have helped me manage this illness along the way. Doctors, naturopaths, therapists, social workers and many other people in the health care profession often help us daily with our health. When you find someone wonderful, make sure you thank them when you see them. Tell them what an important role they play in your life. Let them know that they truly make a difference. We really can all work together to manage this illness.



**There is hope. Learning to talk with Health Care Professionals is just one more step towards managing this illness comprehensively and effectively. Hopefully the tips in this book will make you stronger and more able to take charge of your own health care. You are the boss!**

**Family members and friends do have a say in the treatment of their loved one. Knowing what to say and how to say it will give you more control of how the person you love is cared for, especially when they can't care for themselves.**

**There really is hope. I know that stability depends greatly our own ability to manage this illness.**

**Julie Fast**

