Video transcript

Joe: It’s an illness. It really is an illness. People can see if you’ve got a broken leg. And they go “oh you’ve broken your leg”. But you can’t see what’s in your mind and in my opinion it’s... it can be worse. Because wherever you go, your mind is with you and it’s a powerful thing.

Laura: For a while I used to get maybe kind of two or three episodes a year where I’d have maybe an episode of hypomania that lasted a couple of weeks, and then that was followed by a sort of episode of depression that would last a couple of weeks as well. So it was always the hypomania followed by the depression. Sometimes with me there can be a pattern, but it just seems to change quite a lot and in some ways it’s difficult to manage because of that, because you’re not quite sure where things are.

Steve: I wouldn’t even know that I’m actually becoming manic, it might be just thinking that I can push the envelope a bit here, I can spend a bit more money, I can go out another night, you know, I can work until three or four o’clock in the morning. And you know, I’m sure a couple of hours’ sleep will be fine, because I can make up for it the next day. It’s always putting things in a bank. You know? That kind of mental bank that we keep, and thinking, you know I can just push the envelope a bit more. It gets to a point where this builds up to a critical mass where you just simply can’t cope anymore and then you slam down into depression. And when I get to depression, then I really tear myself apart, thinking why did I even do that? Why did I kid myself into...? And then all the negativity comes through – oh you’re such a bad person, you shouldn’t be dominated by this kind of thing, why did you do that? Really, really...

Joe: Self-blaming?

Joe: People assume that it’s highly manic, highly depressive. And although there are episodes, it’s not as easy to track as that.

Laura: The term bipolar can be a little bit misleading actually, because I don’t think there are just always two poles of being depressed and being manic. I think like...

Joe: Yeah. It sounds like that doesn’t it?

Steve: Yeah exactly.

Laura: Yeah, you can kind of have states where... I mean some people, I think a lot of people think that when you’re depressed you’re really sad and when you’re manic you’re really happy. But like you know, you can be manic but not be really happy. You can feel really agitated and really kind of frustrated. So yeah, I don’t think it’s quite so simple as kind of two sides to a coin that maybe some people think it is.

Steve: Being bipolar doesn’t meant to say that I’m necessarily a depressive person or a pessimist or those kinds of things. And I refuse to let my condition even dictate what kind of person I am.

Joe: Stephen Fry was saying it is like the weather in your head and when it’s raining it is raining. You have to believe that it will get bright the next day. You know, you have to accept that it’s raining you know, or it’s bad, or it’s good. But you just have to be hopeful rather than trying to fight it, because it can’t change.

Steve: If you’ve got that network of people around you who can support you, particularly when you’re depressed, it’s so important. If people don’t hear from me, they’ll phone me up and I’ll just be able to say I’m just in a really bad place at the moment. And they completely understand.
Joe: When they’re trying to have a laugh with you and you’re just not in the mood and you can’t snap out of it, it’s nice for them to understand and be patient. And I think with people that understand, it means they can adapt their conversation, or their mood or interaction with you, so it puts less pressure on you. And you can still have a laugh, or try to, but only when they truly understand and work with you. And that really does help.

Steve: Yeah.

Laura: Yeah, yeah. In sort of helping me, kind of, balance out my moods and sort of stay well, there’s been quite a few things that... Well, now I’ve got a kind of package of a few things that have kind of helped. And one of those is definitely my medication. I’ve also had CBT in the past year and that again like I think is a really kind of, important sort of tool. When I’m depressed I really kind of try and not kind of catastrophise and I think that is something that I really kind of learned in CBT. And it doesn’t make the sort of depression go away, but I think it kind of helps writing a to-do list before I go to bed of what I’m going to do the next day. And it might just be really simple stuff like kind of go to the shops, get up, get dressed, make yourself a nice lunch. Like, just because otherwise, especially at times when I’ve been off work, I’ll just wake up and think what is the point of getting out of bed? Whereas at least if I’ve got a list there of things to do, then...

Joe: It’s keeping busy isn’t it. Routine, I think, helps.

Laura: Yes.

Joe: Some things, like as you say, waking up... Because you want to stay in bed if you’re feeling depressed. And I think having plans, meeting friends, maybe doing a bit of a job for someone or... It helps, a routine, it really helps keep stability and normality I think.
**Steve:** Yeah. Even if it’s just you know, just something as simple as sort of... showering every day, or something like that, and going to the shops, going outside. Making contact with another person, even if it's just buying something from the shops, you know.

**Joe:** Simple things like that, and normality and routine help.