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This article is part of a new series of Health, Life Interrupted: Living With An Invisible Disease. Each month, one woman will share what it's like to seem healthy on the street while navigating everyday life with a serious physical or mental health condition. I had a long struggle with my mental health. Ever since I can remember, I've been worried and I've been constantly experiencing symptoms of depression and obsessive-compulsive disorder (OCD). However, I never sought professional help. During my first year of college, when I was 18, things got really bad with my depression. I had no motivation. In high school, I had a very high GPA and was in many AP classes in college. I really wanted to be that motivated, but I couldn't find the energy. Then I was exhausted. I would stick out of bed for class and a few dishes and that was it. I didn't recognize it as mania, and I didn't know about another symptom I had: lack of attention. My brain was in so many places at the same time that it was extremely difficult to learn, which was a problem. My mom encouraged me to see a therapist who put me on my first antidepressant. I also started with what I later learned were manic episodes. I would go a week or more without sleep. I couldn't sit still; I would run laps around campus because I felt so anxious. But then I would have very low lows. I would feel very lethargic and I didn't want to interact with other people. I would avoid going to lunch and generally stopped taking care of myself. I didn't train or take a shower. I just had this lack of energy. I struggled so much, I had to take time off school during my junior year. I made several trips to the ER because I was very anxious and depressed and needed a change of medication. During this time I had one of my worst episodes manic. I didn't sleep. I felt like I was going to jump out of my skin as I was about to explode. My therapist suggested I see a psychiatrist, but the waiting list was over a month. My parents made a desperate call to family friends who knew the psychiatrist and I was able to see him a few days later. He diagnosed me with bipolar disorder and I started on a regimen of mood stabilizers and antipsychotic drugs. Over the next nine months, I had to figure out the right combination of drugs because I had experienced many negative side effects from my medications. Eventually I went back to school, but I was still struggling to take care of myself. Then, at the beginning of my second senior year semester, two of my best friends died in a car accident. He sent me into a downward spiral. It was more extreme pain on top of a pain that was already feeling terrible. After that, I couldn't make life better at the same time. My psychiatrist suggested to me and my parents that I am entering a young adult mood disorder residential treatment treatment I was accepted the day after college, and that's where I turned 22. I was there for 45 days. I saw a psychiatrist one or two times a week. I attended group and individual therapy sessions that included different types of therapy. Every morning there was 30 minutes of mindfulness therapy. We did art therapy and experimental therapy as ropes of course, play games, canoe-things to push you out of your comfort zone. I also started dialectic behavioral therapy (a type of conversational therapy that focuses on identifying and changing negative thinking and behavior). Every day was very planned. It was me getting out of bed, taking a shower again, eating normal food. I also figured out the right drugs for me. I am now 26 and have lived with bipolar disorder for six years. The treatment program in residential areas definitely turned my life upside down and forced me in the right direction. But living with bipolar disorder is something I have to deal with every day. It affects almost every aspect of my life. That's what it's like. One of the hardest things is managing drugs. I'm usually on 4-5 medications at a time and they always change. Side effects can be very difficult. Weight gain is a huge problem; these drugs increase appetite like nothing else. I have to control my food intake and I hate it. My mouth also gets very dry. I bring a bottle of water everywhere. Constipation is a problem on some medications, and therefore nausea and vomiting. Akathisia, or constant desire to move, is one of the worst side effects, it makes you want to crawl out of your skin. Another drug I was on caused cognition problems. I left because I felt like I was getting stupid. I work as a behavioral health researcher in Washington state, but I don't want to take a time when I know what I really need. A few months ago, I had to take a couple of days off because of my medication. I have changed medications, and while we increase the dosage to find the right amount, I will feel terrible for five days at a time. I still have to go on with my life, even though I feel terrible. I couldn't tell anyone. So I was at work with a terrible headache, feeling sick to my stomach, and I just had to keep going. This is what people with invisible disease should do every day. I wanted to be more open with my colleagues like, hey, I just swapped medication for my bipolar disorder. If you could just help me here. Or even just for them to know that I'm not slackening on purpose. But I can't say that. In this case, I end up telling a colleague that I wasn't pretending to have this problem, and that's why. As a person dealing with problems health, I feel less inclined to share details about why I need a day off than, say, someone with a physical illness. RELATED: 7 women on what it's really like to live with Disorder All my close relatives and friends know that I have bipolar disorder, but I usually don't tell people until I know them for a long time. This made dating very difficult. I tend to date guys for a while and then I freak out what I have to tell them. It really scares me because I don't want to be abandoned just because I'm bipolar. Dating is very difficult for me. Having a disease that is not obvious also affects my social life. I can't stay until 3 a.m. and I can't drink very much. I can drink, but alcohol just doesn't interact with my medication. If I drink too much, I get sick. But then again, my friends were very helpful and supportive. It's really nice to be able to say that I'm having problems with the drug side effect, etc. and they're willing to change plans to fit whatever activity we do as I feel. I try not to be a burden though, and I often only say this if the side effects are severe. It's like I'm not going to ask my friends to change their plans for dry mouth. I'll just get a bottle of water. RELATED: Bipolar vs. BPD: How to Tell the Difference Fortunately, I learned many great coping mechanisms to combat my invisible disease. One of the treatments I learned in my residential program is part of dialectic behavioral therapy. It's about doing the opposite of what your mood or emotions can drive you to do. For example, if you feel down, don't go listen to sad music. Don't watch a sad movie - watch a happy movie. I recommend that to my friends all the time, too. Exercise is also a big part of improving my mood. I try to exercise four times a week; it's just a natural antidepressant. Intense cardio is the best for me. I think one of the reasons why I was able to get through school was because I ran across a rugged country and did Irish dancing and it gave me a lot of cardio every week. I always feel calmer when I have intense cardio like cycling, which is my current favorite. But the number one for me is to keep a good sleep regimen. I have a very strict sleep schedule that doesn't change. I take medication at 8pm, go to bed at 9pm, and wake up at 6am. On weekends I will be a little less strict, but through trial and error I know that sleep is the most important for me to prevent mania. I also do my best to eat at the same time every day. My psychiatrist also does my therapy, which is a rarity. I'm in the middle of moving though, and finding a new psychiatrist is very, very difficult. There's no of them to meet the demand and queue months. I am grateful for my close relatives and friends who are aware of my bipolar disorder and that I can talk to them at any time about it if I struggle. RELATED: Bipolar Celebrities: Lee Lee Make them more creative? It can be difficult for me to open up to people in person, so I also started a blog that helped me share my story and write about my experiences for others to read and understand. It's a way for me to spread the word and demonstrate, look! She's normal. She has a job. You never know if you saw her walking down the street that sometimes she gets to the hospital, but she's still amazing. One of the most amazing things about coming clean about my mental health is that so many people have opened up to me about their own mental health struggles. Everyone was struggling with something. But bipolar disorder won't stop me from living my life. I plan to go to graduate school. I'm going to start an addiction research job at a university here in Washington. I plan to get married and earn a family. I plan to live any life I want to live in. I'll always see a psychiatrist, and I'll always take my meds. I hope that in 10 years, there can be a cure that goes on bipolar disorder so effective that this is the only one I need to take. I look forward to the day when change and innovation will take place. I will continue to live my life because I have the resources to be good right now. I have the energy to be good. I am well. And I was lucky for that. If you have a story to share about living with an invisible disease, email us on invisible@health.com on invisible@health.com dsm 5 bipolar 2 disorder code. bipolar disorder 1 vs 2 dsm 5. bipolar 2 disorder symptoms dsm 5

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