

Chapter 4 Excerpt

What *You* Can Do:

The Four Ss of Bipolar Stability

Getting Good Sleep

Sleep. Think about it for a moment. It's something that most of us *do* every night; granted, it may feel more like it's something that happens to us. We get into bed, close our eyes, and if everything works as it should, then we gently drift into sleep; our conscious awareness truly takes a rest while different cycles of brain activity continue throughout the night. We then wake up seven or eight hours later and return to consciousness. Unless we work nights we generally get sleepy a few hours after dark and gradually wake up with the arrival of the morning light.

Realistically speaking, this normal and regular sleep cycle isn't always this smooth for everyone; however, the fundamentals of our recurring sleep and wake cycle reflect important aspects of what we refer to as *circadian rhythms*. These are the body's recurrent rhythms of alertness, energy, activity, fatigue, and sleep corresponding to the 24 hours of the earth's daily rotation.

For most people who are not bipolar these rhythms remain fairly constant. But for the bipolar person, when he or she is under stress, these rhythms easily go awry. If you're depressed, you may find that it's difficult to wake up in the morning. You may also find yourself going back to sleep at different times during the day. Without the “on” switch of energy and alertness, your body is lacking what it needs to move forward.

In episodes of hypomania and mania, just the opposite occurs. Your heightened energy doesn't naturally slow down toward the end of the day. Your acceleration remains "on" and the natural cues of nighttime darkness don't prompt the drowsiness that then progresses toward sleep. Even when exhaustion finally does take you into sleep, you may find you awaken only a few hours later with your accelerator still pressed to the floor. What makes this all worse is that you can't seem to find the switch to turn it all off.

The point is that too much *or* too little sleep can have profound impact on mood and energy, especially if you're bipolar. Sleep deprivation, particularly when sustained, can and often does bring on hypomania or mania. Essentially, all it takes is one night of less-than-adequate sleep to trigger a hypomanic episode. If you only get two or three hours sleep on Saturday and Sunday night, the following day will potentially be your manic Monday. Two or three consecutive nights of not enough sleep can be like throwing a lit match on a large pile of dry kindling! Once lit, your elevated mood and energy will make you more inclined to resist sleep, adding additional fuel to the fire. On the other hand, if you sleep too much it can pave the way for a depressive episode.

Adequate sleep (approximately eight hours per night) and a nightly sleep schedule where you go to sleep and get up at relatively consistent times are imperative for the stability of a bipolar person. We can't overstate this point.

You're probably beginning to see some themes here: application of daily structure, effective stress management, and consistent sleep habits. It's probably self-evident how these would help you be more stable. The problem is that just as we pointed out in our discussion of structure, these lifestyle practices tend to clash completely with the typical lifestyle of someone your age.

Think of being out with friends on a weekend where your activities don't really get rolling until 10:00 p.m.; and there you are feeling your own internal pressure to return home and be asleep by midnight. Or, you're on a date and the connection feels right but it's already 11 p.m. and you don't feel ready to end the evening. And then there are the continuous requirements of academics. You've got a 15-page paper due tomorrow and you know you're going to need most of the night to finish writing it. Or you're deep in a group project and the group plans to work through the night. If you're dealing with the rigors of a full-time job, you may find that by Friday evening you're exhausted from a hard week at work. You just want to sleep in on Saturday morning for as long as you can. The thought of awakening by 8:00 or 9:00 a.m. in order to stick to your sleep schedule feels almost impossible. What do you do with all of this?

You will have to start making choices that are different from the choices of most others you know. You won't do it because you like it. You'll make your choices because you know they're healthy ones. Most people with Type I diabetes don't enjoy injecting themselves with insulin and going without desserts, but they do these things because the consequence of not doing them is much worse. If you knew that you would lose consciousness and lapse into a coma without consistent sleep, you'd probably make sure that you kept to a consistent sleep schedule.

What makes this all much more complicated is that managing your bipolar disorder is going to affect your social life. It's one thing to pass up the slice of birthday cake or to excuse yourself in order to give yourself an insulin injection. It's quite another thing to have to say goodbye to your friends and return home because you need your sleep. We'll explore this difference in more depth in the next chapter. For now, it's important to recognize that if you want to successfully live in the world with bipolar disorder, there are things you can do to enhance your ability to remain stable. Establishing a regular sleep schedule in the midst of an irregular phase of life is a big challenge. But it is doable.

Sleep Checklist

- Get eight hours of sleep each night.
- Go to sleep and get up at the same time with consistency, even on weekends.
- Don't nap during the day, even if you're sleepy.
- Tell others about your need to manage your sleep in order to stay healthy.