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Symposium lifts shroud on mood disorders

By [Jonathan Bullington/ Triblocal.com staff reporter](#)



“Why me?”

It’s a question that plagues those affected by mood disorders. They feel isolated—trapped—in a prison of their own minds.

While it can seem to those struggling with mood disorders like there is no hope for the future, one organization aims to shine a light on the road to recovery.

The Depression and Bipolar Support Alliance-Greater Chicago will host its 11th annual Symposium from 8:30 a.m. to 4:30 p.m. April 17 at Evanston Hospital, 2650 Ridge Ave.

The event is open to people with mood disorders, their families and friends as well as professionals who deal with mood disorders. It will feature presentations, a film screening and panel discussion, all of which will focus on the legal, medical, familial and psychological issues associated with mood disorders.

Founded in 1978 in Chicago, DBSA has grown to include 450 chapters and 1,000 support groups across the country. The Chicago chapter conducts monthly educational meetings and support groups for people with mood disorders and their families in four locations—two in Chicago, one in Palatine and one in Evanston. Meetings are free to attend.

For DBSA-GC President Judy Sturm, the importance of those meetings is well known.

Eleven years ago, Sturm made the decision to end her 23-year marriage.

“I had been really wanting to get a divorce for a long time,” the Palatine resident said. “But I always held it in check when my daughter was young, and then I thought we’ll make things work out. Finally, when my daughter was old enough, I had just had it.”

The decision, she said, left her with a new sense of empowerment. But that feeling carried dangerous undertones.

“Somehow, I was so happy to have finally made the decision that I became elated,” she said. “And then pretty soon I was to the point of mania.”

“Pretty soon, nobody knew me,” she recalled. “My daughter was just devastated, because I was always the stable one in the family and suddenly I’m this person she never met before.”

Sturm was diagnosed with bipolar disorder. She would endure feelings of extreme high energy and euphoria that sometimes lasted three weeks.

“When you are at that emotional plateau, you feel on top of the world,” she said.

But that energy came at a cost. One of the symptoms of Sturm’s disorder was that she would uncontrollably spend money. She recalled one episode when she rented a hotel room on Michigan Avenue and invited homeless people up to shower while she left to buy them new clothes from nearby stores.

“Most people should not be bringing up strangers to their hotel rooms and telling them to bathe,” she said.

After purchasing clothes for about eight people, Sturm simply left the hotel. Two days later, she called her daughter Marina and asked her to go back to the hotel to check her out of the room. All total, the episode left her with an \$8,000 credit card bill.

Sturm said her high-energy periods would be followed by drastic downturns, which would leave her feeling depressed for months.

“In my case, it was usually because of my body,” she said. “I would be up for days and days, and I’d just be high energy. Then I would crash. I would be so tired that I would practically fall asleep standing up.”

Throughout the early stages of being diagnosed with bipolar disorder, Sturm said she would start taking prescribed medication but would stop because of the way they made her feel.

“[The medication] would push me down so far that I was like in a suit where I could barely see, barely feel,” she said. “You just don’t feel complete. You don’t feel like you’re engaging. Food doesn’t taste good. You have no sexual appetite. You have no joy. You can’t cry. You can’t laugh. This is how it is when it’s bad. When you don’t have the right [medication].”

Recovery began when Sturm’s daughter attended a DBSA-GC family support group and asked her mom to do the same. Her first reaction was that of denial.

“I was like, ‘I’m not going there,’” she recalled. “You think, they’re sick, you’re not. And if you are sick, you’re not nearly as bad as those people.”

Those feelings of denial and misunderstanding often hamper the recovery process, said Elaine Rosenblatt, a psychotherapist and DBSA-GC board member.

“People who talk about mood disorders don’t understand it, and they think that there’s a certain type of person,” Rosenblatt said. “And there isn’t a certain type of person.”

“The truth is, if everyone came out with talking about mood disorders as if it was like diabetes, then it wouldn’t be so mystifying,” she added. “You wouldn’t conjure up the horrible ideas people have that are fostered from years ago.”

Rosenblatt has counseled people with mood disorders and their families for 15 years. Since joining DBSA-GC, she started the group that meets at Evanston Hospital. She said mood disorders, like diabetes, require proper management—receiving the proper medication and staying on that medication; working with a psychiatrist, psychotherapist and support group; learning what can trigger an episode and how to mitigate those triggers.

In Sturm’s experience, learning to manage her mood disorder has helped her to live with her illness without it controlling her life.

“Bipolar is with me. The good news is that it is not me,” Sturm said. “Now it’s just a small part of me because I’ve been able to work and be active with DBSA.”

Sturm and Rosenblatt said the support groups, because they are peer-led, help alleviate the feelings of isolation common among people affected by mood disorders.

“When you step into a room, all of a sudden you’re scared, because it’s a hard thing to do to step into any new environment and feel vulnerable,” Rosenblatt said. “However, once you step in and you feel the commonality, there is this sigh of relief.”

Those who attend the meetings can learn from others who share similar experiences.

“That’s the healing that goes on,” Rosenblatt said of the meetings. “It helps the people with mood disorders stay on their program. It helps them not go back into a shell and feel the shame and embarrassment.”

For those who don’t receive treatment, the results can be devastating.

Fifteen years ago, ABC7 news reporter Kevin Roy was working at a TV station in Portland, Ore. when he received word his mother took her own life.

Roy described his mother, Diane, as a “brilliant woman” who was valedictorian of her high school class and a successful lawyer. But underneath her exterior laid a woman who Roy said was an “expert” at concealing her true feelings.

Diane Roy was never formally diagnosed, but Roy said she exhibited symptoms commonly associated with bipolar disorder. In the last year of her life, she started seeing psychics and giving away prized possessions, including her dog. In July of 1995, she threatened suicide, but Roy said his mother assured him that suicide was not an option.

Her death, he said, was “the great tragedy of my life.”

“It was horribly painful,” he said. “You’re left with all these questions you’ll never answer: ‘Why did you do that? Was I not enough to live for?’”

In 2001, Roy produced the first of several stories on surviving suicide. He will show part of his series on the subject at the DBSA-GC Symposium.

For more information on DBSA-GC, go to www.dbsa-gc.org.

— *[Jonathan Bullington](#), Triblocal.com reporter*