

An Army Veteran's plan to manage bipolar disorder

Ambrosia: My name is Ambrosia. I served in the Army and I was stationed mainly in Fort Riley, Kansas for about five years of my enlistment. I served from August 2009 until January of 2015 when I was medically retired. After the birth of my daughter, about six months after, I started sleeping a lot, like, all the time and I had a one year old and a newborn; I couldn't not adult for the day. So, I talked to a friend of mine and she said, "Well, I think you should go see a psychiatrist."

At first, I thought it was postpartum depression and so they threw some drugs at me and said, "Okay, we'll see you in a few weeks." I ended up being hospitalized right after that. They still thought it was postpartum depression and thought they would try and see how to fix that. A couple months later I was hospitalized again and that's when they decided that I had what they called, peripartum bipolar 1 disorder. So, it's bipolar 1 that showed its ugly head after or during around pregnancy. After that hospitalization I was told that I was going to be med-boarded because you can't take medication for bipolar disorder and go to war. You can't be deployed.

Becoming a civilian was really hard for me. As soon as I got out, I hit a manic phase. A lot of the red flags I saw were pretty much the normal, stereotypical bipolar, depression side effects; talking really, really fast where people can't really understand you or you're talking so fast that your mouth is moving faster than your brain. I wasn't sleeping and one of the things that a bipolar person needs is a routine and so I didn't have that anymore and I started doing my nails frequently because that was the only thing I could get to clear my mind because you're, not only, talking so fast you're thinking a million things at the same time and it's hard to express that and really say like, "Hey, my brain is really fast, really moving."

My last day in the military was 28 of January and May 20th, I think it was, is when I tried to commit suicide. That was a turning point for my family because that's when my mom really started to realize, "Oh, she really does have a problem and this is really a thing. This is a life-long illness.", which I think is very daunting to think about taking a medication every day for the rest of my life to make sure that I think rationally; that I'm okay. So, that's what the big change was was just that my family kind of realized what was going on and why I had to be med-boarded out of the military. The best thing I can say is to have a plan with your doctor. We have kind of figured out, okay when I start going one way then let's take an extra pill of this medication or if I start going down and start sleeping a lot and start not wanting to do anything then, "Okay, I'm going to take a certain dosage of this other medication." We have a plan where when I start doing things, like, seeing red flags then call him and say, "Hey, I need to come in and just double check with you."

What I started with was I was seeing a therapist every week sometimes we can get it out to two weeks but during stressful situations like a friend moving away, something as minute as that, you need to be seen more often because a lot of bad things would happen; a lot of red flags would start showing up. You start getting stressed out. So, it does help a lot because it's a safe place. I can see the therapist and kind of vent things out and kind of get a different perspective on it. One of the things I kind of live by is, "They have it, use it. It's 100% worth it." Even if you only serve your four years; even if you only serve your six years it's completely worth it because you get the life-long bonds and you get all the benefits.



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