

IMPORTANT INFORMATION

ANNUAL GENERAL MEETING

Where and When

The Annual General Meeting (AGM) of Bipolar Aberdeen will take place on Thursday 28th April 2011, starting at 7pm.

The venue will be the Midstocket Church Community Building, 35 Midstocket Road, Aberdeen.

Aim of AGM

The constitution of Bipolar Aberdeen requires an AGM annually. The Board of Bipolar Aberdeen stands down and an election of the new Board takes place, with votes cast by you, the members of the charity. Existing Board Members can stand for re-election.

The AGM reviews the previous year's activities of Bipolar Aberdeen and sets out the agenda for the forthcoming year.

Topics of Discussion

Topics that will be discussed at the AGM will include:

- ❖ The focus of the charity and the way forward;
- ❖ Support Group Meetings;
- ❖ Other Support Groups;
- ❖ Information and Leaflets;
- ❖ Library Books;
- ❖ Funding;
- ❖ Volunteers;

What to do?

This is your charity. Please spare some of your valuable time and come along and

provide input into what you want to see Bipolar Aberdeen do for you in the future.

We can only get better by having you involved.

SUPPORT GROUP

With the AGM being on Thursday 28th April 2011, it would be the intention that once the AGM is finished that we continue into a Support Group until closing at 9pm.

The previous 2011 Support Groups have been a success and I hope that going forward it will continue to grow and assist everyone who attends.

The enclosed calendar lists the Support Groups for the remainder of 2011. Please keep it in a handy place to remind you of the next meeting.

The Bipolar Aberdeen evening meetings are not a welfare service but they are intended as self-help group meetings in which people with bipolar disorder and their carers can get together to share experiences and to provide mutual support and advice on coping with Bipolar. They are also a great opportunity for general conversation.

We all have the ability to help one another.

BIPOLAR I AND II

By now you will all have read in the press about Catherine Zeta-Jone.

A representative for Catherine Zeta-Jones confirmed on Wednesday 13th April 2011 that

the actress recently underwent inpatient treatment for Bipolar II disorder at a Connecticut mental health facility.

Bipolar I

Bipolar I is characterized by severe manias, during which people either "feel on top of the world" or irritable and angry.

They sometimes feel like they have superpowers or heightened perception; their thoughts race and they're loaded with energy.

Usually people with Bipolar I swing between this manic state and a "flip side" of extreme depression during which they slow down, feel sad and lose interest in activities they usually enjoy (including sex). They can suffer from fatigue and insomnia, and can become suicidal.

Bipolar II

People with Bipolar II swing from severe depression to a milder and briefer manic state called hypomania. They aren't impaired to the extent that folks with bipolar I can be. "People notice a change, but it's not extreme,"

Usual treatments for bipolar II include medications and psychotherapy. In general, a patient with Bipolar II might be hospitalized because outpatient interventions didn't work and time away from stressors is needed to tweak medications or treatment plans. "One thing we know that we didn't know 20 years ago is that it's affected by stress,"

VIOLENCE

Having Bipolar disorder *by itself* does not increase the risk of

violent behaviour. Yes, you heard that right, all you crime drama writers and finger-pointers. Sorry, but you'll have to find another explanation.

Researchers from Oxford University and the Karolinska Institutet in Sweden looked at 3,700 hospitalized patients with bipolar disorder, 4,000 of their siblings, and 37,000 people from the general public. The rate of violent crime in the control group was 3%, in the siblings 5%, and in the Bipolar group 5% - or 21%. Yes, that's right. A rate of 5% for Bipolar patients without substance abuse problems - and 21% for those diagnosed with severe substance abuse in addition to Bipolar. Similar results were found for people with schizophrenia. And rates of violent crime among substance abusers who are *not* mentally ill are 6-8 times as likely as non-abusers to commit violent crimes.

In other words - its alcohol and drug abuse - *not* bipolar disorder and schizophrenia alone - that lead to violent crimes.

"It is probably more dangerous to be walking outside a pub on a late night than it is to be walking outside a hospital where mental health patients are being released."

By Marcia Purse, About.com

ONE MAN'S DOCUMENTARY

Most teenagers have their ups and downs. Even a so-called "normal" adolescent can dippy-doodle through a dizzying range of emotions.

For Jason Taff, however, the highs were higher than most. And the lows were subterranean.

Sometimes, for example, Taff says he'd walk out of a classroom at Parkside Collegiate in St. Thomas and head for the shed where they stored the sports equipment.

"I'd just go out to the storage room where the high-jump mats were and I'd just lie there for an hour," he recalls. "I didn't notice at the time that I was secluding myself, but that's what I was doing. I'd just go to places where I couldn't be bothered by anyone. It was bizarre."

Nobody saw him there. But people did see other troubling aspects of Taff's life: the break dancing, the partying and the pot-smoking. His marks were slipping badly, and he was arguing more with teachers.

In many ways, perhaps, it seemed like typical behaviour from another teenage troublemaker.

"I think a lot of people thought I was just acting out," says Taff, who lives in Southwold, near St. Thomas.

In fact, Taff was struggling with the symptoms of bipolar disease. And now, seven years later, the 24-year-old man has documented his journey in *Bipolar Life*.

The book, released by Tate Publishing, may not suit everyone's taste.

But Taff's message — that most of us need to know more about mental illness and that those struggling with such illness must persevere — is invaluable.

"I had no idea what bipolar was until it was presented to me," says Taff, who was diagnosed at age 19, about two years after he started showing symptoms. "I think a lot of people in high school are going through similar things and there's not a lot of knowledge about how you deal with it.

"If they're anything like me, it just happens and it escalates and escalates. . . . You don't even know anything is wrong until it's almost too late."

Taff now realizes he was "having trouble processing information." He was angered by petty things, everything from offhand comments and passing cars to the sound of chirping birds.

He remembers walking down the school hallways and becoming fixated by the way people turned their head.

"You lose your grip on reality," he says.

After speaking to fellow churchgoers whose son was bipolar, Taff's mother took him to the hospital and got help. Eventually, medication helped control his symptoms. And today, Taff is continuing his college studies and hoping to write another book.

He knows many others are dwelling in the dark places he once knew.

"I just know if they keep enduring, they will get through," he says. "In the midst of their suffering, they just need to hold on, because it's all worth it in the end."

By IAN GILLESPIE THE LONDON FREE PRESS