Managing Suicide Risk When You Have Bipolar Disorder
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Bipolar and Suicide

Suicide is a silent epidemic, claiming more and more lives each year. In the United States, the number of suicides has increased by 24 percent between 1999 and 2014. Embedded in this dismal statistic is the fact that recent legislative changes have made it easier for mentally ill people to have access to guns, the most common method of suicide.

But for those with bipolar disorder, the most important statistic is that our risk for dying from suicide is 30 times greater than the average person.

Why Am I at an Increased Suicidal Risk?

Even if you have never attempted suicide or even had a suicidal thought, it is important to understand your elevated suicidal risk. Although there is no clearly defined mechanism behind this risk, there are definite reasons why it exists.

The difficulty in treating bipolar depression

Various researchers have thoroughly documented that bipolar depression is much more resistant to typical treatments. People with bipolar generally have to try many more treatment options for depression before they find one that works. This means that they spend more time in deep depression, thus becoming more vulnerable to suicidal thoughts and actions.

The mania that often comes before bipolar depression

There is less evidence about this phenomenon, but as you know, many times bipolar depression is preceded by an elevated manic state. When a person takes the deep dive from this elevated state and goes into depression, it can be much more devastating than a typical clinical depression. As someone who has personally experienced this deep dive, it is soul crushing and the recovery is a long, slow process.

What Can I Do to Minimize Risk?

The best way to minimize this risk is to be proactive. Do not wait until you are in the deepest depths of depression to ask for help. Remember, depression is often the doorway which eventually leads to suicide. They key is to learn how to manage your depression.

Strive to maintain a healthy, stable mood

Although this sounds obvious, but some people who have experienced severe depression often welcome elevated (hypo-manic and manic) moods. Instead of resisting these dangerous states, they enjoy the high,
forgetting that what comes up must come down. Eventually they find themselves in worsening states of bipolar depression that open the door to suicidal thoughts and actions.

**Combat bipolar depression by developing a set of coping skills**

My therapist once had me picture my coping skills in an imaginary bag. The skills came from a variety of sources like:

- Directives and strategies from medical professionals
- Advice from self-help resources and friends
- Guidance from spiritual advisors
- Rituals and habits like exercise, a healthy diet, and meditation
- Creative outlets like adult coloring books, journaling, and other activities

Armed with my set of coping skills (which was constantly growing), I was prepared when depression struck me. Even when you are under medical supervision, life happens and depression rears its ugly head. When this happened, I reached in my bag and found a coping skill. Sometimes the first one didn’t work so I tried a different one until I found the right combination. The more I dealt with bipolar depression, the more I learned and the more I was prepared for the next episode.

**What Happens When What Worked in the Past, No Longer Works?**

Just like you don’t fix things that aren’t broken, you shouldn’t have to change your treatment regimen. However, the sad truth is that you will likely have to adjust and change the very regimens that once brought you great success. While this doesn’t seem fair, it is a fact of life when dealing with bipolar depression.

**Don’t be afraid to ask for additional help**

Even if you have successfully defeated depression in the past and you feel like you “should” be able to manage, ask for help. And if you are still suffering, continue to ask for help. This might mean seeking out a new medical professional. If so, be honest with your current doctor or therapist. Focus on the fact that you need help instead of blaming them or implying that they have failed you.

**If you ever find yourself nearing a crisis situation, drop everything and get help — IMMEDIATELY!**

I can remember a time when I was in a bad place, dealing with suicidal thoughts and contemplating action. I called a friend who instructed me to get into my car and head to the nearest emergency room. I followed her advice and because I did, I am here to write this article. Below are some telephone resources. If you need to see someone in person, go to an emergency room or crisis center.

- If you live in the United States call the [National Suicide Prevention Lifeline](tel:1-800-273-8255) at 1-800-273-8255 or go to chat.suicidepreventionlifeline.org to chat with someone online
- If you live in Canada, a full listing of suicide hotlines is available at: suicide.org/hotlines/international/canada-suicide-hotlines.html
- If you live elsewhere, a full listing of international hotlines is available at: suicide.org/international-suicide-hotlines.html

Never forget that if you have bipolar disorder, your suicidal risk is greatly increased. Plan ahead and be vigilant about managing your bipolar depression as it usually provides the doorway to suicide. Don’t wait until you are in the grips of suicidal thoughts and actions to seek help. And remember, if you ever do find yourself in a crisis state, immediately seek help!