

# Bipolar II Disorder Affects Nearly 6M In U.S.

BY BARBARA BROTMAN  
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CHICAGO — Harlan Didrickson was a model of middle-class stability. He lived with his partner of more than two decades in a handsome Victorian on a leafy North Side Chicago street. He worked as manager of executive and administrative services for a high-powered architectural firm, where he made hospitality and travel arrangements for large meetings and oversaw budgets that ran into millions of dollars.

He was not the kind of person who would go to lunch with friends and come home having spent \$4,500 on a puppy and a month of obedience training.

Or who would get up at 2 a.m., go to Dunkin' Donuts, then drive to Indiana and back, snacking on Munchkins.

But that's who he became. Four years ago, his life was upended by bipolar II disorder, the same illness recently diagnosed in U.S. Rep. Jesse Jackson Jr.

This is not Jackson's story. People with the disorder — nearly 6 million in the U.S. — have unique experiences with the illness, which cycles between moods of manic energy and deep depression.

"The symptoms of bipolar disorder can be very different from one person compared to another," said Dr. John Zajecka, a psychiatrist with Rush University Medical Center who specializes in mood disorders.

Manic states leave some people euphoric, others irritable. "There are people who can function their whole lives in these hypomanic states," though they may lose marriages, jobs and money, Zajecka said.

Depression, too, can appear in a variety of ways. Some sufferers stay in either mania or depression for decades; others cycle between them many times a day. And people respond differently to treatment.

But Didrickson's struggle provides one look at how bipolar II disorder and its treatment can affect a life.

And he does have one key factor in common with Jackson. Like the congressman, Didrickson, 54, had weight-loss surgery before being diagnosed with bipolar.



CHRIS WALKER/CHICAGO TRIBUNE/MCT  
**Harlan Didrickson poses for portrait outside his Rogers Park neighborhood home. He has written about his bipolar disorder and also blogs about his cat Charlie, at left.**

He had a gastric bypass procedure; Jackson had a duodenal switch.

It became a serious complication in his treatment. The weight-loss procedure, which causes the body to absorb fewer calories, prevented him from absorbing the full dose of his antidepressant medication.

Didrickson's illness began when he started feeling extremely stressed at work. He considered himself skilled at his job but felt beleaguered by office politics.

"I felt as though I was fighting a lot of fights on different fronts in my life, and that I didn't have the wherewithal, the energy," he said. "I was profoundly unhappy."

He changed jobs, twice. He still felt miserable. And he also felt trapped, having to do work he now found unbearably stressful.

More than 60 percent of people with bipolar engage in substance abuse as they try to self-medicate their inner pain. Didrickson was among them. At night he

would wash down some hydrocodone, an opiate he had been prescribed for a back injury, with beer. He would stay up till 4 a.m. watching TV, then take Ambien to fall asleep.

"At 6 o'clock I woke up, got dressed and went to work. I was probably still high," he said. "Then somewhere around noon, I would crash. I would go to the men's bathroom, go sit on the toilet and fall asleep."

His partner, Nick Harkin, a publicist with an entertainment and lifestyle marketing firm, had no idea how deeply troubled Didrickson had become.

But then Didrickson didn't show up on time for a planned out-of-town getaway. When he arrived the next day, he was morose, secretive and exhausted. "It was a very abrupt shift," Harkin said. "It was quite obvious that something was very seriously wrong."

Didrickson was thinking of ending their relationship, he told Harkin. And he

wanted to move to California's Death Valley. He wanted to start a new life.

"I was falling apart," Didrickson said. "It was this desperate: 'I will do anything to get out from under this pressure.' It was like having a heart attack, and if you don't get out from under it, it will kill you."

Back home, he called a friend who had once been his therapist. She asked if he was suicidal.

"I was, like, 'Of course I am. I think about it all the time,'" he said. "It's the only comfort I have."

She told him to see a psychiatrist. He did, and was told he had depression — a common initial diagnosis for people with bipolar, who generally seek treatment during a depressed phase of the illness.

The antidepressant the doctor prescribed didn't work. Didrickson developed memory problems, to the point where he forgot how to do simple tasks like using a phone.

"I could not take a shower, because I couldn't recall the sequence of activities ... turning on the water, stepping into the spray, getting wet, washing," he said.

He lost 40 pounds and neglected bathing and grooming. And yet there were also times when Didrickson felt powerful, energetic, nearly like a superhero. He could do anything he wanted, no matter how dangerous or destructive, with no consequences.

He ran red lights. He drove the wrong way down one-way streets. "I felt like I was back to being in charge, like I was back to saying, 'It's going to go like this because I said so,'" Didrickson said. "I felt kind of emancipated."

"I thought, 'Wow, this (antidepressant) Paxil is really working.'"

But it wasn't. A psychopharmacologist gave him a new diagnosis: bipolar II disorder, a form of bipolar disorder with less extreme mood swings.

No antidepressant worked. Then a friend with bipolar recommended Adderall, the stimulant often prescribed for attention deficit disorder.

His doctor prescribed a standard amount. It did nothing.

So Didrickson took another dose. And he felt a little better.

"I started to feel buoyant," he said. "I always talk about feeling underwater. I felt like I was finally breaking the surface."

He didn't know why he needed a higher dose. But then he came upon online message board postings by people who had undergone gastric bypass surgery and then found that their antidepressant medicines stopped working.

The gastric bypass surgery he had undergone years earlier to lose weight, he concluded, was keeping his body from absorbing the medicine.

Indeed, Zajecka said, gastric bypass surgery can change how people absorb medicines given for bipolar disorder.

The Mayo Clinic statement announcing Jackson's diagnosis also noted that the weight-loss surgery he had "can change how the body absorbs food, liquids, vitamins, nutrients and medications."

Many people with bipolar disorder are able to resume their previous lives.

"It's one of the most treatable illnesses we have in medicine," Zajecka said. "If it's diagnosed properly and treated appropriately, there's no reason they can't get back to resuming a normal lifestyle and their normal goals in life."

But Didrickson has been unable to go back to work and still has periods of depression and mania, though much milder ones. He manages the house, cooks and has taken up woodworking.

"Going out in the evening can be very, very, challenging for him," Harkin said. "If we go to a concert or a dance performance and it's too noisy, he'll have to leave. If ... there's someone in a film who's violent or cruel, that's very upsetting to him too."

"It's nothing like I thought my life would be," Didrickson said.

"The good thing, I guess, is that I don't hold on to yesterdays," he said. "That's a blessing, I think, frankly. But I also don't have tomorrow. My life isn't about tomorrow."

He has gone back to writing, which he did in college. He writes a blog about his experiences with bipolar, under the name T.M. Mulligan. The moniker stands for "Taking My Mulligan."

"I'm having my do-over," he said. "I'm taking the second chance."

## Heart Attack Risk Lower Than Expected For Stressed-Out Workers

BY MELISSA HEALY  
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WASHINGTON — If you still have a job in this economy, you're supposed to feel grateful. But stress is what more people tend to feel at work these days, and a new study finds that for those who experience such strain on the job, the risk of developing heart disease increases by about 25 percent.

That elevated heart attack risk, however, is less high than has been widely supposed, the authors of the new study wrote Thursday in the journal *Neurology*. While addressing workplace stress might help improve employees' health, they said, there's lower-hanging fruit that would yield higher health benefits, including an expansion of efforts to get smokers to kick the habit.

Job stress is defined by high demands at work and/or a worker's low level of control over work hours and conditions. A 2007 survey by the American Psychological Assn. found that three-quarters of Americans listed work as a significant source of stress, and more than half acknowledged that their productivity had suffered as a result of stress.

For employers, workplace stress is no bargain: Job stress is estimated to cost U.S. employers \$300 million a year in absenteeism, lost productivity, higher turnover and added medical, legal and insurance fees.

The latest research is not a fresh study but a compilation of existing studies, some published in medical journals, others not. It gathers evidence of the link between job stress and heart disease from studies conducted in Finland, Denmark, Sweden, Belgium, France, the Netherlands and Britain. Some published studies have assessed the increased cardiovascular toll of stress on the job at 40 percent. But when unpublished studies were taken into consideration, the contribution of job stress to cardiovascular risk started to shrink.

## School Programs Don't Get Kids To Eat Many More Veggies, Study Says

BY MARY MACVEAN  
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School-based efforts to get kids to eat more fruits and vegetables are not failing, but they're no wild success either, according to an analysis of programs involving almost 26,400 children.

The kids ate a quarter portion more a day of produce — and if you just looked at vegetables alone, the increase was just under a tenth of a portion, according to the analysis of 27 programs published in the October issue of the *American Journal of Clinical Nutrition*.

So one sweet potato, or one cup of broccoli, would represent the increase for about 10 kids.

When juice was included as a fruit, the total went up to a third of a portion.

The research, by Charlotte E.L. Evans and colleagues at the University of Leeds in Britain, looked at programs in several countries. They also looked at two styles of intervention, and they found that how schools tried to get kids to eat more produce made a difference.

In what they called single-component programs, kids were given free or subsidized produce. In multi-component programs, such things as nutrition education and communication with families were included. The latter worked better, the researchers said.

The researchers noted that a previous study showing a 0.4-portion increase included mainly multi-component programs and did not break out juice.

Not only is it important for children to eat fruits and vegetables, their childhood habits carry into adulthood, the researchers wrote. Surveys report that U.S., European and Australian children eat two to three portions of produce a day — well below the five portions many government agencies recommend.

There's plenty of work ahead, the study noted.

A couple of ideas that appear to work were exposing children to vegetables for 14 days, which "has been reported to increase liking and the consumption of vegetables." And school garden programs have been shown to increase consumption of produce, the study said.



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## Top Athletes Believe Diet Is Key To Success

BY JASON GONZALEZ  
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MINNEAPOLIS — The raw bell peppers' crispness muffled the noise coming from James Onwualu's mouth as he described the purpose of the colorful snack.

Red, yellow and green peppers, mixed with broccoli and spinach, are a vital part of living a purified life, the Cretin-Derham Hall High School senior said. It's the nourishment he sees as required to adequately prepare for goals that reach far beyond being the best wide receiver in Minnesota.

Emphasis on nutrition, carefully sculpted to match growing teenage athletes with their sport's demands, are the edge that Onwualu and other talented individuals use to become the best in their sport.

In a generation more accustomed to going online to educate themselves, these athletes form their detailed eating habits by heeding coaches, personal trainers and even parents.

"It's specific today with who you are and to the athlete," said Onwualu, a Notre Dame-bound football standout. "My friends and schoolmates think I'm pretty crazy for it. They think I'm already where I want to be. But in my mind I'm not where I want to be."

Across the metro, blue-chip athletes are similarly disciplined and committed.

At Minneapolis Southwest, soccer player Zach Neiberger replaced chips with fruit. Shakopee cross-country runner Maria Hauger eats loads of spinach and red meat for the iron boost required for distance running. Wayzata swimmer Emma Paulson starts preparing for a meet five days in advance through her food. Waconia volleyball player Anna Pioske gave up soda three years ago to help increase her vertical. Fellow volleyball player Samantha Seliger-Swenson says no to sweets. Wayzata football player Mitch Underhill stopped drinking Gatorade.

Each of these sacrifices has molded this group into the best and, in some cases, convinced fel-



CARLOS GONZALEZ/MINNEAPOLIS STAR TRIBUNE/MCT  
**Top high school athletes say eating habits are as important as workout habits. Wayzata swimmer Emma Paulson starts preparing for a meet five days in advance through her food.**

low teammates to simply pay more attention to meals.

"(Performance) depends on what you eat. I don't eat candy. I don't drink pop. I keep my muscles hydrated and healthy," Onwualu said. "I feel my body is more pure. Food has kind of become not a pleasure. I don't love different kinds of food, but there are certain things I eat that are good for you."

Hopkins volleyball coach Vicki Seliger-Swenson empowers her team by handing out articles on nutrition. She said the awareness has created an overall healthy environment regardless of the athlete's commitment level.

An average week for Onwualu begins with a visit to the supermarket with a detailed grocery list, edited by nutrition and training coach Ted Johnson. Onwualu prepares his own meals. Along with peppers, his recent lunch included a couple of forms of fruit and three sandwiches — turkey, chicken breast, ham.

This midday refuel is part of a 5,000-6,000-calorie diet engineered for Onwualu's needs not only as a football player, but more specifically a wide receiver.

"Pretty sophisticated stuff" is how Johnson categorized the lifestyle. Along with the rigorous

no-supplement nutrition habits he instills in clients, he also pushes them beyond traditionally accepted workouts.

Underhill, training alongside Johnson after missing all of last season because of a knee injury, gained 20 pounds while maintaining 8 percent body fat. In-depth analysis of the Wayzata running back's body type and its needs produced a diet of six to seven meals a day. At each meal he consumes a serving of vegetables and avoids sugars. The senior's attempts to gain weight allow

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