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SKILL SHEET

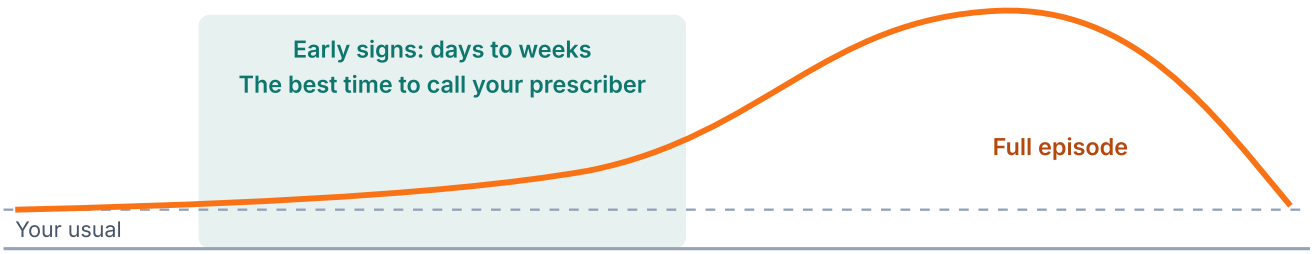
Know Your Early Warning Signs

Catching a mood episode early

For people with a bipolar diagnosis: how to spot a mood episode early, and what to do.

Mood episodes in bipolar disorder often build over days to weeks, sometimes longer, before they are obvious (some build in a day or two). That mild early stretch is called the **prodrome**. Catching it gives you time to act, like boarding up windows before a hurricane: you may not stop the storm, but you can soften it. **This is not a way to diagnose yourself.** One short night of sleep does not mean you have bipolar disorder.

HOW AN EPISODE BUILDS



An illustration of the idea, not measured data.

THREE COMMON EARLY SIGNS OF MANIA

Mood is higher or more irritable

Feeling great after a low can feel like relief. Watch for feeling invincible, or far more confident, bold or short-tempered than usual. Other people often notice before you do.

You do not feel the need to sleep

This is different from lying awake wishing you could sleep. You are simply not tired, even after one or two short nights. You may stay up working or doing things and not notice it is bedtime.

More activity

More projects or work hours, racing ideas, a lot more interest in sex, joining groups you never had time for, pacing, restlessness, impatience. Irritability can build from agitation.

Your own sign may be oddly specific, such as composing music in your head for the first time. Look for what is unusual for you.

HOW TO FIND YOUR OWN SIGNS

You may not see them while they are happening. Look back at the days and weeks before your last episode. What changed first: sleep, spending, plans, mood, irritability, speed of talking? Your own signs, in the order they usually come, are your **relapse signature**. Ask your doctor, therapist or someone close to you to help, then write them on the next page and share it.

COMMON TRIGGERS

- Stress at work and arguments with family
- Not getting enough sleep, one of the biggest
- Spring and summer, when long days can cut sleep
- A loose routine, night shifts, or time-zone travel
- Alcohol or drugs, or missing or stopping your medicine
- A new medicine that can set off mania, such as an antidepressant or a steroid. Tell every prescriber you have bipolar disorder.

IF YOU SEE YOUR SIGNS COMING

1. **Call your prescriber early.** Do not wait for a crisis. An early visit may mean a small treatment change. Change a medicine only in a way your prescriber agreed to ahead of time, ideally in writing. Never stop one on your own; feeling well is not a reason to stop.
2. **Track your sleep, and protect it.** Write down the hours you sleep. Sleeping much less than usual, or not feeling tired after one or two short nights, is a reason to call. Go to bed at your usual time even if you feel fine, with lights and screens dimmed for the last 2 hours.
3. **Tell the person who knows you best.** Ask them to watch for your signs and to tell you kindly when they see them. Insight can fade during mania, so decide now whether they may call your prescriber if you cannot see it.
4. **Keep your anchors, and cut back.** Same wake-up time, same bedtime, regular meals. Until things settle, cut back on late nights, travel, big new projects, alcohol and caffeine.
5. **Have a plan for the low side.** Depression has warning signs too, like sleeping all day or pulling away from people. Make a list of small things that get you moving (a walk, a chore, an errand) and use it.

Fill this in when you are well, ideally with your prescriber or someone you trust. Keep a copy where you will see it, and give one to the person you chose to tell.

MY EARLY SIGNS OF MANIA

Mood:

Sleep:

Activity and plans:

Other (spending, irritability, talking, ideas):

MY EARLY SIGNS OF DEPRESSION

Sleep and energy:

Pulling back from:

Things I stop doing:

Other:

MY TRIGGERS AND MY ANCHORS

My triggers:

Wake-up time:

Bedtime:

Meal times:

What I cut back on when signs show:

How I protect my sleep:

MY PLAN

I will call my prescriber if I sleep fewer than ___ hours, or do not feel tired after ___ short nights.

Prescriber phone, and any written plan from my prescriber:

Medicine steps my prescriber agreed to ahead of time (only these):

Therapist or other support, with phone:

The person I will tell, and whether they may call my prescriber:

My small-movement list for low days:

SLEEP AND MOOD LOG

DATE	HOURS SLEPT	MOOD (LOW, USUAL, HIGH)	ENERGY (LOW, USUAL, HIGH)	NOTES

Photocopy for more weeks. Bring it to your visits.

IF IT IS AN EMERGENCY

If you have thoughts of harming yourself or someone else, feel out of touch with reality, or cannot stop yourself from doing something dangerous, call or text **988** (US) or call 911, or go to the nearest emergency room.

Source. Adapted and rewritten, in new words, from the videos "Three Signs Your Mania Is Coming (The Manic Prodrome)" and "How to manage bipolar disorder: 6 Strategies" by Dr. Tracey Marks, a psychiatrist. The relapse-signature term and the agreed-medicine-steps line are added from standard practice.

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EDUCATIONAL INFORMATION ONLY. NOT MEDICAL ADVICE, NOT A DIAGNOSIS, NOT TREATMENT, NO DOCTOR-PATIENT RELATIONSHIP. THIS SHEET MAY CONTAIN ERRORS. YOU USE IT AT YOUR OWN RISK.

If you are thinking of harming yourself or ending your life, call or text 988, the Suicide and Crisis Lifeline (US). If you are in immediate danger, call 911. Not for emergencies. This is general information, not about you, and it does not replace your own clinician, who knows your history. Your clinician's instructions come first. It may be incomplete, out of date, or wrong. The FDA-approved label, your prescriber, and your pharmacist are the official sources, so check with them before you act. Do not start, stop, or change any medicine or treatment because of this sheet.

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