

WAIRIMU NDUNG'U

Onderstanding Comorbidity in Mental Ollness

My Personal Experience



What 9s Comorbidity?

Comorbidity is the presence of two or more medical conditions in the same person.

For instance, I live with both bipolar disorder and ADHD.

- Bipolar is episodic; that means I experience a hypomanic episode for a certain period of time (usually about four days) followed by a depressive episode that lasts more than two weeks.
- Conversely, ADHD is more of a flare-up in that I may struggle
 with task initiation and concentration on just one day/every
 other day and because of a particular task while executing
 other tasks very well.

My Experience: C-PTSD & Bipolar

I also live with Complex PTSD due to repeated exposure to traumatic events as I was growing up and it's mostly what I tackled in therapy when I started going.

While I was genetically more likely to get bipolar disorder, I also believe that the stress from the adverse trauma triggered my first depressive episode. Also, throughout the years that followed, the C-PTSD was a consistent trigger for subsequent episodes.



My Experience Continued

Understanding what could trigger one illness into the other.

As you gain a better understanding of your symptoms, you may have some insight into how PTSD (or another mental illness) triggers other conditions.

For instance,

- when C-PTSD isn't managed, I'm more likely to get anxious or agitated; last year some heavy news made me super angry and triggered hypomania followed by depression
- when ADHD flare-ups like procrastination drag on, I start getting anxious and experiencing intrusive thoughts about being a failure and in steps a depressive episode



Psychoeducation made simple

Why Does (Inderstanding Comorbidity Matter?

- Different conditions require different treatments that can at times be conflicting e.g. antipsychotics for bipolar can clash with stimulants for ADHD for most people
- One condition may be more adverse than the other e.g I need to manage bipolar before managing ADHD or one condition may be masking another that requires treatment first e.g. addiction may be masking ADHD/major depression
- 3. As a patient, knowing what condition triggers the other for you helps you build a routine that manages your symptoms and discuss the best treatment regimen (medications/therapy) with your doctor eg. CBT works for my ADHD so I no longer take a stimulant but I'm on a maintenance dose for bipolar



Conclusion

Ultimately, seeing a therapist to help you articulate your symptoms is a great next step. They should ideally pull out the DSM-V, the diagnostic manual psychiatrists used to diagnose mental illnesses including personality disorders. However, psychologists are also well-acquainted with it and should be using it to clearly identify your symptoms.

References

- "Can Mental Illness Be Cured?" YouTube video by Dr Tracey
 Marks
- "Bipolar Disorder Versus Depression" YouTube video by Dracey Marks

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