Understanding Hospitalization for Mental Health



Depression and Bipolar Support Alliance

We've been there. We can help.



f you have severe symptoms of an illness like depression or bipolar disorder, a brief stay in the hospital can help you stabilize. This brochure is intended to help you through your

hospitalization. Some ideas may be useful to you; some may not. Everyone's experience in the hospital is different. Use only the suggestions that make sense to you and help you.

When do I need to go to the hospital?

You might need to go to the hospital if you:

- Are seeing or hearing things (hallucinations)
- Have bizarre or paranoid ideas (delusions)
- Have thoughts of hurting yourself or others
- Are thinking or talking too fast, or jumping from topic to topic and not making sense
- Feel too exhausted or depressed to get out of bed or take care of yourself or your family
- Have problems with alcohol or substances
- Have not eaten or slept for several days
- Have tried outpatient treatment (therapy, medication and support) and still have symptoms that interfere with your life
- Need to make a major change in your treatment or medication under the close supervision of your doctor

How can hospitalization help?

- The hospital is a safe place where you can begin to get well. It is a place to get away from the stresses that may be worsening your mood disorder symptoms. No one outside the family needs to be told about your hospitalization.
- You can work with professionals to stabilize your severe symptoms, keep yourself safe and learn new ways to cope with your illness.

- You can talk about traumatic experiences and explore your thoughts, ideas and feelings.
- You can learn more about events, people or situations that may trigger your manic or depressive episodes and how to cope with or avoid them.
- You may find a new treatment or combination of treatments that helps you.

What do I need to know about the hospital?

- You are not going to an institution, asylum or prison. Hospitalization is treatment, not punishment. It is nothing to be ashamed of.
- You may be on a locked ward. At first, you may not be able to leave the ward. Later, you may be able to go to other parts of the hospital, or get a pass to leave the hospital for a short time.
- You may have jewelry, personal care items, belts, shoelaces or other personal belongings locked away during your stay. You may not be allowed to have items with glass or sharp edges, such as picture frames, CD cases or spiral notebooks.
- You may have to follow a schedule. There may be set times for meals, groups, treatments, medications, activities and bedtime.
- You may have physical or mental health tests. You may have blood tests to find out your medication levels or look for other physical problems that may be worsening your illness.
- You may share a room with someone else.
- Hospital staff may check on you or interview you periodically.
- Your prescribing doctor may not be able to see you right away. You will probably talk to several different doctors, nurses and staff members while you're on the ward. You might have to ask for things you need more than once.

Your time in the hospital



You might want to ask a loved one to help you go through hospital check-in procedures and fill out forms. Ask your loved one to help you communicate with hospital staff if needed.

You or a loved one may also want to call the hospital in advance to

find out about check-in procedures and items you can bring. Ask if you can bring music, soap, lotion, pillows, stuffed animals, books or other things that comfort you. Find out about visiting hours and telephone access. Be sure your family and friends are aware of hospital procedures. Tell them what they can do to help you.

If you sign yourself into the hospital, you can also sign yourself out, unless the staff believes you are a danger to yourself or others. If you are not a danger, the hospital must release you within two to seven days, depending on your state's laws. If you have problems getting the hospital to release you, contact your state's Protection and Advocacy agency (see page 10).

You have the right to have your treatment explained to you. You have the right to be informed of the benefits and risks of your treatment and to refuse treatment you feel is unsafe. You also have the right to be informed about any tests or exams you are given and to refuse any procedures you feel are unnecessary, such as a gynecological exam or other invasive procedures. In addition, you have the right to refuse to be part of experimental treatments or training sessions that involve students or observers. Make sure the people treating you know your needs and preferences.

It may take time to get used to the routine in the hospital. If your symptoms are severe, some things may not make sense to you. Try to get what you can out of the activities. Concentrate on your own mental health. Listen to what others have to say in groups. Keep a journal of your own thoughts and feelings. You will meet other people who are working to overcome their own problems. Treat them with courtesy and respect, regardless of what they may say or do. If someone is making you feel uncomfortable or unsafe, tell a staff member.

Make the most of your time with your doctor. Make a list of questions you have. Ask your family or other hospital staff to help you with the list. Let your doctor and staff know about any other illnesses you have or medications you take. Be sure you receive your medications for other illnesses along with the medications for your depression or bipolar disorder.

Wellness after hospitalization

Know your treatment. Before you leave the hospital, make sure you have a written list of what medications to take, what dosage, and when to take them. Find out if there are any foods, medications (prescription, over-the-counter, or herbal) or activities you need to avoid while taking your medication, and write these things down. Track your medications and moods using the tools on the next pages.

Learn all you can about your illness. Talk to your doctor about new treatments you might want to try. Find out what to expect from treatments and how you know if your treatment is working. If you think you could be doing better, ask another doctor for a second opinion.

Take one step at a time. You might not feel better immediately. Allow yourself to slowly, gradually get back to your routine. Give yourself credit for doing small things like getting out of bed, dressing or having a meal.

Prioritize the things you need to do and concentrate on one thing at a time. Write things down or ask friends and family to help you to keep from becoming overwhelmed.

Set limits. Take time to relax. If you feel stressed or exhausted, you can say no or cancel plans. Schedule time to care for yourself and relax, meditate, take a long bath, listen to music, or do something else that is just for you.

Treatment and Mood Tracking

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MONTH/YEAR

1. Check the days you go to talk therapy and support group. 2. List your mood disorder medications, how many you take each day. 2. List your modifications for other illnesses, and any other supplements you take. 3. List your medications for other illnesses, and any other supplements you take. 3. List your medications for other illnesses, and any other supplements you take. 3. List your medications for other illnesses, and any other supplements you take. 3. List your medications for other illnesses, and any other supplements you take. 3. List your medications for other illnesses, and any other supplements you take. 3. List your medications for other illnesses, and any other supplements you take. MEDICATIONS V MEDICATIONS 1 2 3 4 5 6 7 8 9 MEDICATIONS No 3	$ \begin{array}{ c c c c c c c c c c c c c c c c c c c$
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Have faith in yourself. Know that you can get well. If you were manic, you may not feel as productive as you felt before. But you will have a more stable and safe mood, which will help you be more productive over the long term.

Stick with your treatment. Go to your health care appointments, therapy and support groups. Be patient as you wait for medication to take effect. You may have some side effects at first. If they continue for more than two weeks, talk to your doctor about changing your medication, your dosage, or the time you take your medication. Never change or stop your medication without first talking with your doctor.

Recognize your symptoms and triggers. Feeling very discouraged, hopeless, or irritable can be symptoms of your illness. If you feel very angry, your mind starts to race, or you start to think about hurting yourself, stop, think, and call someone who can help. Keep a list of your triggers and warning signs, along with a list of people you can call for help.

Give relationships time to beal. Your family and friends may be unsure of how to act around you at first. There may also be hurt feelings or apologies that need to be made because of things you may have done while in mania or depression. Show that you want to get well by sticking with your treatment. Encourage your loved ones to get support from a DBSA support group if they need it.

Help your loved ones help you. Ask for what you need. Tell them specific things they can do to help you. If you need help such as housework, rides, or wake-up calls, ask.

Take it easy at work. Explain to your supervisor and co-workers that you have been ill and you need to take things slowly. You don't have to talk about your depression or bipolar disorder. If someone asks questions, politely but firmly tell them you don't want to talk about it. Do your best at work. Try not to take on too much. On breaks, call a friend or family member to check in.

Get support from people who have had similar experiences and are feeling better. Connect with a hospital aftercare group or DBSA group.

How can I find people who understand?



DBSA support groups are groups of people with mood disorders, their families and their friends who meet to share experience, discuss coping skills and offer hope to one another in a safe and confidential environment. People who go to DBSA groups say the groups:

- Provide a safe and welcoming place for mutual acceptance, understanding and self-discovery.
- Give them the opportunity to reach out to others and benefit from the experience of those who have been there.
- Give them new hope and belief that they can recover.
- Motivate them to follow their treatment plans.
- Help them understand that mood disorders do not define who they are.
- Help them rediscover their strength and humor.

People who had been attending DBSA groups for more than a year were less likely to have been hospitalized for their illness during that year, according to a DBSA survey.

How can I be prepared for a crisis in the future?

Make a crisis planning list. Briefly describe the kind of help you would like to receive if you have severe symptoms again. Include:

- Your doctor's name and contact information
- Contact information of your support group and other trusted friends/family members
- Other health problems and medications you take
- Allergies and medications you cannot take
- Your insurance or Medicaid information and the hospital where you prefer to be treated

- Things that might trigger an episode, such as life events, travel, physical illness or work stress
- Warning signs such as talking very fast, paranoia, lack of sleep, slowed down movement, excessive alcohol or drug use
- Things people can say that will help calm or reassure you
- Things people should do for you such as take away your car keys and lock up anything you could use to hurt yourself
- Things emergency staff can do for you, such as explain things, talk slowly, give you space, or write things down for you
- Reasons your life is worthwhile and your recovery is important

How can an advance directive or a medical power of attorney help me?

An advance directive and a medical power of attorney are written documents in which you give another person authority to make treatment decisions for you if you are too ill to make your own. It is best to consult a qualified attorney to help you put together an advance directive or medical power of attorney. These documents work differently in different states.

Resources

The following organizations may provide additional help. DBSA assumes no responsibility for the content or accuracy of the material they provide.

Bazelon Center for Mental Health Law (Provides information but does not give individual legal advice.) (202) 467-5730 • www.bazelon.org

National Association of Protection and Advocacy (202) 408-9514 • www.napas.org

Treatment Advocacy Center (Explains each state's hospitalization laws) (703) 294-6001 • www.psychlaws.org

Help DBSA change lives.

We hope you found the information in this brochure useful. Your gift will help us continue to assist people and families with mood disorders.

Yes, I want to make a difference. Enclosed is my gift of:

\$100 \$50	\$20	Other
NAME		
ADDRESS		
CITY	STATE	ZIP
PHONE	E-MAIL	
 Check (payable to DBSA) VISA MasterCard 	Money ordDiscover C	
ACCOUNT		EXP. DATE

AME AS IT APPEARS ON CREDIT CARD

SIGNATURE (REQUIRED)

- I wish my gift to remain anonymous.
- Please send me _____ donation envelopes to share.
- I'd like details on including DBSA in my will.
- I have enclosed my company's matching gift form.
- I'd like to receive more information about mood disorders.
- Please send all correspondence in a confidential envelope.

If you would like to make your gift a Memorial or Honorary tribute, please complete the following: In Memory of/In Honor of (circle one):

PRINT NAME

Please send an acknowledgment to:

RECIPIENT'S NAM

ADDRESS

STAT

Please send this form with payment to: **Depression and Bipolar Support Alliance, 730 N. Franklin Street, Suite 501, Chicago, IL 60610-7224 USA**

Questions? Call (800) 826-3632 or (312) 642-0049.

Credit card payments (Visa, MasterCard, Discover or AmEx) may be faxed to (312) 642-7243. Secure online donations may be made at www.DBSAlliance.org.

DBSA is a not-for-profit 501(c)(3) Illinois corporation. All donations are tax deductible based on federal and state IRS regulations. Please consult your tax advisor for more details. All information is held in strict confidence and will never be shared. *Thank you for your gift!*



Depression and Bipolar Support Alliance

We've been there. We can help.

The Depression and Bipolar Support Alliance (DBSA) is the leading patient-directed national organization focusing on the most prevalent mental illnesses. The organization fosters an environment of understanding about the impact and management of these lifethreatening illnesses by providing up-to-date, scientifically-based tools and information written in language the general public can understand. DBSA supports research to promote more timely diagnosis, develop more effective and tolerable treatments and discover a cure. The organization works to ensure that people living with mood disorders are treated equitably.

Assisted by a Scientific Advisory Board comprised of the leading researchers and clinicians in the field of mood disorders, DBSA has more than 1,000 peer-run support groups across the country. Three million people request and receive information and assistance each year. DBSA's mission is to improve the lives of people living with mood disorders.



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Web site: www.DBSAlliance.org
Visit our updated, interactive website for important information, breaking news, chapter connections, advocacy help and much more.

This brochure was reviewed by DBSA Scientific Advisory Board member Larry Culpepper, M.D., M.P.H., Chairman of Family Medicine at Boston University Medical Center, and Barry Buchanan of DBSA SW Iowa..

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DBSA does not endorse or recommend the use of any specific treatment, medication or resource mentioned in this brochure. For advice about specific treatments or medications, individuals should consult their physicians and/or mental health professionals. This brochure is not intended to take the place of a visit to a qualified health care provider.

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