



EPISODE 43: HOW TO RECHARGE YOUR BATTERIES

- Speaker 1: [00:00](#) What's up real quick, I have to give a medical disclaimer. The information in this program is not intended or implied to be a substitute for medical diagnosis, treatment, or advice. You are encouraged to confirm any information obtained from this program or through this program regarding any medical condition or any treatments with your physician. Never disregard professional medical advice or delay seeking treatment because of something you have heard or accessed through this program. You're listening to the bipolar now podcast, episode 43.
- Speaker 2: [00:40](#) Welcome to bipolar now, the weekly podcast for doing life on your terms, not the illness. And now here's the host of your show, Mike Lardi. ... Hold on. Hold on. Go back to that real quick. The weekly podcast for doing life on your tongue, not the illness,
- Speaker 1: [01:02](#) that living life on your terms, not the illness. I didn't just pull that out of thin air when I was crafting the concept for this show. That's a crazy standard and I'll tell you what, just like last week, you know, I let the cat out of the bag that I'm recording episodes while I'm, uh, in a depression. I'm being challenged to that standard. I'm being challenged in it right now. So while it is great to be here with you, it's also been just a difficult emotional week for me. So I'm actually in need of this episode. We're going to talk about recharging our batteries. I'm going to share a story of where that comes from and I just think, you know, whenever I look at my depression, cause right now I'm in the middle of a job search and just recently I was pushed by one of my lifers, Phillip, to pursue a director level job at the hospital where he works.
- Speaker 1: [02:04](#) And I have um, I have basically no business applying for this job, but he believes in me 100%. And so I'm going for it and I'm super uncomfortable and it's like, man, my depression is, you know, alive and kicking. I'm doing my best to diffuse it. But is it bad timing? I don't know. Is it bad timing? I look at it maybe one of two ways. I can say this is like the worst possible time for me to be sick or also look at it this way. I actually kind of see it, especially now that I've gone through the whole process and you know, put my resume together and put together a letter to the director and like I'm now looking at this as, not bad timing but a golden ticket opportunity. And what I mean by that is it's, it's a golden ticket for me to display all things I tell you about every single week when we get on this show together and I dive into all these topics and I talk about what I do or what others do or what I've read about or things that have like helped me immensely, like here is my golden ticket opportunity to showcase all of that teaching.

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- Speaker 1: [03:16](#) Like now that I see it that way, it just takes the fear right out of it. I'm still nervous, but I'm not, you know, I'm not fearful to where it's pulling me off of the things that I need to do to continue searching for work for myself. So I just look at, it's like, wow, one of two things, bad timing or golden ticket. And I'm choosing to look at the golden ticket. So, you know, bipolar depression is, um, just as, as a quick reminder, you know, today's going to be a shorter show, but, uh, bipolar depression is, it's completely different from the more common unipolar version, which baffles a lot of people because people that don't understand mental health or don't live with mental health complications like you and I do, they don't understand. They don't understand the distinctions between all the, all the different, um, diagnoses.
- Speaker 1: [04:04](#) And so our type of depression presents itself differently from the more common unipolar type of depression. And, uh, and I just, I have to remember, like I, I'm holding myself to a higher standard now. So that means like, when people confront me, they, they see me in public. Um, I'm thinking particularly in my mind right now is, um, over the weekend I went to a church where I'm one of the pastors and, um, I was given permission and this is beautiful. I was given permission just to show up. Don't have to pastor, you don't have to feel any pressure to go and help people or intercede or do any kind of ministry whatsoever. Just come and receive the beauty of worship and teaching and fellowship. And so I go and apparently I looked like, you know, a mess. Um, I swear I wore clothes and like groomed myself, but people told me I looked like I was beat up.
- Speaker 1: [05:01](#) And so here's one of the things, like as I hold myself to a higher standard, it's like I don't shrug off those social engagements when I'm depressed, I want to, but I hold myself to a crazier standard. And that's why when I go into those situations and people tell me, you don't look good, what can I do? And they're surrounding me and it's like, man, why am I the center of attention? Like I'm just, I'm just trying to come here and, and be a part of what you guys are doing. You know, this is, this is my family too. So it's like I have to shrug that off. I have to shrug off the people when they come at me. Like, I'm not doing something right. I had S this is, Oh my gosh, this is still, this is still fresh in my mind, but um, and maybe I shouldn't share this out loud, but somebody, somebody had the nerve to tell me that my faith was weak because I'm not doing something right cause cause I'm in this depression.
- Speaker 1: [05:57](#) Um, people just, they don't get it right. And so to be held to a higher standard means you just shrug it off. But there is a part of me that goes into sort of a mini convulsion. This is just my, my

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super sensitive nature. Like when, when people tell me lies or when people lie about me, um, that's a massive trigger for me. Like I, I literally like I S I shake, I get angry. I mean a lie, a lie, a simple lie of your faith is weak, just gets up, just gets to me on. It's such a deep level and I have to hold again, hold myself to doing life on my terms, not the illness. And I'm not saying that that's part of the illness. You know, this reaction to lies, part of my sensitivity to realize is that since childhood, I have struggled with the need to lie from time to time.

Speaker 1: [06:55](#) And I'm sure I'm sure you can identify on some level with, you know, telling a lie or needing to change a situation or say something that's not true. Um, but those affect my spirit. Um, untruths and speaking falsely like that scares me to death. Uh, it scares me so much to death that I have to, I write myself a note card every time I get behind the microphone here on this show, I have to write a little note card and set it in front of me. And it just, all the note card says is set a guard over your mouth. Set a guard over your mouth. Mike, don't lie to people. Don't go there. So when it happens to me, um, maybe I just feel it in like a reversed way. So anyways, all that is to say is that I'm in the midst of a bipolar, bipolar depression, which as you can tell, makes me stumble over my words.

Speaker 1: [07:51](#) My brain and my mouth are not connected right now. Um, things, it's an odd sensation inside of my depressions. Like things in my head get jumbled up and they don't connect to my ears and to my mouth and my body feels strange and I just struggle. So today, um, fortunately today I'm going to try and make this a shorter, more tactical and action oriented show. Um, just like I promised you earlier this year, I promised that I would get good at these shorter episodes that I wouldn't go on and on and on and on about the things that I have going on. I would want to get to a more real life stories. I'm not that my life, my life stories aren't real. It's just they're just mine. I want more of them on the show. You guys have all said you want more of them on the show. And I'm super pleased because today we have just that opportunity to hear an incredible story from someone in the bipolar now podcast group on Facebook. So here we go.

Speaker 1: [09:03](#) So if you're just joining us or you're new to the show in general, maybe something you don't know is that there is a Facebook group connected to this podcast and that attracts all kinds of listeners, people who want to dive deeper into the episode content and discuss different parts of life that are impacted by a bipolar disorder or anything else that, uh, can come along for the ride. Um, as far as mental illness goes. So it's a great group and today we have a story from somebody who is just a super

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encourager. She gets in there regularly, she helps people out. She, uh, offers, um, just offers, especially new people. Um, just advice and, and a lot of you guys that are in there and like this is you guys as well. You're, you're into helping people not repeat your mistakes. You're into helping people learn the lessons that you had to learn the hard way and maybe not everybody's going to learn them and everybody has to go through this process of learning their management style on their own.

Speaker 1: [10:02](#) And I hope that this show is a help to you in assembling that management style, but it's like we, we want to help the new people. Like if I could go back to 18 year old Mike Lardy, you know, in college when he first started getting manic and depressed and anxious, like when he first started losing a grip on his life, I would love to go back and tell him some things. And so that's what's going on inside the group. You'll want to get in there if you want some of this, uh, advice and direction. It's really, really cool. It's super sincere. And so the person who's sharing this story today, she is, uh, she's a major contributor like I said, and she's also got a powerful story. So on this show, I'm super pumped that this entire year we're going to share a, from real stories, we're going to talk about real changes that you guys have been making in your life.

Speaker 1: [10:54](#) And yes, like I love this. I, this is one of the few things I love about our disorder. I love it. And I think we are so fortunate that we have a mental illness that responds, okay, it might dominate when you're learning to manage it. But like it's an illness that responds to real changes. And I just, I cannot express how grateful I am, how fortunate I feel that my mental disorder is something that I can do something about. Cause it seems like so many people you see or maybe people on the streets or people who are perennially in the hospital, it's like, wow, like what, what can they really even do? Um, and so, you know, maybe maybe there is something they can do. Maybe not. I don't know. But I feel very fortunate and I hope you feel that way too. That there is a bit of a silver lining in this disorder in that it responds to healthy changes in your life.

Speaker 1: [11:53](#) And so somebody in the group posted a simple little graphic. Uh, it was more like a mini article. It was brilliant, I think. And it was a picture of a phone battery about on empty. And the little caption said, you, uh, what did it say? You wouldn't do this to your phone. So why do you do this to your mental health? And I thought that was such a brilliant way to just quickly capture how discharged our batteries can be all the time. We can feel run down all the time, our energy level low all the time. And so what I want to talk today about in terms of recharging is the different things that you can do and we'll just have some quick takeaways

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from this story. But the things that you can do, just practical things that are going to allow you to charge your battery more often and more fully.

- Speaker 1: [12:45](#) So without any further ado, let me read you this listener story and I, I keep identities, uh, anonymous just cause I love to protect you guys as stories and I'm just thrilled. I'm thrilled to death that you want to share them with me. And so here we go. With that. With today's it says, Hey, Mike wanted to send you some of my story and how I'm learning to charge my batteries. She says it's more like I'm functioning off of one AAA battery. And that's a, a really tiny battery for those of you who are not in the United States. Um, so she feels like she's functioning off of just one triple a small battery that she changes out a lot, but it's better than where she's been. She says, I was diagnosed bipolar two after many years and many trips to the psych doc, I think because I would show up to his office during depressive episodes, he never got to see the hypomanic side.
- Speaker 1: [13:41](#) He never could see the full spectrum of this disorder. And I didn't understand much of it yet. This led him to believe it was a longterm depression. And so he put me on many antidepressants that never helped. I reached rock bottom, felt suicidal and completely defeated in life. I became addicted to alcohol and marijuana to numb the lows because I figured there was no medication that would help me. Of course, this only led to more shame and dysfunction, but I didn't know what else to do. Now I found the Enneagram two years ago and the Enneagram is a self help tool for growth and healing. She says, and she says, I started to understand why I do the things I do, where my childhood wound comes from and how to become healthier, but I kept numbing during this time being so focused on healing. I became obsessed with it and read every book out there on it and I did a lot of great work thanks to this tool.
- Speaker 1: [14:48](#) She's referring to the Enneagram. I did a lot, great work, thanks to this tool, but I noticed something else was going on outside of my personality type. Something I couldn't seem to fix with the regular Enneagram work or with much prayer or with trying to better myself. Anyway, after reading more about bipolar, I was able to find the vocabulary to communicate with my therapist what I was going through. She discussed it with my doctor and he had me come in to ask the right questions and this led to the conclusion that I do have bipolar. He put me on Lamictal and after two weeks I have been a completely different person. This was two months ago or thereabouts. I've been functioning in the middle. She puts in the middle in quotes and she says, I've been doing the things I'm supposed to be doing to care for my family and for myself like every day almost.

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- Speaker 1: [15:46](#) I totally, she says this, I totally sucked at this before. The simple tasks were simply too hard because the emotions of this mental disorder were controlling me constantly and it was simply the biomechanical part. That's why I couldn't fix it on my own. Some people can go without meds. Yes, but I, I cannot. And it has been such a huge relief to know that all of this after beating up myself for so long for not, and she puts in quotes for not getting it together. Okay, well onto my batteries. First of all, she says they charge much differently now that I'm on medication. Before it was like, okay girl, stop drinking for a couple of days. Sleep, eat, do something you're proud of, like dishes or laundry so that you don't sink further into a shame-based depression and so on and so on. Now, now that I'm not drinking, she says I'm not drinking or having to resort to self-harming quick fixes.
- Speaker 1: [16:45](#) I've gone back to the Enneagram and here she says that she's not trying to sell it as a tool, but it's been a huge help for her. So she says she's able to go back to work through the normal patterns of her type. And what I'm guessing is, is this is something you go through when you, when you work through that tool. So she's, she's able to work through the normal, she quotes the patterns of normal according to her type. She says, I'm the introverted, artsy and melancholic type. And so I try to steer my way out when I see that I'm going into poor health. For me, it's figuring out what's mine to do and not getting stuck in sad thoughts of my past, but being in the present moment with my kids, creating art, going to sleep when I'm tired, even if it's only 9:00 PM walking around the block instead of ruminating, taking a bath and she puts in here taking a bath and enjoying it, not rushing.
- Speaker 1: [17:45](#) She says, eating when I'm hungry, as opposed to not starving myself for superficial purposes. Uh, and talking to God and listening for his answers and like you say, reminding myself constantly about what kind of story I want to be able to tell when I feel like making an unhealthy decision. I think this simple healthy pattern of living and being, she says of listening to her body and her mind says, it makes her feel so much stronger and capable and proud. She says it's such a big change from where I was. So low batteries now are nothing compared to what they were, but admitting that it was biochemical and finding a bipolar med, that is what turned the page for me. And of course in the back of my mind, I wonder when it will all wear off and I will need more meds or different med or anything like that. But for now with my fingers crossed, I'm going to be okay.
- Speaker 3: [18:50](#) [inaudible]
- Speaker 1: [18:52](#) what I love about this listener's story is she's working through it.

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- Speaker 1: [19:01](#) Kay. We're, we're all working through our story. This is me. I'm working through my story. This is you. I'm hoping you're working through your story and the stories you want to tell. We're working through these things. We're doing it together. So I've pulled out of this story six tactical takeaways and I want to share them real quick was just a little bit of detail, but these are things you can write down to help you charge your battery more often and with a greater ability to hold the charge and use it. So from this story, let's just start with the first one. She talks about addiction. Addiction has to be addressed. Addictions, whether they're chemical, substance, alcohol, I mean whatever they, they affect your bio rhythms. They make you tired, they make you wired, they make you up, they make you down. Um, these affect our bio rhythms.
- Speaker 1: [20:03](#) And this is something that you absolutely have to protect when you have a mental disorder that is tethered to your body clock. And so throwing it off with drugs and alcohol is just setting yourself up for misery and repeat failures. And like she said, the shame, which brings me to number two, shame can be silenced. Shame can be silenced. You know, I'm really putting myself out there in my job search. My resume reads, um, in an interesting way. I'll just put it like that. Um, I've had a very typical work-life for somebody with a mental disorder, but I've had a very atypical worklife for somebody who's looking for a job, especially as senior management job. Uh, like these jobs that I'm applying for right now. And I'll tell you what, like early on in the process when I was assembling all these materials and getting input from my buddies and trying to like trying to just get my mind wrapped around the fact that I'm applying to jobs that are above me, um, I felt a sense of shame and when I had to do was just silence it and realize that my strength is undeniable.
- Speaker 1: [21:18](#) And so rather than than connect to my shame of look at how my life story has been completely flipped inside out and upside down by mental illness. Instead of looking at that, I can stand on my track record of strength and stability. I can, I can stand on the fact that I still get things done even though I get sick. So my job search is a great example of how shame can be silenced. I'm anchoring to my strengths. I'm playing to my strengths. My, my buddy Philip is like, Mike, you have to brag about these amazing things that you do. You have to brag that you launched a business and started earning a profit off of this business while managing clients and ministry and everything else in life. Like he's got a DC you gotta like anchor to the fact that you did some incredible things.

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- Speaker 1: [22:09](#) And so my shame is something that I have to continually silence every time it comes up. So that's number two. Number three is you're never fixed. Okay. This was an interesting part of the story today. This, this notion of um, how she was discovering herself through these personality profiles. Like the Enneagram. She was discovering herself, but it didn't fix everything. And what I want to say is that you're never fixed. And I'm putting fixed in quotation marks here, like fixed is just a loose term fixed meaning like you're never going to be cured like all the people in your life who see what you go through. Who help you out, you know, they all might have some fantasy of you being fixed by whatever it is they help you with, whether that's financial or a place to stay or you, you just some, whatever it is they're trying to do to you, counsel, you take you to your appointments.
- Speaker 1: [23:10](#) Like they're, they're hoping that you can be fixed. Um, but the, the, the reality that you have to tell them is I'm never fixed. And here's the great thing. Fixed is fixed is not the thing you want to be. You're a growing dynamic person. You're always moving forward in life. Okay? A mental illness gets dragged along, but you're holding yourself to a crazy new standard. Like we talk about on this show. You are always developing. You are always taking new ground. You were always pushing through fear. You're always growing, you're never fixed. So there's several ways to read that statement, right? You're never fixed. You're never cured, but you're never fixed. You're never stuck in one place. Now, medications like she brought up in her story, she got the ideal situation. Okay? So her medication, she, she mentioned, um, Lum I believe it was Lamictal.
- Speaker 1: [24:06](#) She mentioned Lamictal. And it's not important what drug it is because in bipolar disorder, every single individual can have a different, uh, experience of a medication. And so what worked for her isn't guaranteed guaranteed to work for you. And we don't make medical recommendations on the show whatsoever, but she got the ideal help her medications function as an aid, but they're not a fix. Okay. The fourth thing she talked about, she read about her disorder. So what I say is read a real book. Go out there and read a real book on your disorder. Get into it, be fascinated by it. Learn to develop. Like she said, this vocabulary, you need the vocabulary, like the point of view reading a good book on bipolar disorder is so that you have vocabulary, you have terms, you have words, you have phrases, you have comparisons and pictures and models.
- Speaker 1: [25:08](#) You can explain your mental illness. You can do it to your doctors. This is going to allow you to be a better patient, more in control of your health. And this is gonna allow you to explain it to family members, to friends, people on the street. I mean, you

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probably have no reason to tell anybody about your bipolar disorder. I'm definitely not like I do being in these shoes. But it's like, it's, it's a luxury. It's, it's a wonderful ability to explain a mysterious illness. You're taking all these invisible attributes, right? Like it's, it's an invisible illness. You know, if you were to look at me like all those people at church looked at me this weekend, like I look beat up according to them, but to myself, I'm it. It's invisible. Everything's happening on the inside. And so being able to read about your disorder is going to give you a vocabulary to describe to make visible all of those invisible attributes.

Speaker 1: [26:08](#) And this is only going to help you. Okay? Number five, one thing that I noticed was she is practicing emotional mastery. She's practicing emotional mastery. This is a great way to recharge your batteries. Um, emotions are what drive us to empty. Why is it that one person can go throughout their day, do an incredible amount of work, be very loaded up with tasks and all kinds of responsibilities. Like why can that person go through their day and feel like they're on fire? And why can another person go through out the same? If they were given the same day, they will feel completely destroyed and run over and worthless. It's because of emotional mastery. So maybe something for you that's more important than like a, a, an AA or an N, a, uh, uh, alcoholics anonymous, narcotics anonymous. Maybe something more important for you would be like what a one of my former students talked about his experience.

Speaker 1: [27:16](#) He started going to in him emotional, how do you say it? Emotions. Yes. Emotions anonymous. Kate's the same structure, but it's all based around emotions. And this guy loved it, loved it to death, got so much out of it. So practice emotional mastery. And then the final one is this. Number six, you got to take ownership of what you do. What I loved in her story was that she just got back to ordinary life and she lived in each of the moments she took ownership of being with her kids and being present. She took ownership of self care, of doing kind things for herself. She took ownership of all of these parts of her life that she needed to do more of. And she said it with an attitude of I can do it, Kay. I might not always feel amazing, but I can do it.

Speaker 1: [28:10](#) This is what I'm doing with you all right now I got behind the microphone today saying I'm depressed, but I can do it. I can do it. And other than just the sensation of my brain body disconnect, like I'm, I feel into what I'm doing and yet I'm living in depression. That's what, that's what's so amazing is it's like my battery is not drained. It's probably halfway full right now. I, I'm able to, um, I'm able to diffuse my depression instead of being a container for it. So I hope these six things helps you

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help. Just help you see that you don't have to be, like she said, one of those little tiny AAA batteries that you're always switching out. You know, these are like the little remote control batteries for your TV that they're tiny little batteries. I'm saying, look at her situation. She grew her battery capacity.

Speaker 1: [29:08](#) You know, sickness cuts off the amount that you're able to recharge, like instead of getting a full charge at night, you know, because you're depressed because you're anxious because you're manic, whatever it may be, whatever this is, this illness is cooking up. You know that your battery is not topped off. It's not capable of being topped off when you're sick. Lamb saying is it's you do these six things, you're going to increase that capacity and you're going to stay closer to full more often as you go and hopefully someday you can feel like, you know what, I'm not a triple a batter anymore. I'm a great big old fricking D battery. I'm a heavy duty battery. I'm a big battery that powers a big intimidating flashlight. Like I'm a, I'm a D battery. That's what I hope you can say. So again, the six, the six tactical takeaways from today's story on recharging your batteries. I'll just run through them real quick, is number one, addiction has to be addressed. Number two, shame can be silenced. Number three, your never fixed. Number four, read a real book about your disorder. And number five, practice emotional mastery. Remember that emotions anonymous if you can find one. And then number six, take ownership of what you do with an attitude of I can do it. Do these six things and your batteries definitely will charge.

Speaker 1: [30:57](#) So next week we're going to talk about fear. Now I know that sounds fun, right? But actually, here's the thing. We're going to be using fear to identify one exciting area of growth in just one part of your life. And we're going to do it all in this year. It's going to help you release that fear, which is the coolest part about it. So yes, it's nerve wracking in the moment to approach fear and to move through it. Uh, but the mental health benefits are crazy huge. Remember, just remember today's story. Remember her story of how proud she was out of all the big changes that she made in her life as she adjusted to living with a bipolar disorder. So that's next episode. You definitely don't want to miss it, so I will see you here. Same time, same place. Adios.

Speaker 4: [31:55](#) [inaudible].

Speaker 2: [32:00](#) Thanks for listening to the Bipolar Now Podcast at [www dot mike lardi dot com](http://www.dotmike.lardi.com).

Speaker 5: [32:06](#) [inaudible].