

Statement in Support of Notice of Disagreement

To whom it may concern:

I am requesting favorable consideration for service connection of Bipolar Disorder. I will address the onset of my symptoms, how they were treated, and what living with my symptoms has been like post-service.

My symptoms of depression and insomnia first appeared during my time in the Marine Combat Training rehabilitation platoon at Camp Pendleton, approximately 06/2006. I believe these symptoms initially manifested in response to the stress I experienced from the constant hazing that was occurring in that unit. At Camp Pendleton I was depressed, anxious, my motivation was low, and I fantasized about suicide. After leaving Camp Pendleton for Artillery School at Fort Sill, OK, my symptoms relented until I reached my permanent duty station at Camp Lejeune, NC. While at Camp Lejeune my symptoms intensified and I eventually went into what I believe to be a manic episode. I thought about suicide daily, developed plans, and cut myself dozens of times on several occasions in an effort to alleviate the anxiety, anger and tension that kept building up inside of me. My insomnia worsened to the point where I rarely slept more than 3 hours a night; however, it felt like I didn't need sleep. My appetite diminished as well, and on one occasion a friend asked if I was on cocaine because I was talking so fast. My moods would swing from feeling elated to extreme irritability and anger to profound sadness, and I would cry uncontrollably. It was very confusing for me and I did not know what was wrong with me. I turned to my command who referred me to a Navy psychiatrist, but he was in the middle of transferring so he told me to wait 10 weeks until his replacement arrived. In the meantime, I met with [REDACTED] and another physician occasionally, and [REDACTED] noted possible Bipolar Disorder and Anxiety Disorder. During this time period I was approached by one of my sergeants and a Marine officer who was unknown to me who told me that I could be charged with malingering unless I said I had a history of cutting myself prior to enlisting. I had not self-harmed prior to my service, but out of fear of being court-martialed I told [REDACTED] I had done it before. When the new psychiatrist arrived we had one session which lasted 5 minutes. He asked me three questions and diagnosed me with Borderline Personality Disorder. I believe that pressuring me to say I had a history of self-harm and the hasty evaluation that followed was done with the intent to discharge me with a non-compensable diagnosis (see attached medical journal article that was given to me by Dr. [REDACTED]). My previous VA psychologist (Dr. [REDACTED]), current psychologist (Dr. [REDACTED]), and VA psychiatrist (Dr. [REDACTED]), who have each treated me for over a year, all agree that my symptoms are not consistent with Borderline Personality Disorder and are consistent with Bipolar Disorder (see attached letters and progress notes).

Living with Bipolar Disorder since my discharge has been difficult. My depressive episodes are ongoing and truly debilitating. At one point I didn't bathe, barely got out of bed, and rarely ate for nine consecutive days. My depressive episodes consistently include suicidal ideation (at one point I put a loaded gun in my mouth), insomnia (2-5 hrs/night), hypersomnia (12+ hrs/night), crying fits, low motivation, panic attacks, and difficulty concentrating. Due to these depressions I have isolated myself

almost entirely. I once had many friends and enjoyed social gatherings, but now I do not contact anyone except my parents and I only leave the house out of necessity. I have not been able to work for more than 6 months at a time, even part-time. I eventually delve into a depressive episode and the stress of trying to overcome it eventually leads to the point that working is impossible. During these episodes school is also very difficult. I have primarily been living off of the GI Bill and my parents' generosity, and have been a student on and off since 2009. I have had to withdraw from more than 20 classes, losing thousands and thousands of dollars in tuition money. During these extended depressions I feel numb most of the day. Occasionally I will be overcome with extreme sadness and cry. I oftentimes have panic attacks while trying to leave the house. I become extremely paranoid at times—thinking I am under surveillance, someone is trying to hurt me, and that there are cameras throughout my house. I have torn apart my room several times searching for cameras. I have changed the deadbolt on my front door repeatedly because I become convinced someone stole my house key and copied it. These depressive episodes were offset in 2014 when I had another manic episode. These symptoms were almost identical to those I experienced when I was in the Marines—another reason why I believe I had an undiagnosed manic episode at Camp Lejeune. I slept very little (3-5 hrs/night), however I had a massive amount of energy all day. I was either in a terrific mood, crying uncontrollably, or I was furious over minor inconveniences. I also had persistent suicidal thoughts that were unrelenting. I drove erratically (intentionally spinning donuts down the highway in a snowstorm one day), spent lots of money, and thoughts raced through my head all day, all of which felt like the greatest ideas I've ever had. I was finally able to work, and I worked between 40-60 hours/week. However, everything began to deteriorate toward the end of the summer and I began to self-harm again and began thinking of suicide more intensely. For fear of my safety I quit my job and admitted myself to the mental health unit at the local hospital for a week. Following that episode I was in the deepest depression I've ever experienced, and it has only recently subsided for any significant amount of time. Thank you for your time and consideration on this matter.

This statement is true and correct to the best of my knowledge and belief.

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██████████

Date