

## Case Report

## Psychiatry

# Bipolar Disorder: A Jungian Approach and Personal Experience of Liberation

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**Abstract**

This article examines the personal experience of living with Bipolar Disorder (BD) for 33 years, followed by more than 20 years without symptoms after in-depth psychological work, resulting in liberation from the disorder. It describes the subjective perception of biological processes in bipolar disorder, including bodily sensations accompanying the development of depressive states and their connection with psychological and life circumstances.

The psychological understanding of the process was based on the analytical approach of Carl Jung. The article discusses the classical Jungian, or depth-psychological, approach to symptoms, according to which anxiety, depression, and manic states are understood not only as a “breakdown” of the psyche, but also as a message from the unconscious and an attempt at inner self-regulation. The Jungian concept of the Shadow is also explored, according to which rejected and repressed aspects of personality do not disappear but continue to influence the psyche from the unconscious. Depressive and manic states are viewed as manifestations of an internal conflict between the conscious personality and the repressed contents of the psyche.

Based on personal experience, the author proposes viewing bipolar disorder as a biopsychosocial process in which biological changes are closely connected with internal personality conflicts, chronic criticism, rejection, and life environment. The article suggests that exploring one’s own reactions, working through repressed experiences, and gradually integrating the Shadow may lead to the creation of a stable personality and, consequently, to the disappearance of pathological manifestations. Liberation, in this context, means not just the absence of symptoms, but the achievement of inner freedom and the end of the disorder’s control over one’s life

**Keywords:** Bipolar disorder, Jungian psychology, Shadow, Integration, Biopsychosocial, Liberation, Depression mania

## A Personal Case Study: Approach and Rationale

This article is a hermeneutic and phenomenological case study based on the author’s personal experience of living with bipolar disorder for over 33 years, followed by more than 20 years of sustained stability that emerged as a result of intensive psychological work.

The analysis is based on three main elements:

(1) personal experience of living with bipolar disorder for

over 33 years, followed by retrospective reflection on the patterns, experiences, and life circumstances associated with its development and course;

(2) the exploration of symptoms, dreams, and psychological processes, and their changes within the framework of Jungian analytical psychology;

(3) the exploration of the interplay between life events, interpersonal relationships, emotional reactions, and affective states, with the aim of integrating depressive and manic states into a coherent personality, achieving a stable life, and the

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Received Dates: May 29, 2026;

Accepted Date: June 13, 2026;

Published Date: June 16, 2026:

disappearance of pathological manifestations.

The goal of this approach is to explore the possible mechanisms that contributed to recovery.

## **Serotonin Theory of Depression: Review**

In 2022, a large umbrella review of studies on the serotonin theory of depression was published in the journal *Molecular Psychiatry* (Moncrieff et al., 2022). The authors analyzed evidence from several areas of research, including serotonin and serotonin metabolite levels, the functioning of serotonin receptors and transporters, and genetic studies related to the serotonin system. Contrary to the widely held view, the review did not find convincing evidence that depression is caused by a "lack of serotonin" or reduced serotonin activity.

(Moncrieff et al., 2022). These findings do not mean that biological factors play no role in the development of depression or that antidepressants are ineffective. Rather, they point to an oversimplification of the earlier model. The modern understanding of depression is increasingly moving toward a complex biopsychosocial concept in which genetic vulnerability, chronic stress, psychological trauma, social environment, sleep disturbances, inflammatory processes, and brain neuroplasticity all interact with one another.

## **Bipolar Depression**

Bipolar depression is of particular interest in the context of reconsidering the serotonin theory of depression. Unlike unipolar depression, it is part of a more complex and dynamic process that includes not only periods of low mood, but also states of mania or hypomania. This makes it especially difficult to explain bipolar disorder solely through a "lack of serotonin" model.

Bipolar depression demonstrates that affective states may be closely connected with disturbances in the regulation of emotional and cognitive systems, rather than only with changes in the level of a single neurotransmitter. The course of the disorder can be influenced by genetic predisposition, chronic stress, psychological conflicts, personality structure, sleep disturbances, social environment, and even the ways a person adapts to internal tension. In recent years, more and more researchers have come to view bipolar disorder as a multilayered biopsychosocial condition in which biological and psychological processes constantly interact with one another. (Goodwin & Jamison, 2007)

## **Jungian Approach**

Based on my personal experience of living with bipolar disorder for 33 years, I would like to describe my own exploration of this condition. For many years, I tried to understand what exactly was happening to me, searching for patterns and observing changes in my mental states. I noticed that depression could arise after certain words spoken to me, emotionally significant situations, or changes of environment, especially while traveling or being away from familiar surroundings. Back in college, I once asked a psychology professor what comes first - thoughts or chemical imbalance, but I never received a clear answer.

Later, I began working with a psychologist who introduced me to the Jungian approach. This theory felt both understandable and deeply inspiring to me. (Jung, 1959; Jung, 1968) Within depth psychology, a symptom is viewed not simply as a "brain malfunction," but as a message from the unconscious-an attempt of the psyche toward self-regulation and restoration of inner balance.

In the depth psychological approach, bipolar disorder is understood as a dynamic interaction between the conscious

personality and repressed contents belonging to the Shadow. The Shadow is formed from aspects of the self that were not accepted by the environment and gradually became internally rejected by the person as well. These repressed qualities, experiences, and impulses continue to exist within the psyche, accumulating and influencing emotional states.

From this perspective, depressive states arise when the contents of the Shadow begin to emerge and psychologically "flood" the person with feelings of helplessness, guilt, shame, or inner conflict. Manic states, in contrast, may function as a defensive reaction in which the psyche forcefully pushes these contents back into the unconscious, creating feelings of liberation, strength, and inner freedom.

The goal of therapy in this approach is not simply the suppression of symptoms, but the identification of what has been repressed and the gradual integration of these contents into consciousness, allowing them to exist in an acceptable and conscious form as part of the personality. As these aspects become integrated and no longer require extreme forms of expression, the need for depressive and manic episodes gradually decreases, and the psyche becomes more stable.

Although a genetic predisposition to bipolar disorder may exist, it can remain latent unless activated by psychological trauma or significant life stressors. In this view, biological vulnerability alone is not always sufficient for the disorder to manifest itself; the triggering role of emotional and environmental factors may be essential.

In this context, biological factors can be viewed not as a separate and isolated cause, but as an accompanying part of the process. Biology determines the sensitivity of the system: how easily states are triggered, how intense fluctuations become, and how quickly they develop. In other words, biology answers the question of "how strongly and how quickly," while psychological dynamics address "what exactly is happening and why." As the inner conflict gradually resolves, the biological process itself may also lose its intensity.

Based on my personal experience, I propose viewing bipolar disorder as a biopsychosocial process in which biological changes are closely connected with internal personality conflicts, chronic criticism, rejection, and life environment. The article suggests that exploring one's own reactions, working through repressed experiences, and gradually integrating the Shadow may lead to the formation of a stable personality and, consequently, to the disappearance of pathological manifestations.

## **Working with the Shadow**

In the Jungian approach, a person can gradually explore and integrate the Shadow - repressed qualities, emotions, and inner conflicts that have been rejected by consciousness. Working with the Shadow includes observing one's reactions, psychotherapy, dream analysis, and gradually becoming aware of those parts of the personality that were previously considered unacceptable.

With the support of a psychologist, I analyzed my dreams, behavior, and emotional reactions in an attempt to understand the roots of what emerged during depressive and manic states. Gradually, we found ways to integrate this material into real life instead of continuing to repress it. It was a very painful process that required honesty, inner courage, and a willingness to face unpleasant and previously rejected parts of myself that had never truly been explored and had simply existed somewhere deep inside.

## Chemical Imbalance

My body signaled the approach of depression through specific physical sensations - during the early years mainly in the solar plexus area, and later in my head. As I continued studying my own process, I began to perceive these sensations as the moment when "biology switched on," or as the beginning of a change of bipolar phase.

At first, I simply did not know what to do with these states. Later, during the course of psychological work, I began exploring what exactly preceded them. Gradually, I identified cognitive patterns and the emotional conflicts connected to them. After working through them, the sensations disappeared, and no new phase developed.

Over time, the entire bipolar process itself began to change. Whereas previously severe depressive episodes lasting many months occurred approximately once every three years, during the process of inner psychological work they became more frequent but significantly shorter and less severe. Gradually, these states began to feel less like overwhelming illness and more like a temporary pause or period of rest from the intense, almost continuous inner work of studying myself, my reactions, and my internal conflicts.

## The Role of Social Factors

My inner psychological work was preceded by significant changes in my close environment. At first, I lived with my mother, who was a physician and believed primarily in illness and medication-based treatment. During depressive episodes, she unintentionally reinforced my self-blaming thinking with phrases such as "don't do that again" and strongly insisted on taking medication. At the same time, she perceived the depressive state as something more "acceptable" and appropriate, while manic states were viewed as dangerous and unacceptable.

Later, I began living with my daughter, whose reactions were completely different. Instead of emotionally reinforcing my self-accusations, she responded by logically disproving them and pointing to concrete facts. Unlike my mother, she viewed manic states more as periods of health, energy, and activity, while seeing depression as the true pathological condition.

I believe that this change in the emotional environment and in the ways close people reacted to my condition created an important foundation for the deep psychological work that followed and for the successful outcome of that process.

## Day of Realization

I would like to describe an experience that I personally regard as the end of my bipolar disorder. Once I was working with a psychologist while discussing a very difficult life situation. The work took place online, and because of the time difference, the interaction felt almost continuous for three days.

The psychologist happened to choose a rather unusual strategy: she constantly presented different accusations and assumptions about me, while I defended myself and disproved them. The process became extremely intense both emotionally and cognitively. I was forced to constantly confront what accompanied my life- ongoing criticism and rejection.

After this, I had a very stressful workday. I felt strong inner discomfort but could not stop and focus on it. After the work was over, it became clear that the depressive process had already progressed quite far. Subjectively, the depression felt like a 6-7 on an internal scale, and the sensation of the "helmet" around my head became dense and pronounced.

I began analyzing what was happening and suddenly realized that the psychologist had unconsciously reproduced the role of my mother - a person who constantly found reasons to criticize me and fundamentally did not accept me as I was. At that moment, I understood that the problem was not the specific accusations themselves, but the deeper pattern of rejection behind them.

As soon as this realization became fully clear to me, I felt the "helmet" sensation literally begin to dissolve. The tension and depressive state weakened rapidly, replaced by clarity, inner lightness, and a surge of clean, active energy. It was at that moment that I realized I had overcome my bipolar disorder. It no longer controlled me or my life. Control over my life came to me.

## Result

The result of this inner work is that I have lived for more than 20 years without any symptoms of bipolar disorder. Gradually, the physical manifestations accompanying the inner imbalance also disappeared, including disturbances of sleep and appetite. My mood began to change naturally in response to real-life events rather than as an autonomous pathological process.

At the beginning of this journey, I constantly tried to control my condition and monitor the development of the process. Over time, however, this need disappeared. Life became stable, as did my sense of having a stable personality. At the same time, I occasionally miss the unusual intensity of experience that accompanied manic phases.

## Conclusions

The described case demonstrates the biopsychosocial nature of bipolar disorder. The biological process was real: it was experienced physically and accompanied by distinct bodily sensations that were perceived as the moment when "biology switched on." However, the biological process itself had roots in cognitive patterns and life circumstances.

This view is also consistent with research suggesting that psychological experience and psychotherapy can influence neural functioning and brain plasticity (Kandel, 1998).

In this case, the nature of bipolar disorder was closely connected with personality development under conditions of chronic criticism and rejection. These mechanisms gradually created an inner split within the personality. From a Jungian perspective, rejected qualities and experiences do not disappear but are repressed into the Shadow, where they continue to accumulate and influence the psyche from the unconscious.

In this case, depression appeared as a state in which the repressed contents of the Shadow psychologically overwhelmed the individual through feelings of guilt, shame, and inner rejection. Manic states, on the contrary, were experienced as a sudden liberation from this pressure - an attempt by the psyche to escape the burden of inner conflict. Similar observations were described in a previous publication focused on the psychological architecture of recovery from bipolar disorder (Veksler, 2025).

The social environment also played a major role. The reactions of close people either intensified the inner conflict or weakened it. Changes in the surrounding emotional environment and the appearance of different forms of emotional response created the conditions for the gradual integration of repressed parts of the personality instead of their continued suppression.

Work with one's own personality and changes in reactions to different triggers made possible the integration of the Shadow and the achievement of a stable personality and stable mental state.

Thus, this experience demonstrates not a separation between biology and psyche, but their constant interaction. Biology determined the intensity and depth of the process, while the process itself remained closely connected with psychological mechanisms, life experience, and relationships with other people.

The exploration of this process and deep psychological work with it may make possible the creation of a stable personality and a stable mental state without pathological manifestations.

This article describes a single personal case and should not be interpreted as evidence that the same outcome can be achieved by all individuals with bipolar disorder. The pathways leading to

bipolar disorder may differ substantially between individuals, and recovery may involve different mechanisms and approaches in different cases.

**Funding: None.**

**Data Availability Statement:** No datasets were generated or analyzed in this article.

**Conflicts of Interest:** The author declares no conflict of interest.

**Acknowledgments:** Not applicable.

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Cite this article as: Veksler D, Bipolar Disorder: A Jungian Approach and Personal Experience of Liberation. *Glob Open Access J Sci*. 2026;2(2):42–45.