

Doctors Go Mad Too

Atticus Finch in "To Kill a Mockingbird" by Harper Lee said: "You never really understand a person until you consider things from his point of view-until you climb into his skin and walk around in it." As a psychiatrist, I had hoped that I was pretty good at empathising with my patients. However, the last nine months of my life has taught me more about mental illness than years of clinics, ward-rounds, home visits or reading psychiatric literature. I have been signed off sick with a depressive illness, was detained under the mental health act and spent six weeks in an NHS psychiatric hospital. A few months ago I would not have had the motivation, confidence or concentration to write this. I am recovering and grateful for the excellent psychiatric help I received.

Recently, whilst collecting my son from school, I overheard a group of mothers discussing their recent GP appointments; "He seemed more depressed than me," "She was so stressed -she didn't listen or care what I said." These criticisms seem a common topic of conversation, but maybe I have become overly sensitive. Doctors aren't supposed to get ill.

Samantha Brooks, Clare Gerada and Trudie Chalder have recently reviewed the literature on the mental health of doctors: we have high rates of mental illness. Firth-Cozens' work in 2006 reveals up to 10-20% of doctors become depressed at some point in their career and have significantly higher suicide rates than the general population- particularly so for female doctors. We can suffer from anxiety, burn-out, misuse of prescription or illicit drugs, and addiction to alcohol. We're not super-human-in fact, many of us are quite messed up.

I am ashamed to say that, even though I had textbook symptoms of depression-early morning wakening, loss of concentration, appetite, enjoyment, motivation, along with tearfulness, irritability and tiredness- I didn't want to acknowledge it. I was still functioning at work. I had a classic case of "presenteeism".

I began doing on-line depression screening questionnaires but dismissed my high scores as a temporary blip. We all have bad days and put on a brave face. I felt I couldn't let my team or patients down by going off sick. I worked harder to try and compensate for how I was feeling; it's not surprising my colleagues didn't notice – however, some of my patients picked up I wasn't my usual self.

Clare Gerada has looked at the risk factors for mental ill-health in doctors. Patients and their families can have unrealistic expectations of what we can achieve for them. We break bad news and regularly see suffering and distress. Like many professions, we can have problematic relationships with colleagues. The so-called efficiency drives in the NHS lead to more bureaucracy, less time with patients and a biting knowledge that the cuts are rarely in our patients' best interests.

Firth-Cozens (1997) found many doctors have perfectionist traits that inevitably lead to self-criticism when things go wrong- which they do. We like to please people, feel an excessive sense of responsibility, experience guilt for things outside our control and are plagued by self-doubt (Vaillant et al, 1972).

Doctors often have significant mental health problems before they seek help. It didn't occur to me to see my GP. Many doctors don't even have a GP. I phoned a consultant psychiatrist I liked and had worked for in the past; he saw me at home, gave me a diagnosis of depression, started antidepressants and referred me to a psychologist. He was kind, understanding and suggested giving me a pseudonym when writing back to my GP.

I had become a psychiatric patient and am embarrassed to say the stigma made me feel physically sick. I felt ashamed of being "weak" and hated the idea that personal information and "failings" were going to be kept on an NHS database.

As a psychiatrist it is deplorable that I had such negative cognitions about mental illness. I can put some of it down to my depressed thinking at the time, but not all of it. Despite the Royal College of Psychiatrists anti-stigma campaign and some eminent psychiatrists and celebrities being candid about their illnesses- stigma is alive and well.

I returned to work briefly at the end of last year. It was common knowledge I had been depressed. Most colleagues were kind and supportive but some avoided me or were visibly uncomfortable in my presence. Undoubtedly there are unconscious processes going on, such as fear of developing illness themselves or anger at having to cover the ill person's work. Covering for a colleague with cancer is definitely seen differently. Tackling stigma against mental illness in doctors is not going to be easy- it is still a taboo subject.

I went off sick again three weeks later and my illness became all-consuming. I developed feelings of worthlessness and gave up all hope of getting better. Everyone involved in my care tried to help me but I ended up being detained under the Mental Health Act and was admitted to a PICU (psychiatric intensive care unit)- some distance from my home to help preserve my confidentiality.

I found it hard to be a doctor-patient. I was usually in control but now felt a prisoner. I was furious. I even tried ordering a torx key from the internet to unlock my window. Patients shared their stories of past successful escapes. We all enjoyed watching "The Shawshank Redemption" on DVD.

The psychiatric community is small and not free of gossip; it was right for me to be admitted out of area, but my family had to travel a long way to see me. There are a few specialist services for sick doctors but for me, a real life setting was, helpful. I learnt:

1. Your fellow patients don't judge you. There is a universal generosity of support, warmth and kindness.
2. Patients regularly lie to their consultants about their symptoms fearing more side-effects from medication. Many are too embarrassed to talk about troubling sexual side-effects but they talk to each other.
3. Patients are really bored and frustrated having little meaningful activity during the day.
4. Smoking really helps with socialising and passing the time. (I'm still trying to give up)

I was lucky. My depression lifted on a high dose anti-depressant, psychological therapy and the input of nurses and psychiatrists. I had a supportive family and friends to go back to. Many of the friends I made in hospital have less stable futures.

Being in a hospital community gave me the safety and support I needed. Doctors are not immune to mental health problems. Being a doctor can make you ill but as my community psychiatrist so wisely said, "It's only a blooming job." I'm looking forward to going back to work but there is so much more to life.

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