

A Piece of My Mind

Social . . . Security

Winters in North Carolina are always unpredictable. Mild but short summerlike days alternate with cold fronts that seem to bring new batches of colds. Crisp early-morning frosts harbinger an early flu season that strikes with such rapidity its victims know only that the timing is incredibly inconvenient. The winter holiday temperament is equally capricious, as family stress competes with family reunions, and gift-giving mingles poorly with the realities of recession.

In the community health clinic where I work, I establish routines to deal with this seasonal uncertainty. In such processes, though, nature more often wins, as I discovered one recent morning. Arriving at work, I was immediately informed that one of the other physicians had himself come down with the flu. Would I mind seeing six to ten of his patients in addition to mine? I consented while acknowledging that I would be running very late throughout the day and might rush patients, the staff, and myself, during a season and economic time that call out for patience, compassion, and understanding.

I was 60 minutes late for Mrs Walker's appointment. Her anger was not initially alarming. I knew that an apology and brief explanation would be sufficient for us to proceed. Mrs Walker, though, was waiting at the open exam-room door, and although angry, she seemed less so at me than at something unknown. "You know, the pharmacy closes in 20 minutes, and last time I couldn't get my medications for almost two hours," she blurted out as we both sat down. She turned her eyes away and assumed a guarded posture, seemingly shutting the door to further conversation almost before the exam-room door itself had closed. I immediately reassured her that because of my colleague's illness, the pharmacist had agreed to stay open throughout lunch.

I was taken aback by this initial exchange, and what followed was even stranger, one of those rare pauses in the clinical encounter. It was not one of those moments when we wait impatiently for the patient to respond to our multiple questions, but one of those times when we ourselves are unsure of what we are going to say. Normally, I would have asked Mrs Walker what seemed to be her main problem, but for some reason, the question that finally came was not a question at all. "You seem quite anxious and upset," I said as I leaned back slightly in my chair.

A piercing glance fixed me in my place as she said, "My head hurts, an awful headache I have. My whole head feels like it's going to explode. The pressure, that is, on the whole side of my neck, it's so tight that, that . . ., there must be a blockage of something. I thought my pressure must be up, although the nurse said it was OK. I think I'm having TIAs, that's my problem."

As she spoke, what she didn't say was more disturbing. Mrs Walker's dark eyes were truly angry, and her voice was sharp, accusatory, and wild. Her hands, opening and closing in opposition to one another, displayed anguish and anxiety. And her neck muscles sharply defined themselves anew with every sentence, seeming to bulge at the word "pressure."

"What's been going on in your life lately?" I asked. "Everything, just about everything," she replied, as she began to cry. This time, the pause was hers to break. "Well, you see, my husband died a little over a year ago of prostate cancer, and I was so depressed. . . . They say it gets better, . . . but it doesn't. I'm no better now . . . I'm so alone, . . . so lonely."

"Do you have any children?"

"Yes, but they all want what little money I haven't got anyhow."

"What do you mean?"

"Well, my husband left me a little Social Security, and with bills, medications, and the such, who's got any money left over, and my son needs a loan. I don't have money for him. I feel so guilty. . . . Besides, there's my daughters' medical bills."

"Tell me about your daughters."

"Kelly, she's an alcoholic, always has been always will be. Rachel's the one needing money; she's got three kids and just got out of prison herself, for selling drugs, of all things. Patty, she's my daughter-in-law, though she's just like one of my own. She . . . she was just diagnosed with lung

cancer, only 44 years old . . . (crying) . . . smokes two packs of cigarettes a day and a nurse, . . . how stupid! . . . Do you think I could get something to help me sleep? I can't sleep at all. Can I get some more of that Xanax I had last year after my husband died?"

"Well, let me first examine you," I said hastily, as I handed her a box of tissue, took a deep breath, and tried to collect my thoughts and deal with my own anxiety. A little empathy had gotten me in over my head. Was I feeling uneasy from hearing partial stories, knowing of parts purposefully put off, or from an uncertainty of how to proceed? I was acutely aware that I had not yet started a physical examination despite being with Mrs Walker for 15 minutes and having many more patients to see that morning.

I was beginning to understand that Mrs Walker's headaches and "TIAs" were likely the final manifestations of unresolved stress. I had no idea, though, how far back her anguish went. Proceeding with the physical, I said, "It seems that you must be a pretty strong person to . . ." "I'm tired of being strong," she blurted out, cutting me off as her own voice trailed off. "It's OK," I reassured her. "It's OK."

I examined her eyes and ears, head and neck, all of which were normal, as was the rest of the exam. With my hands returning to touch the side of her neck once again, I said that I needed to step outside for just a minute.

There I made my assessment. Mrs Walker was severely depressed as well as acutely anxious. In addition, she was strapped for money, unemployed, lonely, angry, and tired and had a host of conditions she was poorly prepared to handle. Realizing that my own sense of control felt threatened, I decided that Mrs Walker herself needed some control over the events in her life.

Returning, I told Mrs Walker what she obviously knew, that she was severely depressed and anxious. After inquiring about suicidal thoughts or plans, which she denied, we discussed the relationship between her headaches, pressure feelings, and unresolved stress. I told her I would try to help her start feeling better, and we agreed to an appointment with a mental health professional, for her to discuss her problems with a close friend, to start taking a low-dose antidepressant that might also help with sleep, to return in one week for a follow-up appointment, and to talk with one another over the telephone in two days. Mrs Walker then left while I returned to a backed-up morning.

Meaning often remains unclear. As healers, we try to heal our patients' wounds, whether physical or mental. Mental wounds are harder to heal, because it's often difficult to clearly identify the "lesions." They are uncovered slowly, if at all, for their home resides deep in the soul. "Bleeding" may go unrecognized for a long time.

Mrs Walker appears to be such a person. With her mind speeding out of control, she doesn't know how to stop. Her brief disclosures conjure up images of an unfair and cruel life. And I, of course, want to justify the often unjustifiable. In an hour's time, I share the anger and sorrow of an older woman's lonely struggle.

The next week she returns, headaches, pressure, and crying episodes little improved, but her feelings of anxiety less severe. New issues arise as she fills me in on old ones unresolved. "My first husband, you know, he killed himself 20 years ago!" Even with such a disclosure, her affect has perceptibly changed. She appears less out of control. And I feel less threatened. A brief smile ends our session, and we agree to see each other in one week.

Seven more days. The headaches are slowly improving and sleep has definitely improved. Mrs Walker will talk with her minister this week. A fragile control is returning for both of us. Our conversations amidst this chaos affirm life worth living through the current misery, suffering, and pain. Such morsels may feed and nurture our spirits until our appetites return.

"But I'm still so depressed," she says, as we try to remember life's wonder with its tragedies, unpleasant pasts with future unbridled promises. Balancing pain with pleasure, we will touch each other in ways unknown. Even as we grieve, we endure and move forward.

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