

Focus

It'll never happen to me!

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I'm told there could be 100 alcoholic doctors in New Zealand, that more than half of these use drugs as well. And I gather that doctors have twice the suicide rate of the general population.

These misfortunes will never happen to me, of course; but clearly we need to be aware of the issue, just in case!

Why am I at risk?

I am likely to have come from a dysfunctional family, my parents having excessive expectations of me. I will therefore have a low self-esteem, a need for affirmation, and will be an overachieving people-pleaser. Alcohol, and sometimes drugs, give me confidence, and help me feel worthwhile, invincible and in control.

At my medical school, heavy drinking was the norm, and I discovered that alcohol was a rapid and effective tension-reliever.

During my years in hospital practice there was a culture of survival of the fittest, covering up of mistakes, and a lack of personal support and mentoring. Remnants of this culture persist in my character, even today.

Now, in my own practice, I am continually stressed, isolated from support and supervision, and have minimal accountability to an "employer".

I have easy access to psychoactive drugs and often self-prescribe.

Why am I unlikely to seek help when a problem develops?

I tend to isolate myself from my colleagues; communication tends to be about clinical topics rather than personal issues.

I have no regular meetings with a close personal GP, colleague or mentor/supervisor. I don't know anyone I could trust enough to talk about my problem.

I received minimal education on alcohol/drug problems and certainly

none on self-care.

If I start misusing drugs or alcohol, my colleagues and associates are unlikely to challenge me because of my position in the practice and community. As a pillar of my community, esteemed by patients and staff, I am unable to admit my weakness.

I am expected to be competent, resilient and stable, and be able to sort out my own problems. I must not let down my patients, staff or family.

My family, staff and colleagues cover up any lapses, or excuse them on grounds of stress and overwork. Anyway, most of my lapses have been minor and apparently not noticed by anyone.

How can I prevent alcohol/drug problems developing?

I need a mentor throughout my training and professional career (one suitable resource is "Mentor Professionals Ltd").

I must have my own personal GP, and make contact regularly.

I need specific training, encouragement and to institute regular supervision/mentoring, peer group support, and other self-care measures (eg, time management). The RNZCGP is committed to assisting me in these areas through MOPS, the College Self-care Pack, CME, etc). Many IPAs are also encouraging these measures and providing resources.

I need to become aware of my own vulnerability, and take steps to avoid isolation and excessive stress (eg, "time-out", outside interests, exercise).

I need a support network, a balanced life-style, and a clear personal philosophy and spirituality.

Why am I reluctant to intervene when a colleague is becoming impaired?

I am not really sure that the problem is serious enough.

I don't want to compromise my colleague's good reputation, or our relationship.

I don't have the skills, knowledge (or courage) to know what to do; I might even make things worse.

Hopefully my colleague will realise there is a problem and take action him/herself (or someone else will!).

There is not much hope of changing things. (However, it appears that

doctors do remarkably well in treatment.)

"There go I but for the grace of God!"

What can I do if I suspect that I have an alcohol/drug problem?

I should talk frankly to a trusted friend, colleague or my personal GP.

I can seek professional counselling (eg, local A & D service, private counsellor) or mentorship.

I can contact the Doctors' Health Advisory Service (DHAS) (Phone 0800 4716254). An appropriate colleague will be appointed to make contact confidentially and discuss counselling, referral or other options.

I must be honest with my family, partners and senior work associates.

What can I do if I suspect that a colleague (or friend/family member) has an alcohol/drug problem?

I should arrange to talk honestly and openly with the person, confining the discussion to facts rather than opinion (both of us could have a support person present).

I can talk to a respected colleague about what to do. I should contact DHAS for help and advice.

It is important to be aware that I have a legal obligation to notify DHAS or the Medical Council if the colleague's problem is compromising patient care.

I'm tempted to move on to the next article. But on the other hand maybe I'll have a go at the checklists first, and perhaps arrange to talk to a senior about that colleague causing concern. Perhaps there is more to all this than meets the eye! Perhaps it could happen to me!

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