

When Your Pain is Bigger Than Theirs

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Jackson was new in the office and working diligently to bring his best to it. The MD and chiropractor who had created this great opportunity for him referred patients. It was ideal in that he could focus on being a good acupuncturist rather than being a good marketer. He had been very excited to get the position and felt excitement each morning as he got ready for work.

Even though Jackson was researching every case thoroughly and doing his best to deliver quality treatments, his efforts were overshadowed during one particular week. There was a cloud hanging over his thoughts, a hazy, mind-numbing fog. Jackson's ability to be fully present with his patients was compromised. He couldn't think in the myriad directions required for competent diagnostic evaluations. The inductive reasoning processes that make magic possible in the treatment room were, simply, broken. Patients repeatedly asked him if he was feeling OK because his gaze wandered and his attention vanished. Ashamed and frustrated, Jackson didn't know what to do. He had another two full days of patients and he wasn't connecting, as he should. The pressure to make a good impression on the clinic owners was pressing on him, as was his own desire to do good work.

However, achieving his best wasn't going to happen just then. One week earlier, Jackson's wife, Marley, had delivered their first child in her seventh month of pregnancy. The fetus appeared healthy throughout and nothing lead them to believe that his heart would just stop beating. However, such had been the case and Marley's physician made the decision to induce labor. After many tragic and agonizing hours, the child was stillborn. Jackson was in shock, and the pain wouldn't go away just because he walked into the office. He had taken a few days off but couldn't afford to remain at home doing nothing but feeling bad. Besides, he had to earn a living.



While these dark circumstances don't happen often, they do happen over the course of one's life and medical practice, and their consequences can dramatically affect the quality of one's work and ability to function at the clinic. Other challenges may appear more regularly.

Ashley had horrible allergies in the spring. Her eyes got heavy and red, and her head felt like a ball filled with fluid. She was miserable. While acupuncture and herbs had helped her dramatically, the first few weeks of spring were still very rough and getting through each day had become difficult.

Between the herbs, homeopathics and aromatherapy steam sessions for her sinuses, Ashley had to squeeze in time for her patients. As attentive as she tried to be, her hearing became muted through her congested ears. Standing upright and giving her entire attention to the person in front of her was nearly impossible. She could hear her heart beating in the heavy silence brought on by the fluid in her head and lungs.

We have all had treatment days during which our pain, be it emotional, physical, mental or circumstantial, felt so severe to us that our patients ranked a distant second. As a result, we may feel alone, overburdened and/or overwhelmed. Days like that require fortitude, tenacity and ingenuity.

Feeling lousy while helping others feel better can be a blessing or a curse. The blessing involves losing your pain in service to others. It can provide a safe haven from your own unhappiness or discomfort. Immersing yourself in restoring life and vitality to those who look to you can support you in unique and wonderful ways. Research tells us that those who support others are happier and have a more positive outlook on life. There are chemical changes in the body that inspire feelings of well-being as we see satisfaction, joy and gratitude in the faces of those we support. Sometimes going to work is the best thing you can do to get through a rough time. It feels grounding, stabilizing, familiar and fun. Work is a world that you know and may be a lower-risk environment as a result.

However, if the goodness of giving to others, the safety of familiarity and the intellectual stimulation of an interesting case don't relieve the pain, the clinic may be the worst environment to find yourself in when you are hurting. What can you do when the challenges you are facing are too big to override, ignore or overcome? Here are a few options.

Set time in your schedule to take short breaks. If you can give yourself 15 minutes between patients, you can lie down and rest, gaze at the wall, call home and address concerns, or rest your body. Sometimes designating time to cry is the best way to make it through a hard day.

Call a colleague. Just talking to a fellow practitioner can be a relief because you can let down, be honest about the difficulties you are facing and receive support. Adding the loneliness of having to hide how you are feeling to your already difficult day compounds the problem. Having a support person to lean on can relieve that tension and stress.

Leave an appointment slot or even two open in the middle of your day. Take that entire session time to lie down and rest, address the problem directly, zone out, listen to music, deal with your own physical challenges so they become less acute, etc. Opening your schedule to find room for yourself can make the difference between doing good work or bad. In this context, giving to yourself may be the best way to give to your patients.

Spend less time in discussion with your patients. Not every session has to be the big, life-transforming experience you would like it to be for them. If you can do a good job medically, you can pull back emotionally and know that, while patients may be used to getting more of you and may prefer that, they will continue to improve with the work you are doing. In essence, cut yourself some slack. You don't have to be the superhero everyday.

Do not reveal to your patients what you are going through unless you are up for dealing with their reactions and suggestions. When a patient becomes the caregiver to an emotionally or physically distraught practitioner, a well-cultivated balance is thrown off. While there may be circumstances and individuals with whom this transfer of power can be successful, it generally isn't and the risks outweigh the rewards.

Use the relationships that you have with colleagues in the office. Lean on them, ask for their ear, and let yourself mourn or hurt freely with them for short periods between patients. Ask for help from other caregivers. The bonds in your office can be strengthened when you feel the weakest.

Plan something truly supportive following a long workday. Sometimes having a healing experience to look forward to can help you cope in the short term.

Remember that you are not alone. We all go through days at the clinic that would be better spent on the receiving rather than the giving, end.

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