

# A primer for the ‘walking unwell’

Millions of Americans don’t recognize that they’re suffering needlessly from easily treatable mental illnesses

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Tim Brinton/Newsart

By Marnin E. Fischbach

A 26-year-old woman entered my psychiatrist's office in Denver years ago, red in the face, trembling and sweating profusely. She could barely speak a whole sentence. Thinking that she might be suffering from extreme social anxiety, I asked if she was especially nervous talking in person. She nodded yes, so I sent her home after three minutes and completed her evaluation by telephone.

During the phone interview, I learned that this young woman had not been able to leave her home for seven years, except to go to the 7/11 in her neighborhood at 2 in the morning when virtually no one would be there.

Her story ended happily: I prescribed medication for her social phobia, her fears gradually eased, she got married, and she moved out of the state one year later. During her seven years of withdrawal from society, she had no idea that her symptoms were treatable. She had been dragged in for the initial evaluation by her mother.

Similarly, one 50-year-old patient I treated was a brilliant professor but was teaching in a small college for a meager sum. When I asked why he had not advanced further in his career, he said he could not bring himself to request a raise or promotion. As it happens, this man was suffering the same condition as the young lady.

He was started on Zoloft, and the dose was gradually raised. In our sixth and final session, he informed me that he soon would move elsewhere. "Why so?" I asked. "Doc," he explained, "when I came to you it was because my wife forced me to. I thought it was bull ... But after treatment, I stopped caring what people thought of me. I wasn't self-conscious anymore, so I started searching online for jobs and just landed one." He was hired to open and run a brokerage in a large city. His income quadrupled overnight.

Psychiatric conditions usually involve chronic, lifelong symptoms. Depression, bipolar disorder, schizophrenia and anxiety disorders manifest first in adolescence. The onset of attention deficit hyperactivity disorder occurs earlier in childhood.

It is not surprising, then, that people suffering from these conditions, impaired as they might be, may view their experiences as "normal" for themselves rather than as medical symptoms subject to treatment and improvement. And herein lies one of the most profound problems

confronting mental health care: Average people have no frame of reference to define their impairments as treatable medical symptoms and therefore are unlikely to seek treatment.

I sometimes see this clearly in my practice. A current patient, grateful for the rapid success of treatment for her panic attacks and depression, tells me that a remaining issue for her is her husband. She thinks he is severely depressed, to the extent that he cannot enjoy life, nurture their marriage or complete a college degree. When she pleads with him to seek help, as she did, he refuses. He is convinced, as are many others, that psychiatric medication and treatment would somehow change his personality -- that is, make him into someone other than the person he knows.

Please, everyone, understand that psychiatric medications will not, under any circumstances, alter one's personality. Rather, these medications, be they antidepressants, mood stabilizers, stimulants, antipsychotics or antianxiety agents, often can simply melt away disabling symptoms to a significant degree.

If you enjoy watching Pens' games and hunting with your buddies, you can return to these activities with greater zest. If you read copiously and hang out with your female friends, you can pick up your books again and enjoy long conversations with your companions. You will not become some other person, much less some sort of zombie.

To help people better identify treatable mental health problems in themselves and others, I advocate introducing behavioral health education into the public school curriculum. In the meantime, I offer a brief primer on the subject.

If you are sad, low-energy, tearful, joyless and have little motivation or hope for the future, you might be suffering from depression. Nervous and excessively worried? Likely anxiety. Bouts of terror, extreme nervousness, sweating, trouble breathing, tremor? Panic attacks. Unable to go to stores or other public places? Agoraphobia. Highly self-conscious, feeling critically judged by others, avoiding social situations? Social phobia.

Are you checking the doors, the stove or the iron repeatedly, or spending a lot of time counting numbers or conducting magical "rituals?" You might have obsessive compulsive disorder. Difficulty paying attention in classes or meetings, unable to complete tasks, fidgeting

a lot or easily distracted? ADHD. Often feel angry, need little sleep, spend too much money, racing thoughts, frequently elated? Hypomania.

This list is hardly exhaustive, and I have deliberately avoided mention of psychotic disorders. These conditions, such as schizophrenia, as well as suicidal symptoms, are so debilitating and dangerous as to make their presence more obvious. Here I've addressed symptoms that many, many people harbor while remaining quite functional. Call them the "walking unwell." These are the people most likely to miss their symptoms, even when those symptoms are clinically impairing.

It is estimated that 50 percent of Americans suffer from a diagnosable behavioral condition, but only 3 percent seek psychiatric treatment. This is more than unfortunate, considering that psychiatric treatment often can cure or reduce symptoms – and can often do so quickly and at relatively little expense.

Relieving mental health symptoms can be like cutting the string that holds a balloon. Untethered, people can rise to new heights of happiness and achievement.

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