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IMPROVING THE QUALITY OF YOUR PERSONAL AND PROFESSIONAL LIFE

OVERCOMING DEPRESSION

I am a 47-year-old lawyer and have suffered from clinical depression for the past seven years. It is my hope that in writing about my experiences, I will reach those who need to get help. Depression is not just a problem in our profession – it’s a five-alarm fire. Studies suggest that lawyers suffer from depression at a rate double that of the average American.

What Is Depression?

Depression is not about “feeling blue” or having a tough day. It is an illness. Whether its causes are genetic or environmental, we still end up in the same place: Depression has a dramatic effect on the human body, mind, and spirit. Seven symptoms are associated with clinical depression. You only need to experience four of these for at least two weeks to be diagnosed as clinically depressed:

- Weight gain or weight loss;
- Trouble sleeping – either too much or too little;
- Agitation or a slowness and/or heaviness in your physical movements;
- Fatigue or loss of energy;
- Feelings of worthlessness or excessive guilt;
- Diminished ability to think, concentrate, or make decisions;
- Recurrent thoughts of death or suicide, suicidal ideation, or an attempt at suicide.

No blood test or X-ray can determine whether you have depression. Only a skilled and trained psychiatrist or psychologist can make that diagnosis. With-

out this critical professional input, you may wrongly conclude that you are just “bummed out,” that you’ve just always felt this way, that it’s normal to feel as you do, or that some other cause explains your problem. To cope with these feelings, some people drink too much or take drugs. These are dangerous ways to deal with depression.

My Descent

My own journey with depression began when I turned 40. I had been a litigator for 15 years. I had always felt the heat of stress, but I just assumed it came with the territory and helped motivate me. Over time, my fear turned into anxiety. I couldn’t shut off the fear-provoking thoughts and feelings as I ground out my daily workload. Eventually, the anxiety turned into something else. I was tired all the time; I felt like cement was running through my veins. My sleep was disturbed and I overate, numbing myself in front of the television. I felt sad all the time, with little apparent reason: I had a wonderful family and a great job at a good law firm.

I started seeing a psychologist, and when I explained my thoughts, he said, “That’s the depression speaking.” He suggested I see a psychiatrist. When I arrived at the doctor’s office, I quickly went to the waiting room, hoping no one would recognize me. I slumped into a chair and sighed. I felt like the loneliest person in the world. The psychiatrist told me that my fatigue and sadness were caused by my depression and that I would need medication. “It’s no different than suffering from diabetes and needing

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insulin,” he assured me. My brain had a biochemical imbalance. I left content that at least I knew what was wrong with me: I had an illness – one that could be treated.

I decided that I had to tell my three law partners that I would need some time off to allow the medication to start working. I felt guilty about this; after all, I was the managing partner. I was supposedly a superhero, a problem solver who fixed other people’s lives. I wasn’t supposed to be the one with a problem, the one who felt vulnerable and broken. In a quaking voice, I told my partners about my depression and how serious it was. One partner turned to me and said, “What in the world do you have to be depressed about? You have a beautiful family and a great job here. Just go on vacation!” His angry and incredulous voice made me feel six inches tall. One of the other partners, smiling, confidently said, “At 95 percent, you are better than any lawyer I know.”

Both of these reactions, I later learned, are typical. My first partner’s exhortation to remember the good things in my life didn’t help. It just shamed me. His thinking was: “If only you were more grateful, you wouldn’t be feeling this way.” Yet I had repeatedly told myself how much I had to be grateful for; this technique fell on depression’s deaf ears. My second partner’s reaction was an attempt to minimize the problem. The thinking was: “Things aren’t so bad. You’re a little down now, but just take some time off and you’ll be back, good as new.” I told him that I wasn’t at 95 percent – I was at 10 percent.

So I took the time off. The medication made me feel numb and zoned out. After a month, I returned to work and slogged through my days for another year. Then I tried changing medications. The new one lasted only three months – it produced acute anxiety in me. I remember driving home on a beautiful summer day and feeling as though my body was on fire. That led to a third medication. This prescription seemed to work, and I am still taking it. It has been supplemented with another medication, and I feel that this combination has largely squashed the worst parts of my depression. The depression is still there, but the medication keeps it at a distance.

Medication was just a partial answer. It didn’t fix my depression; however, it did calm my mind and

alleviate bodily symptoms so that I had the energy to start examining my life. In therapy, it became clear that my thinking was garbled. My psychologist calls it “twisted thinking.” A depressed person distorts reality with his or her depressive thoughts. Because depression is such an isolating and lonely condition, these thoughts often go unchallenged. We need a skilled and caring therapist to help us confront this negative self-talk and replace it with more healthy, positive, and self-caring thoughts.

For example, I used to think – perhaps 50 times a day – “Nobody cares about me.” Yet, if I actually looked at my life, this really wasn’t true – not even close. I had to learn to embrace the people in my life who really cared about me. They simply didn’t know about the depth of my pain because I hadn’t let them in to see it. I didn’t give them the opportunity to show that they cared about me. Men, in particular, have a hard time expressing themselves, fearing that they will appear weak or emotional.

Turning It Around

In her book *Listening to Depression: How Understanding Your Pain Can Heal Your Life* (Oakland, California: New Harbinger, 2006), psychologist Lara Honos-Webb presents depression as not just an illness but as a wake-up call, a signal that we have been traveling down unfruitful paths. She encourages us to see depression as an opportunity to change our lives. Something in us, if we would only listen, is telling us that we are killing ourselves. We often don’t listen, so that voice turns up the volume until we get sick with anxiety and depression, or with heart disease, hypertension, and cancer. If and when we do finally pay attention, as lawyers, we are experts at looking at problems from an analytical angle. When we turn that powerful lens on ourselves, seeking to “solve” our depression, it doesn’t work. The mental habits that serve us well professionally cannot heal us and may even be part of the problem.

In his book *Authentic Happiness* (New York: Free Press, 2002), Dr. Martin Seligman has a chapter entitled “Why Are Lawyers So Unhappy?” He says that one of the reasons is a “pessimistic explanatory style” that lawyers learn beginning in law school. Pessimists have an underlying attitude that their experiences will usually (or always) be negative, and

they also believe failures are their fault. Pessimistic thinking has been linked to depression. Contrast this with optimists, who believe that positive outcomes are the result of their efforts and that more positive things will happen in the future.

After a diagnosis of depression, it can be easy to evade responsibility for our own recovery. Some time ago, I was in a great deal of pain. I was crying, telling my therapist that my depression wasn't going away despite my sincere efforts. I felt punished by my depression. He gently told me to begin thinking in constructive ways. This was a turning point for me – to work on not feeling like a victim. If you want to start healing, ask yourself what behaviors you are willing to change or what new behaviors you are willing to try to help yourself get better.

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What Can Lawyers Do About Their Depression?

1. Get help. You can't handle this by yourself. It's not your fault. It is bigger than any individual person. The attorney counselors at the Oregon Attorney Assistance Program can help and will provide resources and referrals. Call 503-226-1057 or 1-800-321-6227.

2. You may have to take medication. That's okay. You may have a chemical imbalance that you need to address. Therapy usually can't help until you have the energy and insight to focus clearly on your life.

3. Consult a trained counselor. Whether you need medication or not, you will need to confront your negative thinking with a therapist. You really can't do this effectively with friends or family alone. Cognitive behavioral therapy is a particularly effective treatment for depression. Interview a few therapists before you choose one.

4. Exercise. The value of exercise is widely known: It's simply good for everybody. For a person with depression, it becomes not just a healthy habit but a critical choice. In his book *Spark: The Revolutionary New Science of Exercise and the Brain* (New York: Little Brown, 2008), Harvard psychiatrist John Ratey devotes a whole chapter to the importance of exercise in treating depression. Please check this book out.

5. If you have a spiritual practice, do it. If you don't, think about starting one. This could include anything from a formal meditation practice to attending religious services to walking in the woods. A lot of research suggests that people who have a spiritual practice do better with depression. Spiritual growth and development can form an important pillar of your recovery.

6. Join a support group. It can be invaluable in helping you see that you are not alone and that others share in the very same struggle.

7. Get educated. Learn about the powerful connection between stress, anxiety, and depression. In *Undoing Perpetual Stress: The Missing Connection between Depression, Anxiety and 21st Century Illness* (New York: Berkley Books, 2005), Dr. Richard O'Connor proposes that depression is stress that has continued too long. The constant hammering of stress hormones

on the brain changes its neurochemistry, often resulting in anxiety disorders and clinical depression. I list a number of other great books on my Web site, www.lawyerswithdepression.com. The site also offers guest articles, news, podcasts, and helpful links for lawyers.

8. Build pleasure into your schedule. As busy lawyers, we have the "I will get to it later" mentality, especially when it comes to activities that are healthy for us. We have to jettison that approach and begin to take time – *now* – to enjoy pleasurable things. A hallmark of depression is the inability to feel happiness or joy. We need to create the space to experience and savor these feelings.

9. Reevaluate your job and career. Most people don't like change. Yet this advice falls into the category of "What are you willing to do?" Maybe you will have to leave your job or change careers. Temporarily stressful? Yes. The end of the world? No. Maybe you just need to restructure your practice. Whatever you do, your good health must become the top priority in your life. I changed the nature and variety of my practice and now have less stress in my life. It can be done.

10. Practice mindfulness. In mindfulness meditation, we learn to let our thoughts and feelings pass without reacting to them. Read J. Mark G. Williams's compelling book, *The Mindful Way Through Depression: Freeing Yourself from Chronic Unhappiness* (New York: Guilford, 2007), for an excellent primer on how you can incorporate mindfulness into your day. The technique has proven very useful with depression.

11. Be kind to yourself. Begin with a conscious intention such as, "I am not going to treat myself poorly anymore." Such a simple refrain can help. Depression is often built on poor mental, emotional, and physical habits. We must learn to acknowledge that we are worthy of love from ourselves and others and that part of such love involves taking care of ourselves.

These tips were published as part of the article, "Overcoming Depression," by Daniel Lukasik, in GPSolo, October/November 2009. © 2009 by the American Bar Association. Reprinted by permission.