

## Humans of Medicine

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DR VICKY DAWES

### Minds of Medicine

By Dr Vicky Dawes – Counsellor at Doctors' Health Queensland

“I’ve got a chap in Resus 1 with what looks like a saddle embolus, ICU are on their way, the lady in bed 2 has type 2 respiratory failure and needs to go on NIV and the man in 3 with the STEMI will be on his way to the cath lab in a sec. Could I get a hand setting up the NIV?”

The consultant in charge shrugs, “You know what to do”.

I walk back to resus to set up the NIV, berating myself for asking for help, this is my job after all, I should be able to handle this. A little thought pops up, “Maybe I’m not cut out to do ED?”

Not long after, I am discussing the plan for the man in Resus 1 with the ICU reg, when an RMO pops their head around the curtain to ask if I can review one of their patients. I bark back, “ARE THEY DYING? NO? WELL IT CAN WAIT THEN”. What have I become?

Of course, it wasn’t really about that particular day. A slow attrition of experiences over time had eroded away at me. I didn’t notice it happening.

A few months later I had reached a point where I felt a dread bordering on terror at the thought of just walking through the doors to the department. It was as if my fight or flight response dial was stuck on MAX and not just when I was at work. On an abseiling trip with friends, I opted out and chose to sit at the top of the cliff – I reasoned when my working life was adrenaline filled, I didn’t need any more for recreational purposes.

It hadn’t always been like this. At 28 I was one of the younger ED Advanced Trainees in the department. ED was exciting. I loved going in to work not knowing how the day was going to unfold. I found the mix of procedural skills and mental challenges stimulating. The sense of accomplishment at the end of the day, for having made a difference to people’s lives, was enormously rewarding.

But now it seemed the walls were closing in, I felt suffocated and trapped. I was sure I couldn’t continue, but what else could I do?

Maybe some time off would help? I made enquiries.

“We can’t keep the job open for you. If you want to take some time off you’ll have to resign and reapply when you want to come back.”

Frazzled but free, I started my unemployment thinking a holiday might help, and with no clear reasoning behind the decision, decided to go walking. I hiked through the Northern Territory, sleeping on a mat under a mozzie net and collecting water to drink along the way. It was exactly what my mind and body needed. Slowly and gradually, by focusing on the basic needs to survive my brain readjusted and settled. The process started on that trip but it took me months, if not years, to fully recover. I’ve never experienced the same symptoms since.

Once back from my travels, I found myself in a different sort of wilderness. I felt simultaneously relieved and lost, I knew I didn’t want to go back and do emergency medicine, but where to from here? And if I left medicine altogether, who was I if not a doctor?

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There is a quote by author Bernadine Evaristo referring to “the infinite possibilities of who we are”. And here I am 12 years later, living out one of those infinite possibilities as a masters trained counsellor working for @dochealthqld. In my private practice I provide counselling for uni students and I recently led the development of the University of Queensland’s mental health strategy. I love my work, and am inspired daily by the people I meet. For me this is my ikigai. I share my life with my husband who has stood by me throughout, and along the way we have gained two kids, a dog and an addiction to trail running (well - the trail addiction is just me and the dog).

It took a long time for me to be open about my experience, the shame I felt told me to keep it hidden, particularly from other doctors. Once I owned my story, that shame was dissipated by the empathy of friends, many of whom finally felt comfortable to be open about their own experiences of burnout, suicidal thoughts, imposter syndrome, personal and career crises and mental health challenges. Our conversations inevitably contained the words: “I didn’t have any idea you were going through this”. But then doctors are trained to be skilled at emotional labour, of course.

I wouldn’t wish the dark times I went through on anyone, but I do thank the experience for helping me to reflect and develop in ways I probably wouldn’t have done without; a sort of post traumatic growth if you will. I know I am more prepared to listen with empathy, compassion and openness and to consider the complex set of circumstances, influences and experiences that have helped shape the person in front of me – whether that is a client, colleague or friend. We are all a unique combination of remarkable and messy and flawed and inspiring, but we don’t get to see and share all of this unless we truly connect.

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If my story has resonated with you, know that you are not alone. If you would like to speak to someone in confidence, to someone who “gets it”, you can call your local doctors’ health advisory service (@DHSA, @VDHP, @TDHP, @DHASWA, @DHAS, @dochealthqld).

If you are considering leaving medicine, before you do - think laterally, there are more possibilities worth exploring within medicine than I knew about at the time, but also know that it is possible to have a worthwhile and fulfilling career outside of medicine if you choose to. Think of this as a permission slip to leave with dignity. In career counselling, there is a theory called planned happenstance that describes how unpredictable social factors, chance events and environmental

factors can be important influences on our lives and by being open and flexible we can turn these into hitherto unanticipated career opportunities.

If you are a consultant or administrator, consider how to establish psychological safety and create a supportive, mentally healthy workplace that enables both compassionate connection and difficult conversations. The rewards are far reaching for all involved, including patients.

If you are “the” consultant, I hold no ill will towards you. I suspect the dictates of medical culture 12 years ago both prevented me from being transparent with you as to quite how hard things had become and discouraged you from asking me the questions that would have allowed me to tell you.

If you have friends or colleagues you think might be going through a tough time, take the time to connect, listen and counter their shame with empathy rather than advice.

If you are interested in doctors’ health – speak with your state or territory doctors’ health advisory service and see how you can get involved and how they can support you to make changes in your workplace.

In the words of Hippocrates, “wherever there is a love of medicine, there is a love of humanity”.