



Emotional Health and the Dentist

FOUR IN A SERIES OF SIX ARTICLES

by Paul H. Earley, M.D., FASAM

In our first three articles, we discussed the importance of emotional health for all of us who work in the medical community. As a group, medical professionals set aside our own needs during training and our careers, focusing on the health of our patients. We introduced you to Noah Marshall, a fictional, bright, energetic dentist early in his career. Noah is an associate in a general practice in a moderate-sized Canadian town near his wife Jeanne's family. After an injury, he was given a short course of hydrocodone. He felt pain relief, but also provided him with a calm, focused energy. When we left him, his initial casual use of hydrocodone had become more regular and problematic. At the end of our last episode, Jeanne is horrified to discover their four-year-old toddler dancing around the house to the sound of a bottle of pills shaking like a rattle.

Jeanne ran to her daughter and snatched the bottle of pills from Julie's hand. In a moment of frustration, she exclaimed "Where did you get these?" Julie ran from the room crying. Jeanne snatched the pills and went to console her daughter, apologizing for her misplaced anger and fear. She put the pills in a kitchen cabinet, up and away from inquisitive hands. In the busyness of a young mother's day, the bottle of pills was forgotten.

Returning from the grocery store later that day, Jeanne recalled the morning crisis. She went to the kitchen cabinet to investigate her daughter's dangerous discovery. To Jeanne's chagrin, the bottle was half-filled with hydrocodone. The label identified Dr. Noah Marshall as the prescriber to an unknown patient. Jeanne's first thought was "Why would these be in my house?" As her thoughts about this odd circumstance begin to fade they were replaced by a low, rumbling subterranean dread. She couldn't quite put her finger on what she felt but sensed an inchoate intuition: something was terribly wrong.

Noah arrived home at the end of the day looking tired and defeated. As he walked in the door, Jeanne's first thought was "This has been his consistent demeanour for quite some time." Angry, confused and unsure, she walked up to Noah. The bottle made a loud crack as she slapped it onto the counter. "I discovered your daughter rattling these as she pranced about the house today." Noah's eyes opened wide. He stammered "Where did she find those?" Unaccustomed to argument, the couple fell into a halting, back-and-forth squabble. Noah contended that he accidentally put the pills in his pocket when a patient mistakenly left them in a treatment room. Jeanne returned again and again to questioning Noah about the pills. As the disagreement continued, her real fear percolated to the surface. "Are you taking these?" In a quick retort, Noah said, "What kind of a person do you think I am?" He grabbed the bottle and stormed out of the kitchen. No further words passed between them until a perfunctory "good night" as they climbed into bed.

After a restless night, Jeanne awoke the next morning even more worried about Noah. She wanted to believe this was all a mistake, but something told her otherwise. Her thoughts were ill-formed but persistent. Could it be that Noah's bad moods and behaviour changes were related to pills? She reminded herself that she had never known Noah to lie to her—but even this did not assuage her concern. Jeanne searched on the internet, but found little to convince her one way or another. She reminded herself that Noah was a good man; of late he seemed moody, distant and erratic. She pushed the thought of Noah abusing pain pills out of her mind.

Noah left the house the next morning feeling low and mean. He tried to cover up his guilt by a hollow indignation at his wife's confrontation. He arrived in the office to a full schedule. With a sigh, he put on his clinic coat while swallowing three hydrocodone pills. Several days passed and the conflict at home cooled. Work kept getting busier or so it seemed to Noah. Unfortunately, his guilt served only to fuel his hydrocodone use. He struggled to keep up with his body's increasing hunger for the drug. At first, the pills paradoxically gave him energy. Now, Noah was barely able to drag himself through his day. One day, in a moment of desperation, he pilfered Adderall from the purse of a dental assistant.

Noah's partner, Edward, began having concerns as well. Edward hired Noah because he was a conscientious dentist and a meticulous technician. Years of experience convinced him that Noah would have an easy manner with his patients, putting them at ease. Recently however, Edward noted that Noah's performance in each of these areas had deteriorated. He attempted to write it off to the stress of a busy practice and young children at home. This conclusion was about to be shattered.

Late one afternoon Edward received a call a good friend in town, the local pharmacist. He told the senior partner that Noah had been filling an inordinate number of prescriptions for his wife Jeanne. Each of the prescriptions was for 60 tablets of 10 mg hydrocodone. Edward attempted faint excuses for the prescriptions. The pharmacist sighed and closed the conversation by letting Edward know that he had reported his concerns to the dental regulatory college. In a clipped voice, Edward affirmed he would "get to the bottom of this." Later that day when Noah was finishing up his paperwork, his senior partner walked in and said, "We need to talk."

Edward began by acknowledging Noah's skills and his past rapport with patients. He told Noah about his increasing concern about his behaviour. Noah attempted to jump in and Edward firmly raised his outstretched hand: *Stop*. Edward described his conversation with the pharmacist. Once again, Noah attempted to interject with a thin string of excuses and again, Edward gestured for him to stop. Noah's response was at times heated and other times supplicating. The conversation came to a halt when Edward stated, "The pharmacist has already called the College." As they both stood up to leave, the senior partner put his hand on Noah's shoulder and softly said, "Go home and talk with your wife."

Noah dragged himself home carrying his body into the kitchen. Edward had called Jeanne while Noah was driving home. They sat at the kitchen table. For the first time in years, Noah cried as he told her about his years of deceit. Although she was shocked, in some strange way, Jeanne saw things falling into place and felt hopeful. They put the children to bed and, for the first time in many years, held each other close through the night.

The next morning, Jeanne sat with Noah while he called the College. A College staff person appeared on the line immediately. He admitted to writing the hydrocodone prescriptions for his own use. He was surprised to hear the staff person ask if he was selling hydrocodone. They explained that an investigation would likely commence. Yes, he needed to do something about his problem immediately. No, they could not assure him that he would not have licence issues.

They both were chagrined when they learned that Noah had to travel to a treatment program near Toronto that specialized in the care of health care professionals. The initial part of treatment would last several months. Noah tried to find every pill he had hidden about the house. Fearing withdrawal, Noah called the treatment centre for advice. The centre instructed Jeanne to dole out a few pills on a regimented schedule until he arrived in the centre. The next morning, Noah kissed his wife and daughter goodbye and left for addiction treatment. Their toddler, Julie, sensing something was wrong, held onto his coat as he tried to pull away.

Stay tuned for installment five, where Noah and Jeanne's life makes a sharp turn in a different direction.

CDRAF AND CDA JOINT PROJECT

The development and distribution of this article is a joint project with the Canadian Dental Regulatory Authorities Federation (CDRAF) and the Canadian Dental Association (CDA). The goal of the project is to raise awareness of dentists in Canada about addiction disease and the opportunities for treatment and recovery. Dr. Earley was a keynote speaker at the national symposium collaboratively organized by CDRAF and CDA held in Toronto in October 2011 to profile addiction for the organizations' leadership.

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Dr. Earley has been an Addiction Medicine Physician for more than 25 years. Over his career, he has treated all types of addictive disorders and specializes in the assessment and treatment of health care professionals. As a therapist, he works with patients already in recovery, providing long-term therapy for those who suffer from this disease. His professional expertise extends to advocacy for professionals before agencies and licensing boards.

Dr. Earley is the Medical Director of the Georgia Professionals Health Program, Inc., the Physicians Health Program for the state of Georgia in the United States. He is also a consultant to numerous treatment agencies regarding treatment effectiveness and staff development.

Dr. Earley speaks nationally and internationally on topics of addiction, its treatment and addiction among health care professionals. He is the author of numerous books and articles on addiction and its treatment, including *The Cocaine Recovery Book*. He is one of the authors of the American Society of Addiction Medicine (ASAM) Textbook: *Principles of Addiction Medicine*, including the chapter, "Physician Health Programs and Addiction among Physicians." His work was featured in the documentary series on addiction entitled *Close to Home* by Bill Moyers. He has championed recovery in two appearances on the Oprah Winfrey show. Dr. Earley is a Fellow of ASAM and has been on the board of ASAM for over 10 years in several capacities. He has also served as the Medical Director of two nationally acclaimed addiction programs specializing in the care of addicted health care professionals.