



Emotional Health and the Dentist

SIX IN A SERIES OF SIX ARTICLES

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

In the previous five articles, we discussed the importance of emotional health for all of us in the medical community. As a group, medical professionals set aside our needs during our training and careers, focusing on the health of our patients. We introduced you to Noah Marshall, a fictional, bright, energetic dentist early in his career. Noah started using hydrocodone after an injury. He discovered the drug gave him a peaceful energy. Over years, he slowly increased his abuse of hydrocodone. His wife, Jeanne, discovered the pills and confronted him. This, unfortunately, went nowhere. It was not until a pharmacist informed the regulatory college about his prescribing habits that Noah wound up in treatment. In treatment, Noah was initially reluctant and dismissive. Slowly his thinking and mood improved. He learned that addiction is a primary disease and an occupational hazard in dentists.

In two days, Noah would be returning going home from many weeks in treatment. When he first arrived, it seemed like treatment would never end. Now that he was near its completion, he was experiencing an odd sensation, almost wishing it would not end so soon. At first, he thought this notion absurd, but why shouldn't he feel this way? He started running again. He had time to think about his life and reestablish what was important to him. He had developed a strange new set of friends—closer than any he had back home, with the exception of his wife. And most importantly, the hydrocodone had stopped tugging at him, the seemingly inescapable cravings had decreased to almost nothing. Oddly enough, he was set free.

Noah said his goodbyes to his fellow patients and the centre's staff. When riding to the airport, his mind wandered back to his home life. Would Edward, his practice partner, accept him back? What would his patients say? Would Jeanne ever forgive him? Would the College allow him to return to work? These questions accompanied him on his taxi ride, through the airport and onto the plane.

Jeanne and his two children met him at the airport. The children climbed all over him as he re-experienced the wonder of parenthood. Jeanne was happy, but more reserved. On the ride home, Noah talked incessantly about his odd journey through addiction treatment.

Jeanne and Noah fell into a comfortable routine. Noah called his sponsor immediately and they started attending 12-Step meetings together. Noah's sponsor pushed him to continue written assignments. Noah gathered pen and paper and began work on his steps. He met with Edward, his dental practice partner, to review his continuing care plan. Noah tried to assure Edward, saying, "The plan will keep both you and me safe." Edward was skeptical, wanting to believe he would not be betrayed, but remained uneasy nonetheless.

Jeanne was skeptical too. She tried and failed to keep her distrust to herself. When they arrived in their first couple's therapy session, the therapist surprised them both when she said, "Voice your disbelief and fears directly, Jeanne. If you hold them inside, you will never reconnect with Noah." This led to a torrent of feelings from Jeanne. Her betrayal, her worries Noah would wind up in jail and she and the children would be hopeless, and her fears for his life. Noah tried to talk Jeanne out of her fears, but the therapist interceded. "Just listen to her. These thoughts are what any loving spouse would experience." Needless to say, the first session opened up the floodgates on the next phase of Noah and Jeanne's journey of rebuilding their relationship. They continued in couple's therapy for quite some time, building a new foundation on the ashes of Noah's past lies and Jeanne's uncertainty for the future.

As if this was not enough, after three weeks Noah was informed that he had an interview with the College. He travelled there by car, palms sweaty and heart racing continuously on the drive to the city. He felt a sinking feeling similar to the sensations he experienced when his partner confronted him about his illegal prescriptions and drug use. Walking into the room, he remembered his treatment centre counsellor's advice: "Tell the truth, don't try to dress your addiction up or hide your past. Talk about your recovery with conviction and just a tinge of pride."

"Well Dr. Marshall, we have some concerns to discuss with you," the committee chairman began. "I assume you would like me to tell you about my addiction," Noah replied. "Yes, and anything else you think is important to help us make our decision about your future in dentistry and whether it is safe for you to practice."

With this ominous opening, Noah described in detail how he started taking hydrocodone for an appropriate orthopedic injury. After several gulps from the water glass in front of him, he went on to describe in detail the deceptive, dishonest and illegal behaviours he eventually fell into to feed his addiction disorder. He became tearful, he now understood that he jeopardized his patients and the practice of dentistry by his behaviour. This moment in the interview proved to be a deeper and darker hole of despair than he had ever imagined. He paused for a bit. The room was silent. Finally, remembering the coaching he heard in treatment, he stated, "Although I am not proud of my behaviours while addicted, I learned about the seriousness of my illness. I was serious about getting better while in primary treatment and am committed to adhere to the proven treatment continuing care plan I signed before discharge."

The committee reviewed a copy of the plan they obtained from the treatment centre. They asked him about his sponsor, meetings, therapy, marriage and his partner's understanding of his illness. Then the committee asked him to leave so they could deliberate. Noah walked out, drained and nervous of the outcome. After 20 minutes, they asked him back in. The committee told Noah that, following recommendations from his treatment providers, he would be able to return to his dental practice, but that his continued licensure was based upon support from his sponsor and his practice partner, Edward, as well as monitoring by the College.

Noah mumbled "thank you" several times and turned to go. When he reached the door of the conference room, he turned around and said, "I will not let you down. I am serious about my recovery. I know if I relapse, I make it harder for the next man or woman who you see with addiction and I do not take that lightly."

A few days later, Noah and Edward received official paperwork for them to sign that would allow Noah to return to work. At the recommendation of his treatment providers, Noah started back to practice slowly. His first several days in the office were best described as surreal. The staff in the office were happy to see him. Edward was relieved, as he had been working extra hard maintaining the practice while Noah was away. On his second day back, as he walked into the treatment room the patient in the chair said, "Haven't seen you for a while," and asked, "Have you been away?" Noah attempted a non-committal confirmation, to which the patient said, "I know you don't want to tell me doc, but I bet you were on one of those exotic fishing trips. That's where I would have gone!"

The months passed as Jeanne and Noah mended their broken relationship. The children grew up quickly. The practice thrived and Noah never took for granted that he had been given the privilege to practise dentistry again. Noah settled into a rhythm of 12-Step meeting attendance, meeting with his sponsor and going off to provide drug screens when called. The counsellor was right; all of the tasks of recovery become easier in time.

A year or so after returning, Noah went to the treatment room to see a new patient. There in the chair was the pharmacist who had called the College about him 16 months earlier. Noah hesitated as he walked into the room. Uncertain, he introduced himself to his new patient. The pharmacist explained his dental crisis, obviously in pain. Noah hesitated. He said "You do know who I am don't you?" to which the pharmacist replied "Yes, you are the best darn dentist, I know. Now fix my teeth!"

Note from the author: Thank you for taking the time to read this series. Although Noah is fictional, he is a composite of the hundreds of health care professionals I have evaluated or treated over my 29-year career. Remember, addiction is a common, chronic disease that afflicts 10 per cent of human beings in their lifetime. It is a common occupational hazard among dental professionals. Addiction is treatable and the prognosis for a sustained recovery is extremely good for medical personnel. More information is available at www.paulearley.net.

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 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.