

It is that time of year again.

Most of us will be making plans to spend time with friends and family. The holidays have a way of reuniting us in celebration. As I write this introduction, I am cognizant of the Alabama lawyer who took his life last week and the other Alabama lawyer who, the week before, died as a direct result of his addiction to alcohol. This holiday season these two families will be experiencing their first holidays without their loved ones.

Each year, prior to attending our National Conference on Lawyer Assistance Programs, I am asked to fill out a program update. This update inquires about program achievements, goals and activities for the year. The one question I dread answering every year is the question regarding program setbacks or disappointments. I have answered this question consistently for 12 years in the same identical manner. The primary setback in Alabama is that we still have lawyers and judges who died needlessly from an addiction or other mental health related disorder. These illnesses are treatable and hundreds of Alabama lawyers have who have received assistance through ALAP are active members of their families and successfully practicing law today.

Education is the best form of prevention. Unfortunately, ignorance about these illnesses is still prevalent amongst the most educated.

Stigma prevents those in need of help from seeking help and those who see it, from exposing it; and as the disease is permitted to progress the probability of recovery decreases. Let's make 2010 the year in which no Alabama lawyer has to lose his/her life needlessly to one of these illnesses. If you or somebody you care about is struggling, I encourage you to call ALAP for **confidential** assistance or visit our Web site for additional information at www.alabar.org under the Lawyer Assistance Program.

—Jeanne Marie Leslie RN, M.Ed. MLAP, Alabama Lawyer Assistance Program Director

(ALAP and the Lawyers Helping Lawyers Committee of the Alabama State Bar wish you and your families a blessed holiday season. Please remember our loved ones are on the road so don't drink and drive.)



A Trip Through Depression

By an Alabama lawyer

I hope this description of my trip through depression will help someone else recognize he or she has a problem and seek help before it reaches a crisis.

In school, I succeeded without trying, graduating in the top 10 percent of my high school class and, after a sojourn in the “real” world where I received promotion after promotion, with a 3.9 undergraduate GPA and in the top 10 percent of my law school class. In law school, I also made it to the final round of its voluntary moot court competition and was elected head of the moot court board. At the large law firm in a mid-size Southern city with which I started practicing, I worked on large complicated matters, was known for a keen insight on legal issues and for meeting deadlines, became a partner and was elected to its executive committee. I lived in an expensive house,

owned a beach house and had a wonderful daughter.

But, after 20 years of practice, I could no longer focus on work and began missing deadlines. I knew something was wrong but had no idea what it was. I even thought I might have a brain tumor. Luckily, one of my partners suggested I see a psychologist.

A personality profile test revealed that I was depressed, anxious, not thinking rationally and suffering from several other psychological impairments (all brought on by the depression). The clinching symptom was suicidal ideation—knowing how I would commit suicide if I was going to do it. In fact, although I was never tempted to attempt suicide, I looked for the opportunity every day. Even though the personality profile indicated I was not open to

psychoanalysis, I knew I had to have help and gave it a chance. I also started depression medication.

Within two months I felt an emotion for the first time in at least two years, and as perverse as it may sound, I was happy a few weeks later when I had a slight downturn in mood because it made me realize that I was feeling enough better to have a downturn.

However, all still was not well. The anxiety caused me not to be able to sleep or eat—I had lost 15 pounds in six weeks. My initial medication contributed to those symptoms. Because I needed more medication, my psychiatrist added another one that had side effects of drowsiness and increased appetite. My psychiatrist also recognized that, in addition to depression and anxiety, I had attention deficit disorder and began medicating me for it.

During therapy, I recognized that my professional life was contributing to my depression and anxiety so I told my partners about my condition and turned in my resignation. To protect the firm, I suggested that it begin an immediate review of my files and that a partner or partners be assigned to monitor my work until I left. The firm agreed and we began the process of a friendly separation (for which I will forever be grateful to my former partners). During that process, I introduced my partners to each of my clients so that the clients would have a smooth transition regardless of what happened with my future as a lawyer.

Within three or four months, I could tell that the medicine and psychoanalysis were having a long-term effect but I was far from “cured.” Further improvement required “tinkering” with my medication numerous times. Each “tinkering” ran the risk that I would slide backward instead of moving forward. Throughout this entire period, I was receiving psychotherapeutic counseling—weekly at first, then bi-weekly, then monthly and finally every six weeks. Even today, I return every six months for a “check-up.”

Finally, about two years after I started treatment, I had recovered to the point of starting to reduce my medication—but even then; I had not reached maximum recovery. One evening at about the three-year point, I sat down to work on a brief and did not get up until the brief was finished, six or eight hours later—I could finally concentrate the way I had early in my career. However, I also had realized that I needed periodic breaks to protect my emotional and mental states.

Finally, six years into my treatment, I reached the best emotional state I had ever experienced in my life. I am happier than I have ever been, I again enjoy practicing law and am again good at it, I handle people better than I ever have, I have more business than I ever would have had if I had stayed with the large firm with which I practiced for over 20 years, and most of my former clients are still or again my clients.

What did I learn as a result of this process?

1. Without realizing it, I had been clinically depressed at least four times in my life—once as a teenager, once when my first marriage disintegrated, once when my father died and the extended period just before I sought treatment.
2. If you know how you would commit suicide, you are severely depressed and need treatment even if you are never tempted to commit suicide.

3. Depression and anxiety often go hand in hand, and there are medications that treat them both at the same time. Frequent headaches at work or while thinking about work, your scalp feeling like it is crawling around on your head, knots in your stomach, or mental paralysis are among the symptoms of anxiety.
4. Depression and addictions such as alcohol or drug addiction frequently go hand in hand and many people with depression end up in jail. I was lucky enough not to have those problems.
5. Treatment works—if you are depressed, you will likely need both medication and psychotherapy. Many people with single-episode depression can discontinue medication once the depressive episode is over but people with multiple episodes of depression will likely have to continue medication all their lives.
6. Although treatment works, it takes a long time—don’t get discouraged.
7. Once you are comfortable doing so, don’t be afraid to talk about your depression (at the same time, I don’t advertise that I suffered from depression). If you convey that you are comfortable with yourself despite a depressive history, you have nothing to fear. Others will likely be impressed with your recovery, you will likely make some others realize that they do not have to be ashamed of a depressive history and you may make someone else recognize he or she needs treatment. You also will be surprised at how many others have suffered from depression.
8. To recover, I had to become comfortable with myself. For me, that meant I had to learn what was important to me, not what I thought was necessary to impress others. I reached that point when I realized that I could be satisfied living in the worst house I had ever lived in as long as I was comfortable with myself. To get there, I had to give up a law practice that most lawyers would envy; leave a marriage to a wonderful woman who supported me throughout my depression but who is not the right person for me to be married to; face my partners, friends and family and tell them I had a depression problem; learn to take a couple of 10- to 15-minute breaks a day from work; realize that it is better to hire someone else to do many things I could but should not do, such as work on our computers, and to give up control of my mail, desk, to some extent my calendar and some of the work I bring in (giving up control probably was the hardest thing for me to do) to other people I work with; and surround myself with co-workers whom I enjoy being with.

My life is not, and will not be, perfect all the time. But I have learned to accept myself. That allows me to successfully deal with many problems that at one time could have sent me spiraling downward. To get there, it took three years of therapy and six years of tinkering with my medication—but it was worth it. If I had started earlier, it would have taken less time. To stay where I am will take continued medication and the continual application of the coping mechanisms I learned. However, without the major depression I suffered, I never would have felt as good as I now feel. Hopefully, this description of my experiences will help someone else avoid experiencing the depth of depression I experienced. 