

Thursday Memo – March 17, 2016

Scars - By Martha Duffy

I hesitate to start because where do I go?

Physical scars like the one on my former professional fighter's forehead (who is now on daily methadone) is a constant source of concern for him. To me it seems barely visible. Mental scars, like my cognitively-delayed middle aged woman, take the form of not being able to use her inhaler correctly no matter how many times I demonstrate it for her. Worst of all and hardest to deal with are the emotional scars. My 25-year-old female patient who has such bad PTSD and now anxiety and depression that every time I see her (on a monthly basis) she is in real crisis. I can't manage her physical health issues because her emotional scars are preventing that.

I am reminded of Saki Santorelli who urges us to touch the place that hurts. This is what we doctors do, of course. Oh, you have abdominal pain. Let me push on it, harder and harder until I cause you pain. Physical pain is easy in this sense. Emotional pain is walled off, tamped down, to protect the patient. How do we get through this scar?

Sometimes opening the scar can make it worse; for example, a recent patient who I met for the first time, and then had to immediately send him to emergency mental health. I took away his rights as a person - now he doesn't trust me. He opened his scar for me, and the prompt medicalized action that ensued was ultimately not helpful.

Emotional scars are the hardest, require the most patience, and perhaps the least amount of "medicine".

Doctors must step away from their "medicine", sometimes a crutch, and sit with another human being in this fire, opening this scar, until it can heal properly once and for all.