

## Give It to Me Here, Doc.

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### Monday

YT, a patient whom I have been successfully treating for depression for over a year now, brings in her 15-year-old daughter today. Over the past 2 years, what was a close relationship has deteriorated into frequent yelling matches, blatant lying, and running away from home for a day or two at a time. The daughter's friends have all changed, and her grades have fallen from the summit of the honor roll to the valley of despair—she has failed the 10th grade. This discord reached a crescendo last week. Skipping final exams, she reportedly went with “some boys” to an unsupervised house where she drank heavily (emergency room blood alcohol level of 2.1). She also found herself to be disrobed without explanation. The police are involved.

Whew. The tension in that exam room was thick, to say the least. This family was certainly in need of intensive therapy. Where do you begin in a situation like this? I started by getting the daughter to admit there was a problem (she carries a lot of denial) and to agree to a family meeting with an adolescent psychiatrist. The story of tennis star Jennifer Capriati's recovery from drugs and self-destructive behavior seemed to resonate with them. A little. Maybe they can use it as inspiration.

### Tuesday

RB is a 42-year-old man who presented 2 weeks ago with the dreaded complaint of “I just don't feel good.” This sheet metal fabricator was ashen and pudgy with flat affect. The review of systems had a rather long list of positives, the most notable of which included anhedonia, fatigue, and vague paresthesias. These symptoms have been worsening over 9 months—corresponding about to the time when his daughter and 10-year-old ADHD granddaughter moved into his home—temporarily, of course. We elected to start bupropion while we checked some lab work. In follow-up today, he was feeling a little better, but perked up considerably when I informed him that his serum testosterone was significantly low. He had his belt unbuckled in preparation for a shot before I could finish my sentence recommending replacement. I'm always glad to see patients eager to comply with my recommendations, but this was ridiculous.

### Wednesday

After the emotional drain of the last couple of days, it was sort of a relief to have a day punctuated by straightforward illnesses like acute myocardial infarction or chronic appendiceal abscess. While fulfilling, treating mental health issues can be very draining as well.

### Thursday

JC is a 34-year-old who was a new patient to my practice last week who presented with fairly straightforward symptoms of depression characterized by progressive fatigue. At that point she began therapy with fluoxetine.

What I thought was a little strange was that while her depressive symptoms were relatively stable, the extent of her fatigue was notably marked with severe exacerbations. Screening lab work revealed very elevated transaminases, which was followed by a positive screening for hepatitis B.

I broke that to her today. She responded by saying that a week ago she probably wouldn't have been able to handle that news. She is going to continue the medication as she follows up with a hepatologist next week. Sometimes timing can be everything. Even if it's by accident.

**Friday**

FG is a 35-year-old woman who had been doing quite well on a regimen of paroxetine to control anxiety and mild depression. These symptoms had become particularly worse around menses. She came today quite concerned because over the last 2 months she had noted a paroxysmal flare of symptoms. We talked for a while, and on review, found that her menses were uncharacteristically irregular over the same time period—as have been the menses of 2 coworkers in her small office. What's new in the office over the last few months? A new woman in their space! We discussed the effects of the pheromones from the new woman in the office and how that relates to “sorority syndrome,” causing the disruption to her cycle and, thus, possibly to her mood. From the look on her face, I get the feeling that she thinks I made all of that up. We'll see how she is in a month or so. . . .

*Editor's note:* Dr. Wolff is a board-certified family physician in private practice in Cornelius, North Carolina. He finished his family practice residency in 1997. He has graciously consented to share stories from the trenches of primary care. While his practice diary is taken from actual patient encounters, the reader should be aware that some medication references may represent off-label uses. We at the *Companion* are certain that these vignettes will inform, entertain, challenge, and stimulate our readers in their effort to address behavioral issues in the everyday practice of medicine.