

## 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.

## What Hands!

Christian G. Wolff, M.D.

### Monday

GT is a 32-year-old woman who recently had a hysterectomy to treat symptoms of endometriosis. I saw her first about 3 months ago, after she moved to the area from California. At the time, I was a little suspicious of her because she came to her first visit asking for narcotics. I did manage to get her a gynecological appointment, though, and am delighted to see that her belly pain has resolved since her surgery. Yet, she is still tearful. Turns out, she was concurrently diagnosed with heart failure due to a viral cardiomyopathy and is now on the heart transplant list. This unbelievable turn of events was confirmed with a quick review of her medical records via our internet connection with the hospital. Yikes, I guess the alprazolam will remain on the menu for a little while longer.

### Tuesday

FD is the mother of a 20-year-old whom I had diagnosed with bipolar disorder after she recounted to me a 4-year history of poor response and irritability when treated with antidepressants. She made a point of coming to the office today to thank me for “giving her child back” after we initiated therapy with an atypical antipsychotic. She described the last 4 years as the “emotional rollercoaster from hell” and was “glad it was over.” That thank you was a nice gesture! I told her, though, that her ride was far from over, but I would do my best to help keep that ride smooth.

### Wednesday

On call this evening, I received a phone call from a familiar patient to our practice. DR is a 50-ish woman who has spent a few visits at our state psychiatric hospital and is horribly noncompliant with treatment. It's not unusual to get incoherent calls from her during her manic spells in which she asks for the benzodiazepine du jour. Today though, she tells me that one of my partners has convinced her to use aripiprazole. She is amazed at how good it makes her feel, she tells me, but is concerned regarding involuntary mouth movements. Dang! You get a breakthrough with a problem patient only to hit a pothole!

### Thursday

LL is a 20-year-old woman who has come in to the office 7 times in the last 9 months with vague vaginal complaints. Today, her complaint referred to a scant discharge. Reluctantly, I agreed to perform a pelvic exam. I never thought I'd be delighted to identify trichomoniasis, but heck, there I was! I hope I did a good job concealing my happiness to finally identify a sexually transmitted disease for her. While it doesn't change the fact that there may still be some insidious underlying issue such as childhood abuse to explain her introital preoccupation, at least this time there is a clear-cut way to make her feel better. At least for a short while.

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## DIARY FROM THE FRONT LINES

### Friday

Well, the week is capped by a zinger of a vignette. HG is a 40-year-old woman who suffers from fibromyalgia. She also has had an odd, flat affect, which has been difficult for me to assess. Well, today, while at her chiropractor, she was a little alarmed when she found she could telepathically communicate with the gentleman. Her consternation (and mine) grew after she began experiencing unimaginable orgasmic events with each manipulation he performed. Hmm. I searched for an appropriate clinical response to this statement, and all I could come up with was, "Holy cow, that's troubling." Fortunately, her insight was good enough for her to agree. By divine intervention, a call to the local psychiatrist revealed an appointment available *that afternoon* due to a cancellation. I still can't help but wonder: was that appointment available just because I had a darn good story?