

# The Black Dog

*How to resume a productive life after clinical depression.*

BY TED WEISS

**AT A LUNCHEON MEETING IN FEBRUARY 2005, I LISTENED TO THE FORMER CEO OF A MAJOR PUBLIC COMPANY IN HOUSTON TELL THE STORY OF HIS STRUGGLE WITH CLINICAL DEPRESSION AS A WAY OF EDUCATING PEOPLE ABOUT THE SUBJECT.** Motivated by this experience, I resolved that after 32 years living with the shame and guilt of having “mental illness,” I was “going public” with my story. The impetus for this decision was twofold: (1) to help others who were dealing with some of the same symptoms I had experienced over the years, and (2) to fight the prejudice and ignorance that result in discrimination against those who feel a stigma because they are dealing with either clinical depression or bipolar disorder.

In December 1973, 28 years old and three years into my practice at a large Houston law firm, I experienced my first episode of severe clinical depression. Over a period

of weeks, my emotional state kept sinking. Unable to understand what was happening, I eventually found myself in total despair and contemplating suicide. The person I had become was completely different from the one I knew in my life before this episode. I was hospitalized until the psychiatrist finally found an antidepressant that lifted the fog and brought me out of the dark emotional hole that Winston Churchill called the “black dog.” After several months of recuperation, the doctor took me off medication, and I returned to the activities I had been pursuing before the incident happened.

Because of my prejudice and stubbornness, I refused psychotherapy, which I later learned was an essential element in my journey to recovery. After two more episodes of severe clinical depression—and 13 years after my first experience—I began more than seven years of intense psychotherapy that may well have saved my life. This hard work led to the realization that the causes of my disease were psychological triggers that initiated biochemical dysfunction in the brain. While much progress has been made in the last several decades, medical science still has more questions than answers when it comes to a full understanding of these psychiatric illnesses. As one knowledgeable psychiatrist has said: “The human brain is not only the most complicated thing in medicine; it is the most complicated thing in the world.”

Shortly after the luncheon in early 2005, I learned about an organization called Depression and Bipolar Support Alliance, which provides free weekly support groups for people dealing with clinical depression or bipolar disorder. Serving as the volunteer facilitator for one of these groups over the past eight years has been a life-changing experience. Also in 2005, I became aware of the State Bar of Texas Lawyers’ Assistance Program (TLAP), which helps lawyers dealing with substance abuse or mental health problems. My participation in the activities of this organization has been enriching and therapeutic. Under the



umbrella of TLAP, a friend and I launched the Houston Lawyers Forum on Depression and Wellness, a group for lawyers who are facing mental health challenges, which sponsors monthly meetings with outstanding speakers from the Houston mental health community.

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Dealing with clinical depression or bipolar disorder can present serious ethical issues for a solo practitioner. When I experienced my episodes of severe depression, I was fortunate to be working in law firms where other lawyers handled my work until I was able to return. Lawyers practicing solo, however, may be reluctant to disclose a mental health problem to their clients for fear that they will not understand and will decide to take their case to another attorney. Avoiding the issue by keeping a mental disorder secret, however, can cause a lawyer to fail to represent a client's interests properly, which in turn can result in a grievance proceeding and even disbarment. Thus, it is critical for a solo practitioner to arrange in advance for another lawyer to handle his practice if a mental health problem is preventing him from performing his professional duties. In discussing the situation with clients, the lawyer can simply state that he needs some time off to deal with a medical problem and that the other attorney will be handling his cases until he returns.

My experience is that the level of prejudice people, including lawyers, have toward mental health problems is directly proportional to their ignorance of the subject. These brain illnesses are comparable to diseases in other organs of the human body, such as the heart, lungs, or kidneys. Moreover, even illnesses of the brain can take many forms, which include Alzheimer's disease, strokes, brain tumors, and Parkinson's disease. The main distinctions among these brain diseases are simply that their symptoms are different. If people will take the time to educate themselves about mental illness, they can avoid the discrimination that makes life more difficult for those who are dealing with mental health problems.

The worst mistake a lawyer can make is to ignore or deny the symptoms of a mental health problem, which can include interference with sleeping and eating patterns, a lack of energy and interest in daily activities, feelings of despondency leading toward despair, and feelings of loneliness and isolation. If these conditions persist, in

addition to getting a thorough physical exam, the attorney should promptly seek medical help from a psychiatrist or psychologist. The treatment for mental disorders can consist of medication, psychotherapy, and a support group, as well as reducing stress, getting adequate rest, maintaining

a healthy diet, and engaging in regular exercise. The good news is that with proper attention, these types of illnesses are treatable and manageable.

TLAP does an outstanding job of helping solo practitioners and other members of the State Bar who are dealing with clinical depression or bipolar disorder. Among other services, TLAP representatives provide recommendations of medical professionals to attorneys who are not familiar with specialists in this field. In addition, TLAP offers attorneys the opportunity to meet with lawyer volunteers who have dealt with mental health problems and can relate to what others are experiencing. A confidential call to TLAP can lead to the help that will enable a lawyer to preserve his practice and resume a productive, fulfilling life. **TBJ**



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