

Announcer:

In this episode of Tim Talk, Dr. Gavin Ducker joins Tim, to share his own struggles with depression and PTSD, in hopes of erasing stigma about mental illness.

Tim Dentry:

Thank you for joining us for this Tim Talk. I'm Tim Dentry, president and CEO of Northern Light Health. This is a very important talk.

Tim Dentry:

The purpose of these podcasts is to provide a platform for guests to express themselves, their views and experiences, as it relates to diversity, equity and inclusion.

Tim Dentry:

It provides a platform for our audience to listen, learn and hopefully become even better people.

Tim Dentry:

The topic today, living with mental illness, is very timely. Mental illness and behavioral health issues have skyrocketed in our country. I would venture to say that everyone listening to this podcast, knows someone or experiences personally, mental health and behavioral health matters. They're deep and they're personal, and we need to talk about it.

Tim Dentry:

In today's episode, I'm joined by a respected colleague and friend, who is sharing his own very personal struggles with depression, to address the false perceptions and societal biases toward those with mental illness.

Tim Dentry:

Dr. Gavin Ducker is the co-president of the Northern Light Medical Group, senior vice president of Northern Light Health and a family physician. Gavin, thank you for joining me here today.

Dr. Gavin Ducker:

Thank you for inviting me, Tim. It's a pleasure to be here.

Tim Dentry:

I know one of the reasons you have chosen to be very public about your own struggles with depression, and I thank you so much for that personally, Gavin, it's because you want to show that depression can affect anyone. Can you share with us how it's affected you?

Dr. Gavin Ducker:

Yes, I can. That introduction is very moving, Tim. I'm just kind of getting my composure back for a moment, because so much of what you said was true.

Dr. Gavin Ducker:

Yeah. My personal story starts when I had my third year of medical school in 1983. In the UK, you go to medical school straight from high school. So, I was only 20 years old. I was single, kind of an immature young man, living in a very high performance environment.

Dr. Gavin Ducker:

I mean, I was studying full-time, big expectations, lots of work to do. In addition, I was playing for the university rugby team, which was another huge commitment, in terms of time and effort. I didn't have a good support network.

Dr. Gavin Ducker:

I'm not blaming anyone for that, but I was very self-focused and doing lots of things, and I didn't really have time for that. I didn't realize what was happening to me.

Dr. Gavin Ducker:

I think the trigger was probably a family crisis. That crisis didn't last very long, but I think that's what triggered it. It took two to three years for me to recover, and I was on my own. I recovered on my own.

Dr. Gavin Ducker:

I didn't realize until I was further into my training and my career, what had happened to me, but I do recall feeling very alone.

Dr. Gavin Ducker:

I'll give you an example of that. At one point, relationship with a girlfriend ended. She was playing for the university football team. That's soccer for you guys. I was playing rugby.

Dr. Gavin Ducker:

I turned up to the training session, after it happened. A couple of my teammates came up, put their hands on my shoulder said, "Oh, I'm sorry to hear about what's happened." Then, immediately lapsed into the training and what we're going to do in the Saturday. That was it.

Dr. Gavin Ducker:

I knew for a fact, that over in the other changing room, she'd been surrounded by teammate, who focused on her and her needs and giving her the support.

Dr. Gavin Ducker:

I give that example because I think women are usually much more mature in these issues. They mature younger, as well. That's kind of an example of what I had to deal with, as I went through this.

Dr. Gavin Ducker:

In terms of recovery, I think one of the things that helped recover was the high, if you like, of graduating from medical school. I'd always wanted to be a physician.

Dr. Gavin Ducker:

My graduation was in some doubt because my performance dropped off as I got sicker, but I was able to overcome that and pull it out at the end and begin my internship and then residency and move on with my life.

Dr. Gavin Ducker:

In terms of prevention, I've always taken care of myself, as playing rugby's training several times a week, eating well. I did stop smoking very soon after I graduated. Took good care of myself that way.

Dr. Gavin Ducker:

The second episode happened in 2003. It was about two years after I moved to the United States. The move was a big upheaval for my family, myself, my kids, particularly. Can't say that there was any specific trigger, but kind of began to drift.

Dr. Gavin Ducker:

Of course, the difference by then was that, I'm more mature, more insight and of course, I was married. My wife was able to sit me down and point out what was going on and what she was seeing.

Dr. Gavin Ducker:

But even then, then I found it very difficult to pick up a phone and call a colleague and tell him that I needed his help, and then move things forward from there.

Dr. Gavin Ducker:

He was great and saw me very quickly and started on treatment. I responded very quickly and I was fully back to normal within six to 12 months.

Dr. Gavin Ducker:

In terms of prevention, a supportive family and wife, and continue to exercise, eating well, taking good care of myself.

Dr. Gavin Ducker:

The third episode of mental illness I suffered was PTSD. I'll kind of tell you the story there as well.

Dr. Gavin Ducker:

One morning, one Saturday morning, I was on call for the hospital. So, I was going into round with my colleagues and the staff, to see how everyone was going.

Dr. Gavin Ducker:

I got up and exercised, as I typically do each morning. And about 15 minutes after I got off the bike, I developed some chest pain. I just had a huge coffee. So, I thought, oh this acid. So, I took up a whole bunch of antacids and it didn't really do anything.

Dr. Gavin Ducker:

I had my shower, and I was putting my tie on. I looked at myself in the mirror and I was white, a little sweaty. Yeah, that's a little bit alarming.

Dr. Gavin Ducker:

So I kind of thought to myself, well, if a patient called me now, what would I tell them? I'd tell them, you need to go to the emergency department and get checked out.

Dr. Gavin Ducker:

So, I went upstairs and in typical kind of male style, I completely understated it to my wife. Oh, I've got a bit of chest pain. It hasn't really responded. I better get myself checked out. "Oh yes, Gavin, of course. Let's get in the car," and we went straight.

Dr. Gavin Ducker:

Halfway to the hospital, the pain went out of control severe. I mean, really so bad I could barely speak. I didn't tell her because she was driving and we were on the way to the hospital anyway.

Dr. Gavin Ducker:

She dropped me off at the front office, the front of the hospital and said, "Go in there, get checked out. I'll be with you in just a second. I'll go and park the car."

Dr. Gavin Ducker:

I walked to the front office. I was really feeling terrible. As it turned out, the receptionist didn't know who I was, which was a good thing, because it was like being a secret shopper.

Dr. Gavin Ducker:

I just said to her, "Look, I feel terrible. I'm having chest pain. I need help now." She did exactly right thing. She said, "Sit down there. We'll be right out," went and got help. Two staff nurses erupted out the EDs. Of course, they knew me, "Dr. Ducker," grabbed hold of me and took me off.

Dr. Gavin Ducker:

I'm taking my shirt off because I need an EKG. Everything happened exactly as it should have done. I was given an aspirin. I had an EKG within two minutes. They're doing everything right. So, I'm feeling pretty reassured.

Dr. Gavin Ducker:

But I'm also thinking, this isn't a cardiac event. So, this is a bit overkill. The EKG read towards me. And as it came off the machine, I suddenly realized, oh my God, this is a heart attack.

Dr. Gavin Ducker:

I became a little bit emotional, as you'd expect. And of course, pandemonium breaks out. Nurses running everywhere and drips going up.

Dr. Gavin Ducker:

Of course, my wife walks into the room. I'm feeling terrible. I can barely speak. She's put into the corner. I remember her grabbing hold of one of the nurses and saying, "Well, what's going on?" "Oh, he's having a heart attack."

Dr. Gavin Ducker:

I could remember her face. I was crestfallen. But anyway, so then I'm thinking, right, okay, so now they're going to put up the TPA. It's the clot buster. It's going to get rid of the clot. It's going to get rid of the pain, and I'll be much better. I'll go to EMMC and they'll sort me out. I'm going to be fine.

Dr. Gavin Ducker:

All the while, they're not able to control this pain. So, up goes the TPA and 10 minutes later, the pain gets worse. At which point I realize, oh my goodness, I'm in real big trouble here. This could actually kill me. So, I'm kind of trying to keep myself together.

Dr. Gavin Ducker:

They're still unable to control the pain. The pain is really out. I can still barely speak.

Dr. Gavin Ducker:

Eventually gave me some dilaudid, which made me a bit high. Didn't really help the pain, but it just made me feel a bit more relaxed. So, I calmed down a bit.

Dr. Gavin Ducker:

They weren't able to fly me to EMMC because of the weather. So, I was put in a back of an ambulance. 10 minutes in to that journey, I thought, yes, I'm not going to make it. Oh my goodness. I'm just focused on trying to take care of myself.

Dr. Gavin Ducker:

10 minutes after that, this was the moment that really kind of put me over the edge. This pain is so bad, that I think I'd rather be dead than put up with this any longer, which was really...

Dr. Gavin Ducker:

I mean, it's very hard for me to talk about that moment. It was a dreadful moment, but I kind of bounced back.

Dr. Gavin Ducker:

I phoned my dad. I phoned Edwina. I phoned a whole bunch of people, and they just kind of kept me going.

Dr. Gavin Ducker:

We got to EMMC and Dr. Alan Wiseman was waiting, literally waiting. He took one look at me, took me straight down to the cath lab. They worked their magic.

Dr. Gavin Ducker:

I remember him saying, "I'm inflating the stent now." And I went from the worst pain I'd ever had in my life, to no pain at all, in like three seconds. It was just such a tremendous relief. It really was amazing.

Dr. Gavin Ducker:

I was home two days later. I had normal heart function the next day. I really completed my rehab, but I had PTSD.

Dr. Gavin Ducker:

I mean, I couldn't sleep. I'd wake up with nightmares. That moment of, I'd rather be dead than be alive, went on and on and on and on.

Dr. Gavin Ducker:

I sought help from psychologists. They've really helped me and got me through it. I was back to work six weeks later.

Dr. Gavin Ducker:

I still have triggers. For instance, talking about it is a big trigger for me, to revisit that moment.

Dr. Gavin Ducker:

The other one is looking into the back of an ambulance. It gives me palpitations. It makes me feel somewhat anxious. I'm back to normal now, but I live with this. I mean, it'll never go away. That's my story.

Tim Dentry:

Thank you for sharing that, Gavin. I just have a parenthetical comment for the listeners actually. And that is, I just wonder as we were all listening to that very personal story... and again, I thank you so much, how much of our listening capabilities...

Tim Dentry:

We got the part about the physical challenge. The heart attack and everything came along with that. I asked the question of the... parenthetical question. Not for you, Gavin, but for our listeners. So, how much do we get the mental health side of things?

Tim Dentry:

We're going to start to talk a little bit more about that right now, with Dr. Ducker. But just, my hope is that one day, we all will be able to talk about mental health experiences and things of that nature, as commonplace as we talk about the physical. So, end of parentheses.

Tim Dentry:

Dr. Ducker, do you have any reservations about coming forward with all of this today?

Dr. Gavin Ducker:

Yes, I did and I do. Indeed, I talked to you very briefly, when you first started this podcast series, that I had a story to share with you. I didn't have the conviction to follow through with you about that, because I was very conflicted.

Dr. Gavin Ducker:

Let's be clear, from the story I just told you, even though I was well supported and clearly understood what was happening, I still had to be persuaded to seek treatment for my second episode of depression.

Dr. Gavin Ducker:

The truth is, that one in four of us will suffer a mental health crisis during our lifetime. One in two of us will suffer some degree of mental illness.

Dr. Gavin Ducker:

As a family physician, about a quarter of all my interactions have some degree of mental illness, as part of the problems that I'm health helping my patients to deal with.

Dr. Gavin Ducker:

So this is a common problem, and yet it's a hidden problem. I've treated many patients over the years, and my patients have been the same. They felt reluctant and ashamed and wanted to hide it and have struggled, often struggled, as I did to accept the diagnosis and treatment.

Dr. Gavin Ducker:

I was inspired, since I returned to work after my heart attack, by two patients. One had been treated for anxiety for over 10 years and really was no better off. I persuaded her that there was a misdiagnosis and that we needed expert help and a change in treatment.

Dr. Gavin Ducker:

She responded almost immediately. But the barrier for her was, that despite the fact she felt better, she was very conflicted about the diagnosis. She was much more comfortable with being diagnosed with anxiety because everyone knows what that is. Lots of people have anxiety and that's okay.

Dr. Gavin Ducker:

But to have what she had, in some sense, is a step she didn't want to take. She was very conflicted because she was feeling so much better with treatment for the diagnosis that she did have. But she kind of didn't want to take the treatment because of the stigma of the diagnosis. She and I worked together for many months, on that.

Dr. Gavin Ducker:

I reflected on the 10 years of misdiagnosis and misery, she put up with. That's what she and I kind of reflected on.

Dr. Gavin Ducker:

The other patient had a family who refused to accept the whole concept of mental illness. So, that was a very difficult conversation to have with her, but she literally had to change her views, in order to accept help and get better. Which she did do, but all the while, she had to hide the diagnosis and the treatment from her family. It's a big conflict for her.

Dr. Gavin Ducker:

I realized that, if we are ashamed and judge ourselves, then we are perpetuating the biases, judgements and discriminations and allowing it to continue happening to others.

Dr. Gavin Ducker:

When I did that, I realized I was an active participant in the biases towards something that I myself had suffered from. It feels hypocritical. It's that which has driven me to step forward and work with you today.

Dr. Gavin Ducker:

We worry that with a mental health diagnosis, that maybe there is something wrong with the person. We scrutinize and judge their behavior. It's like we think the person is defective and they're not sick.

Dr. Gavin Ducker:

We don't think like that about physical illness. If a person has a skin disease or a heart disease, we don't judge that somehow they're defective as a person. We empathize and we try to help them.

Dr. Gavin Ducker:

The truth is that, we all have behaviors and we don't always behave well all the time. But most of the time, when we behave badly, we're not mentally ill.

Tim Dentry:

Thank you so much. Very profound words. I hope my listeners really re-listen to, especially the segment you just shared, the whole podcast, actually.

Tim Dentry:

What can our listeners do or say, to help someone experiencing depression? How can we show support or at least not stereotype the individual?

Dr. Gavin Ducker:

That's a great question. It does require some self-reflection. As I've said earlier, I, myself struggled to accept what was wrong. So, I was uncomfortable with support, at first. The same happened to those patients that I was telling you about.

Dr. Gavin Ducker:

Once I accepted my diagnosis, support became much easier to accept.

Dr. Gavin Ducker:

Given our societal biases and worries about mental illness, disclosing mental illness to another person is hard, which is why it's been a challenge for me to come forward today.

Dr. Gavin Ducker:

So, if we can't be forthcoming with our mental illness, we're destined not to be well supported. It becomes a self-fulfilling prophecy, that I'm on my own. I'm feeling terrible. I can't tell anyone. So, you feel more terrible.



Dr. Gavin Ducker:

On the whole, the truth is, that we all respond sympathetically to an individual who becomes sick for any reason. That's kind of human nature. That's what we do.

Dr. Gavin Ducker:

Yeah, we're in the caring industry. That is what we do. And it's really beneficial if we do the same with someone with mental illness, but we have to know that they're suffering with it, in order to be able to be supportive.

Dr. Gavin Ducker:

That's what I'm saying. There's this cycle. If I don't tell you what's wrong, how can you possibly support me through it?

Dr. Gavin Ducker:

Many individuals with chronic illness will tell you that, after the initial disclosure and response, it's often the case that the phone calls and offers of sympathy and help peter out. Because people struggle to know what to say or do, especially if someone doesn't have a curable illness.

Dr. Gavin Ducker:

If that's the case with physical illness, it's absolutely even worse for those with mental illness, for the reasons I've just said.

Dr. Gavin Ducker:

So, we all need to do a better job of it as a society. We need to understand that this exists, it's very common. It's an illness, like any other.

Dr. Gavin Ducker:

People deserve support. They shouldn't be judged as a person. They may have behaviors that manifest from their illness, but it's an illness. So, we can support and help and treat them and get them through it.

Tim Dentry:

That's terrific, Gavin. I think one of the... I don't know if it's lesson learned yet, in my life, but that I'm trying to be better at, is to be able to talk with people and give them the sense that... without asking a blunt, direct question, give them the sense that it's okay to tell me what you might be struggling with. Let's talk about that.

Tim Dentry:

It doesn't come naturally and easily to a lot of people, but you're absolutely right. Yes, I think part of the onus is on those that are dealing with mental health issues, to not hide it, not put it in a box. To go about living your life, and feel free that you're not going to add to your burden by keeping that in. That's got to be just such a compounding effect, I can imagine.

Tim Dentry:

At the same time, those individuals interact with need to, I think, have greater awareness that someone's behavior, attitude, maybe not as engaged or more engaged or what have you, that there might be something behind that. It's okay to find that out. It's okay to talk about it.

Tim Dentry:

Then you've got dialogue and a connection. Then it's not just sympathy or empathy or whatever. Then it's like, I get it. I get it. I get you better now, Gavin, because you shared this. So, thank you for that.

Tim Dentry:

Gavin, I look at this as a message of hope. So, thank you for this message of help and your courage in sharing your story.

Tim Dentry:

Before we leave, I know you want to leave our audience with a positive message about diagnosis, treatment, recovery, living with.

Dr. Gavin Ducker:

I had two episodes of a disease, depression, that I recovered from. I may have another episode, but I know what to do now. I had one episode that I slowly recovered from and never be entirely free of, which is my PTSD.

Dr. Gavin Ducker:

After recovering from my heart attack and PTSD, I felt a new lease of life. I really did. I was determined to make the most of my second lease of life. Wanted to do something that I really felt would impact people, make a difference.

Dr. Gavin Ducker:

I received the treatment I needed. I've been able to continue my career and have a family life. So, it's possible to recover and be treated and not have these issues interfere with one's life goals.

Dr. Gavin Ducker:

One of the things that I will say to you is that mental illness, like physical illness, there are acute illnesses, where cure is possible.

Dr. Gavin Ducker:

I was lucky. I've had two of those. Pneumonia, appendicitis, those kinds of things have analogous of physical illness.

Dr. Gavin Ducker:

And then there are diseases that you live with. People live with heart disease. They live with liver disease. They live with cancer. They live with these other illnesses. PTSD, for me, is the one that I live with.

Dr. Gavin Ducker:

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It's possible to do that. Many millions of individuals do that, with physical and mental illness. It's possible to do it. It's possible to bounce back, and it's possible to continue to be successful.

Dr. Gavin Ducker:

I really feel that I'm in a good place. I feel vulnerable having these discussions, I really do. A little fearful today, of doing this, but I think it's the right thing to do. I think that there is definitely a message of hope here.

Tim Dentry:

Thank you. I think true strength is in expressing your vulnerability and not trying to cover it up with some false strength.

Dr. Gavin Ducker:

Yes.

Tim Dentry:

So, true strength is being genuine. We're all vulnerable.

Dr. Gavin Ducker:

Right?

Tim Dentry:

Thank you so much, Gavin. Thank you, our podcast listeners, as well. So until next time, I'm Tim Dentry, encouraging you to listen and act, to promote our culture of caring, diversity inclusion. It starts with caring for one another. Thank you.

Announcer:

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Announcer:

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