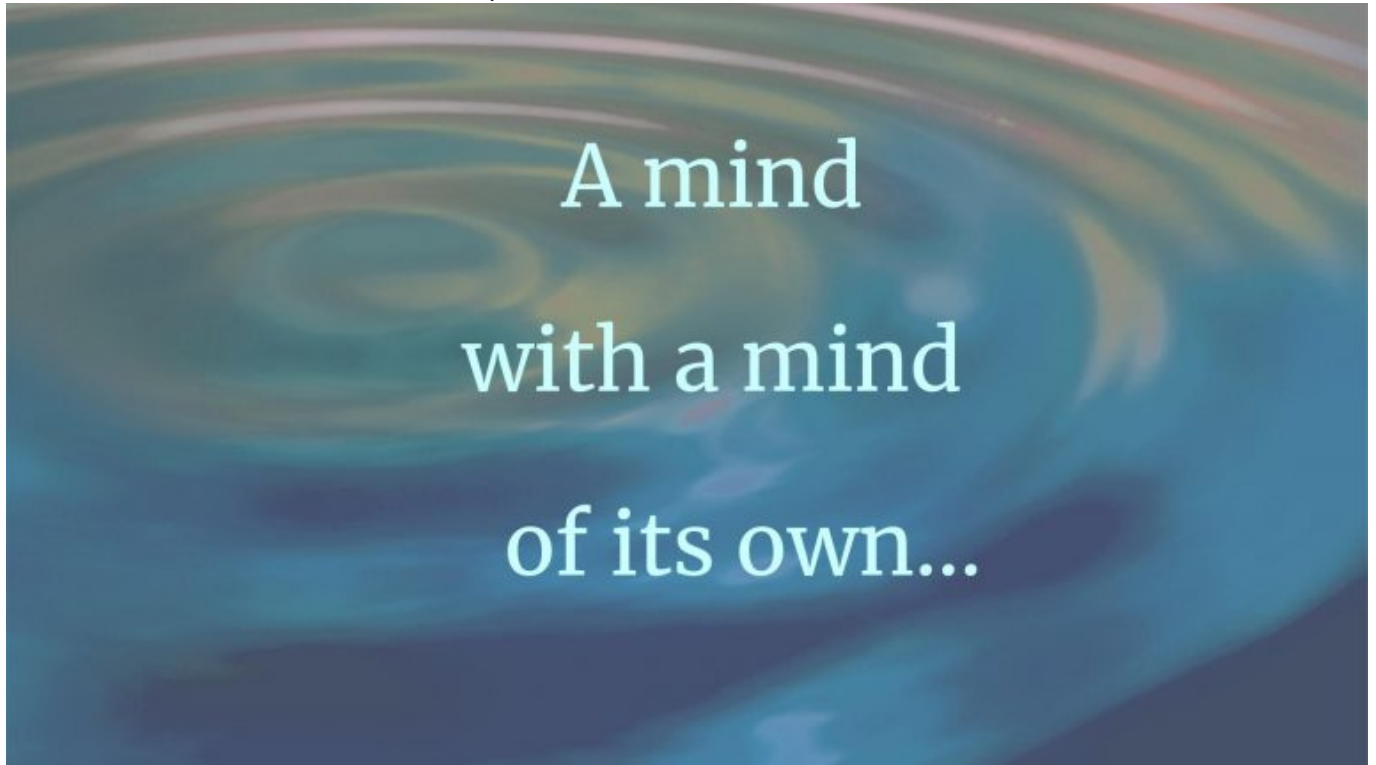


OCD: What It Takes and What It Gives

Category: Stories

written by Carolyn Rennels | July 23, 2021



It started because of the news, or because the heat made me sweat, or because of neurotransmitters. Or my environment. Or nothing at all.

California was in a drought (as now), and in college I started to worry.

Worry is normal, I thought. We should all be worried about climate change.

But it was more than that. Some worry crouches in the corners of the mind and can be pushed aside. This worry enveloped me, heavy and suffocating. When I stepped out into a too-warm January day, my heart raced. The air hurt, and it wasn't even that hot. Some days I closed the blinds so that I couldn't see the blue sky.

I've tried to determine what happened—why the drought became my anxiety's focal point. There are other anxieties—I persevere about many things—but this one lingers. The weather is something I have no control over. Maybe that's why my mind runs straight towards it. I'll never know why. I don't think it really matters.

When you're worried about the weather, there are triggers everywhere. Strangers talking about the nice day. (*What are they talking about? It's too hot, it's not supposed to be this way!*) A drought-related headline on a stranger's newspaper. The sun, the dry streets, the air itself.

I often paused conversations to look at the sky, again and again, because maybe I would see a new cloud; friends and family saw my distraction as a

lack of engagement. I would wake up, check the weather and start hyperventilating.

I found weather blogs and learned about weather models—the data and mathematical equations that meteorologists use in determining their forecasts. There are three models that are updated online three times a day, and I checked them all. I started dating my husband-to-be and worried that he would break up with me.

I went to a therapist and told him that I was worried about the drought. He stared into the middle distance and said softly, “Yeah. Yeah, well, that *is* something to worry about. It’s pretty bad.”

I joke to my friends that the sun is my enemy, and everybody knows I love rain. They just don’t know that when it doesn’t rain, my head buzzes and my heart races. They don’t know that sometimes I think I somehow caused the drought myself (I wasn’t a good partner, good doctor, good person today), that I partly think that if I don’t check the weather, the forecasted rain might not come. They don’t know that on a bad day, I check the weather hundreds of times.

A couple of years ago, I sat on a psychiatrist’s couch and told him about all the checking.

“Sometimes when other people look worried, I think they must be worried about the drought,” I told him. “I feel like I can feel their anxiety, and it’s not that I’m hearing their thoughts, but—”

“You don’t have to keep explaining,” he interrupted. “This is very typical of OCD.”

Now I take medication every day. Things are better, but there are still days when I want to stay inside and shut the blinds.

I frequently refer patients to therapists and psychiatrists for anxiety or depression. I know that medication plus therapy produces better results than either alone, but I haven’t engaged in cognitive-behavioral therapy myself.

Why don’t I take my own advice?

I’ve thought about time—I don’t have much of it. I’ve thought about inertia—when things are going well, maybe they will keep going well (they won’t). I’m afraid that a therapist will validate my fears, as that first one did. I’m really afraid that someone will look at me and wonder what I’m complaining about: *How can this privileged person suffer so much inside a lucky life? She must be kidding.* Maybe I don’t want to accept that I am sick. Finally, and maybe the biggest reason: I’m ashamed that I’m not *resilient*—a word thrown around so much in medicine that providers feel we can’t be open about our struggles, because a good doctor just keeps going.

“Can you please put it down?” My husband and I are watching a TV show—or rather, he’s watching, and I’m staring out the window and then reaching for my phone. There’s going to be a heat wave, and I need to see the latest

forecast. I checked thirty minutes ago, but things change.

"I'm just checking," I tell him. He sighs and looks at me and says, as he's done hundreds of times before, "I really think it would help to talk to someone."

"I know," I tell him. "I'll think about it."

This is my secret as a new doctor, new wife, new dog-mom. And I wish it wasn't there, and it's taught me a lot.

I carry my experiences with me into patient rooms. I am grateful that my job keeps me in the present. Talking to patients stops the mental buzzing, for the most part. When a patient rejects a medication or an intervention, I am aware that they may be refusing help for some of the same reasons that I do.

My hardest moments—when the anxiety takes over—are invisible to strangers, because they happen inside my mind, and because I've become skilled at pretending to be okay.

One of the gifts of being a doctor is being able to walk gently into spaces filled with both visible and invisible suffering, and to offer help and be willing to set aside the urge to "fix" if the help can't be received. And I'm learning to be that good doctor to myself—to be gentle with myself, to forgive myself, to try to talk to myself as I would to a friend or a patient.

I am very weak and I am very strong, and I'm learning to understand both things. And I hope that, in addition to helping me, this may may help me to understand more about my friends and my patients, too.