

# Adjusting to separation

*Separation between a patient and psychiatrist for good can be painful and, at first, seems impossible to accept. In this article a patient describes how the experience affected her.*

'... and wish you the happiness you deserve' ... that was the last I heard from him. I was not to know this at the time, but somehow I felt this to be the very last sentence of the very last letter I was to receive. I could not have wished for a more sympathetic final word; it was a confirmation of what I had sensed all along—he actually wished me well. Though it had never been verbally expressed, I knew he meant it, and now there it was in his own handwriting. It seemed at the time to do me more good than many an hour's treatment. After that I ought to have been able to adjust myself to the new situation—in fact I was unable to do so.

'He' had been my psychiatrist for 18 months. I had to part with him, and had been handed over to the next doctor. The separation to me was an extremely grievous one. The treatment is very difficult, one has to learn to undergo it, and a very subtle relationship had carefully, and purposefully been built up. I could see now that for the first nine months or so of the treatment, I had been fooling about, trying to be 'funny' about serious matters. In fact my sense of humour had often saved me from gross embarrassment. Humour after all is a wonderful defence, an escape from the real issues.

## Months of depression

Before and after the final separation it suddenly became clear to me what had happened: I had lost my sense of humour. Before, I could make fun about my psychiatric treatment, now I seemed to be totally incapable of doing so. After the final break up, and his last letter, I kept writing to him letters of dull humourless agony, of despair, a crying out for help. I could not stop communicating with him. I could not think straight about the implications of it. I had no right to do it, I was imposing upon him and I knew it. I

received no replies, nor did I expect any, but I desperately kept hoping all the time. It still did not stop me writing. I could not let go. I felt as if I had been filled with yeast for those last 18 months, which only now started to work and, as it were, made my emotional substance spill over.

Instead of taking this débris to the new doctor, I hung on to the old. After many days of depression, suddenly a glimpse of humour came back to me. Just imagine all the patients he had to leave behind behaving in this fashion! A pile of letters with loaded contents would await him every morning in that case. If this were so we surely were punishing him. However much we needed to be consoled, we were certainly suffocating him with our pleas. Very unfair to burden one man with this, as he could not have done anything about it any longer. The mere thought of more patients writing to him filled me with disgust. It seemed almost farcical, it amused me slightly. My pitiful efforts would have lost their poignancy among all the other expressions of woe. I simply had to come to terms with myself.

In this brief moment of sanity, I decided to stop writing for good. It occurred to me I could have become so easily a nuisance, a bore, or a figure of fun. Humour is very important to me—it keeps the balance between blind, senseless suffering, and accepting. It helped me to accept the situation. It is four weeks since I made the decision and I have been able to stick to it. The sense of 'humour' may have dulled considerably since, but all the same I hope it will be a constructive help to me again when needed. I had been too greedy for sympathy, too afraid to be forgotten. I should have been silenced and satisfied by that simple sentence:

'... and wish you the happiness you deserve.'