

LAWYERS CONCERNED FOR LAWYERS

Upward career derailed by upward mood

Less than a decade out of law school,
I found my way quite successfully into
entertainment law and related, more lu-



Dr. Jeff Fortgang

crative work representing some minor celebrities. I have always been able to get a lot done pretty quickly and come up with creative business ideas, and I was starting to enjoy the life it bought me. But because my wife and parents thought I was drinking too much, I checked with my doctor, who prescribed an antide-

pressant for me, I guess hoping that I'd have less inclination to drink.

In fairly short order, I made a series of bad decisions and investments (both financial and interpersonal, including a brief affair with a drug-addicted, but emotionally exciting, woman). I also got into an irritable and aggressive kind of mood, and at one point was arrested for punching my father (who has not pressed charges but they have not as yet been dropped). The legal problems led me to a short stay at a hospital psychiatric unit, and since then I have been on some fairly heavy meds. I would say I'm "re-grounded," but now I'm in debt, and I feel so medicated that I can't really work. Is this what I'm to expect going forward?

In all likelihood, your prescriber (who presumably is, or should be, a psychiatrist or psychiatric nurse practitioner) will be making further medication adjustments over time that will have you feeling less sedated and better able to function. The immediate mission was to end what seems to have been a manic episode, and you are probably on an "antipsychotic" (which, despite the name, is not used only for psychosis) as well as a mood stabilizer; over time, the mood stabilizer will likely become the more primary medication.

The physician who prescribed the original antidepressant may have made what turned out to be two errors: (a) treating your drinking problem as merely a symptom of depression, an approach that fails more often than not; and (b) treating your depression as "unipolar," when we can see with



hindsight that it was bipolar. It turns out that many people who have shown some of your earlier characteristics (high energy/motivation, an every-ready fast flow of creative ideas, etc.) but who also seem depressed some of the time have a less obvious form of bipolar disorder.

Compared to other forms of depression, the neurobiological/hereditary component of bipolar disorder is greater. In addition, the mood uplifting effects of an antidepressant medication can, in bipolar individuals, elevate them all the way into a truly manic episode. Impulsive spending and decisions, and increased sexualized and/or aggressive behavior, can all be part of such an episode, and have landed many people in regrettable situations like yours.

Although you can expect over time to feel and behave more like yourself as your medication regime evolves, if you want to regain and keep a stable professional and personal life, it will be important to stay on your mood stabilizer — even though you may miss some of the very high-energy feelings. Staying away from alcohol (whether or not you had developed full-fledged alcoholism) will also help keep you stable and productive, and place you in a better position to put your career and home life back together. If we at LCL can help you get a better profession-oriented perspective on all of this, or find more supportive resources, give us a call.

Dr. Jeff Fortgang is a licensed psychologist and licensed alcohol and drug counselor on staff at Lawyers Concerned for Lawyers of Massachusetts, where he and his colleagues provide confidential consultation to lawyers and law students, and offer presentations on subjects related to the lives of lawyers. Q&A questions are either actual letters/emails or paraphrased and disguised concerns expressed by individuals seeking LCL's assistance. Questions may be emailed to DrJeff@LCLMA.org.
