



## Medical Marriage, Part II

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Comedian Bill Cosby once said that for two people in a marriage to live together day after day is unquestionably the one miracle the Vatican has overlooked. And while he may have had a point, marriages in which one or more of the spouses is a physician may suffer a double whammy.

Last month, I explored the condition of physicians as wounded healers. This month, I want to share with you some of the issues and problems specific to marriages of at least one physician partner. Much of what I will share with you comes from the groundbreaking work of Michael Myers, M.D., a Vancouver, B.C. psychiatrist, clinical professor in psychiatry at the University of British Columbia, and author of *Doctors' Marriages: A Look at the Problems and their Solutions* (Plenum, 1994), an overview of research on physician psychology and physician marriages and other committed relationships, from residency through retirement.

### **Is marriage tougher for physicians?**

Marriage isn't easy for anyone. But are physicians really different? Is it harder for us to get and remain happily and healthily married? Let's look at some of the most common complaints heard from physicians and their spouses.

- Trouble communicating
- Frequent arguments (and violence)
- Sexual difficulties, extramarital relationships, struggles with infertility
- Disagreements over the children, symptomatic child
- Depression, loneliness and isolation, fear of divorce
- Overwork and fatigue
- Role strain in female physicians
- Alcohol and other drugs
- Stepfamily issues, caring for elderly parents
- Retirement challenges

I look at this list and I realize that all marriages can be vulnerable to some or all of these conditions. How is it different for us? Here's how.

As physicians we learn or develop a very specific way to communicate with our patients. But that communication style, somewhat detached, is very debilitating in our marriages. And according to Dr. Myers, physicians tend to deny that we have problems, physical, mental or marital. “Medical training inculcates an “us vs. them” mentality”, he said, “in which only patients are allowed to have problems. Doctors tend to really let their health needs go. When they finally seek help, they’re often in really rough shape.” Our fatigue often seems insurmountable as patients’ dependence upon us increases, our time available for our spouse decreases. As physicians, our personalities and personal styles add a layer of complication to marriage that we may not recognize until it’s too late.

### **Communication and nurturing are key**

According to Dr. Myers, the root of trouble in many physician marriages is common to other marriages between professionals; not enough time is spent nurturing the relationship. Learning new ways to communicate with our spouse is key to a healthy, happy medical marriage. It is the most important factor in keeping our marriages supportive. Defensiveness is a normal reaction for marriage partners who may feel easily threatened and vulnerable to attack, judgment, diminishment, shaming, betrayal and abandonment.

Good communication requires time, patience, experimentation, risk-taking, flexibility and lots of humor. As physicians we must guard against smugness about our work; it must never become more important than our intimate relationship. Keep in mind that there really are differences in how men and women communicate, and that fatigue, drugs, alcohol and illness can all adversely affect our abilities to communicate. Next month, I will explore the issues behind some other common complaints in medical marriage as well as solutions targeted to alleviating underlying problems.

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