

One attorney's depression story

DANIEL T. LUKASIK

Editors' note: *In a seminal study published in 1990, researchers at Johns Hopkins University found that lawyers were 3.6 times more likely to suffer from depression than members of any other of 104 professions studied. Since then, smaller studies and data from bar association lawyer-assistance programs continue to confirm that many attorneys are plagued by this soul-sapping and sometimes life-threatening disease. Other research has shown that suicide is a leading cause of premature death among lawyers.*

Here, a plaintiff attorney who has confronted his illness shares the story of his ongoing struggle for mental health, and his law partner tells how their firm helps him cope while maintaining a successful litigation practice.

I am a lawyer and I suffer from depression.

It is my hope and intention that writing about this illness in a personal way will help my fellow attorneys and their families recognize depression and seek out help. Depression is, in my experience, not something that you can handle on your own. Many people have tried and failed. Often, it is the recurring attempts to handle the problem alone that make it worse and further entrench the depressed person in hopelessness.

When such hopelessness is left unchallenged, life becomes like a house whose windows are never open and where the sun never shines. Under the sway of depression, your mind becomes a powerful force whose apparent purpose is to recycle negative thoughts.

There is hope and a way off this painful treadmill. But the promise of recovery begins with the depressed per-

son recognizing the fruitlessness of continuing to deal with this problem alone.

We may prevent ourselves from seeking help because we fool ourselves into thinking that it really isn't "that bad" or because we feel guilty about our affliction. We may think: "So many people have it worse than me, what right do I have to feel this way? Snap out of it!" But such demands from our inner selves fall

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on depression's deaf ears. In our desperate effort to escape our grinding melancholy, we try to rationalize why we shouldn't feel depressed. The pain and power of depression will, sooner or later, reduce this strategy to rubble.

Some of us have attempted to dull the unremitting pain of depression with alcohol or drugs. While I have never been attracted to either, my father was. Like so many people who suffer from depression, his sorrow was compounded by alcoholism, which ultimately killed him. Resorting to alcohol was my father's attempt to flee the pain of his

own life and perceived inadequacies.

As I struggled with depression, in my private moments, I would pray to God to send help. He apparently heard my pleas, because when I was finally ready to give up, the love and care of my wife, family, friends, and law partners came shining through. But that happened only when I stopped denying my depression and admitted that I had a real problem and needed help.

Initially, that help came in the form of my family physician, who listened to my physical symptoms: interrupted sleep, body aches, chest pain, and waves of fatigue that felt like cement running through my veins. He recommended

that I see a psychiatrist. When I heard the word "psychiatrist," I felt dread, but I was so battered by depression's symptoms that I grudgingly went.

The psychiatrist peered at me over his horn-rimmed glasses like a biologist examining a bug. I told him my history. He listened soberly for some time before speaking. He told me that it was important to understand that depression is a complex disease and that how I felt wasn't my fault.

Depression, he said, could be thought of like heart disease or diabetes. It needs medical care and treatment. I was not thrilled by this news, but I was somehow hopeful. Relief would come in the form of medication, which soothed me when my mind and body could not do it alone.

Seeing a good psychologist is as important as medication in treating depression. When I first started taking medication, I thought all I needed to do was take a pill to feel better and make depression go away. I now see that this was naïve, because medication is not a cure for depression. At best, it helped stabilize me, quieting my physical symptoms and giving me the energy to begin learning how to run my life while depressed.

My psychologist taught me that many of my thoughts about myself and life in general came from "crooked thinking." Such warped thinking consists of everything from vast generalizations ("nobody really cares about me") to self-hating thoughts ("I'm not good at anything"). Everyone suffers from this malady in one form or another from time to time. In a clinically depressed person, this tendency is taken to the extreme.

My therapist listened to my thoughts and gently challenged them. He suggested that many, if not all, of my crooked thoughts were simply untrue. He pushed me to rethink some of my

most basic, unconscious assumptions about life.

To say that my efforts to do this are a work in progress is an understatement. Yet, a profound sense of hope comes from seeing that one's crooked thinking in depression can be challenged and changed for the better.

In this quest, I am searching for the

wisdom to lead a better life. Part of that wisdom involves seeing the goodness of life and appreciating all the things I have to be grateful for. In the great speed and noise of daily life, we all must make time to do this. The great Christian mystic Meister Johann Eckhart once wrote: "If the only prayer you say in your whole life is 'thank you,' that

would suffice."

Today, I am doing much better. As I look back at the whole experience, I feel a great desire to help others who suffer in silence.

Years ago, a reporter asked Mother Teresa what God expects from humanity. The young reporter must have anticipated a pious and theological response. Mother Teresa replied, so simply and eloquently, that God expects us to be "a loving presence to one another." I hope and pray that this article, in some small way, expresses a loving presence and offers hope to other attorneys who suffer from depression. ■

Practicing alongside depression

FRANK J. DOLCE

As a civil trial attorney, I have been fortunate to have over the last several years a skillful, hardworking, and successful law partner in Dan Lukasik. It just so happens that Dan suffers from severe clinical depression.

This psychological illness affects not only Dan's personal life, but also his professional practice. By courageously dealing with his depression, he has actually enhanced his practice and magnified his positive contribution to our law firm. Over the years, my two other partners and I have been able to effectively grow our practice while assisting Dan on his steady path toward psychological wellness in a stressful and competitive profession.

We have achieved this success by cultivating social and emotional support for Dan, while developing appropriate strategies to overcome the inevitable obstacles posed by his illness. Building a supportive environment entails encouraging open communication about depression and its specific manifestations, including the effects of prescribed medications. Accommodating and encouraging ongoing psychological treatment are essential. Active social engagement is also important: For instance, fre-

quent and regular lunch meetings out of the office have proven restorative for Dan.

To help him successfully deal with his illness, we have focused on reducing the considerable stressors that accompany civil litigation. Strategies include implementing flexible work and trial schedules, thoughtfully staffing trial teams, and carefully planning out-of-town work assignments. All the partners meet frequently to ensure that, while we give special consideration to Dan's needs, the workload is fairly distributed throughout the firm.

Depression cannot be simply ignored or kept in the closet. Care and concern combined with purposeful action are essential to Dan's health and well-being and our law firm's success. The steady growth of our practice and Dan's continued effectiveness and wellness are a testament that depression can be managed successfully within a vibrant civil litigation practice through proper support and strategic planning. ■

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