Every Patient Has a Story

What’s the problem?

Physicians must always guard against labelling patients by their diagnosis. Patients with depression become “the 47-year-old with depression,” or patients with diabetes may be referred to as the “diabetic.” Failure to separate patients from their diagnoses may contribute further to their illness.

How is the problem resolved?

Narrative therapy: Narrative therapy enables patients to separate their lives and relationships from what they feel to be impoverishing. It is not a therapeutic approach that can be used in a single session.

In Mrs. Johnson’s case, it would be helpful for the physician to ascertain the present impact of depression on Mrs. Johnson’s daily life. Depression should be referred to as a noun. For instance, the physician may ask: “How does depression impact your daily functioning?” or “What are the affects of depression on your daily life?”

Family members: The physician should also ascertain how family members or friends perceive the role of depression in Mrs. Johnson’s life. For example: “What does your husband think of the role of depression in your life?”

History: Charting the history of depression is critical. The physician should inquire as to when depression first presented itself in Mrs. Johnson.

The Case of Mrs. Johnson

Mrs. Johnson, 47, was diagnosed with depression five years ago and has been taking antidepressants ever since. Over the past five years, she has had good and bad days and has managed relatively well with antidepressant therapy. She comes to your office looking for additional strategies to deal with her condition.

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New!

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Johnson’s life and what makes her depression more or less prominent. Additionally, the physician should acknowledge that Mrs. Johnson’s depression does not exist in a vacuum, but rather is shaped by her understanding of her experiences. Furthermore, these experiences may be grounded in societal assumptions and attitudes.

The physician can also assist Mrs. Johnson in looking for instances when she has managed to fight her depression. A sample question might be: “Was there a time when you were able to stand up to your depression and how did you do that?”

**Patient self-awareness:** The physician should encourage Mrs. Johnson to broaden her understanding of herself and not view herself as the problem. Additionally, it may be helpful to ask Mrs. Johnson how she wants to live her life and how she would like to be perceived by others in her life.

References available upon request—contact The Canadian Journal of Diagnosis at diagnosis@sta.ca.

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**Web sites**

1. The Depression Center Support Group:  
   [www.depressioncenter.net](http://www.depressioncenter.net)
2. The Depression-Recovery-Life Web site:  
   [www.depression-recovery-life.com](http://www.depression-recovery-life.com)
3. Walkers in Darkness Inc.  
   Support and Information for Mood Disorders:  
   [www.walkers.org](http://www.walkers.org)