

Being Human in Medicine

How lifestyle medicine drove me to the hospital

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Getting into medical school is an exciting time. It is “it”: the achievement so many of us have worked years, if not our entire lives, for. You would think after stressing about getting in, you’d relax once you’ve been accepted, but that’s not always the case. There’s so much paperwork to do before starting, housing to figure out, banking, the anxiety of making friends, finding new hobbies, and of course getting through the actual schoolwork.

I knew nobody in Newfoundland when I moved there from Prince Edward Island (PEI) in September 2020. It wasn’t the happy experience I was expecting it to be. I felt like I had lost part of my identity on the voyage over. I didn’t have my summer job anymore, my routine with sports and volunteering, or my close friends. But as with everyone during the pandemic, the feeling of being lost and isolated was something I had grown to be familiar with.

Growing up with Juvenile Arthritis, I always wanted to prove myself to people by showing them I was able to excel physically over my peers despite having a joint and mobility disease. Athletics had always been such an integral part of my life, so in times of stress, such as starting medicine, I turned to it as a comfort. Because school was online, the friends I met were all from our class’s trail running group and like-minded about fitness.

The stress relief that running gave me was euphoric, so I ran almost every day of the week to keep my mind clear. As with most people with autoimmune diseases, I had more than one. Crohn’s disease is often treated with diet modification, so I had tried every diet under the sun. I became hyper-focused on the types of food I was consuming and was convinced that I could control my Crohn’s and arthritis purely by putting all my efforts into lifestyle modification.

The more fixated I became, the more my life was taken away from me. I went home to PEI for a week in November to visit my family. I was so terrified they would find out about my exercise and eating habits that I treated them with a cold heart. I ran in the small hours of the morning and claimed shorter distances and higher

caloric intake than reality. My brother, always straight to the point, told me I looked like a skeletal anatomy specimen. My father later confessed that he thought he’d lost his little girl. My friend, a dietitian, told me he thought I had an element of orthorexia or disordered eating. Once the initial denial wore off, I began to realize what was happening.

Because of the pandemic, I had to stay in Newfoundland without my family for Christmas. Despite my roommates’ wonderful family taking me under their wing and treating me like one of their own, I became the most depressed I have ever been in my life. I spent upwards of three hours swimming, running, or weightlifting every day. I had a compulsion to only eat at certain times, meticulously weigh my food, and count calories to ensure I had burned more according to my fitness watch. I rapidly lost a significant amount of weight. I thought I would never be good enough until my body dissolved into itself.

One bleak and foggy day I went for a run on one of the east coast trail segments. I stood at the edge of a cliff and desperately wished for someone to appear and throw me off. I did think about my family, but mostly I kept thinking about how I had spent my entire life focused on getting to medical school and how it would be such a waste to throw away all the hard work I had done to get there. I drove to the Waterford Hospital psychiatric assessment unit (PAU) and spent an hour in my car trying to work up the nerve to get out. Walking into that emergency room was the hardest thing I have ever done.

Despite knowing all the pathology of anorexia nervosa, I didn’t believe it would happen to me. I spent two months attempting outpatient treatment, but my pediatrician sent me to the emergency room to be admitted because I was medically unstable. I spent 11 hours in the waiting room, which isn’t uncommon. I wasn’t about to die immediately, but I was there because I was starving myself. Despite that, I wasn’t asked what I had eaten that day, and I wasn’t given any food until I was going on my 27th hour without. If someone presents with anorexia nervosa because their

heart is about to give out, I think it's imperative to make sure they get their calories from somewhere other than their myocardium. I spent a week on the cardiology floor, then eight weeks in the Eating Disorder Inpatient Program.

One of the few things that kept me going was my drive to not let my life's work of getting to medical school go to waste. I had a meeting with some professors, and because everything was online, I was able to continue school from my little room in the psychiatry unit while restoring my weight and receiving intense therapy. My mind underwent a complete transformation. I was able to see that there are so many other things to enjoy in life outside of medicine. Yes, I should work hard at my schooling, but I also needed to work hard on my wellbeing. I wouldn't be able to take care of my patients if I didn't take the time to take care of myself. I found

new hobbies to pursue, and I was brought closer to my family than I ever was before. Being immersed in the patient experience opened my eyes to another side of empathy I didn't know I had. Everyone has their story, and everyone has something they are willing to fight for. Ironically, medicine was what pushed me to the point of hospitalization, but it is also what continues to drive me to get better.

NOTE FROM THE EDITORS

The Faculty of Medicine recognizes the importance of learner mental health and well-being. If learners feel they are experiencing mental health problems, it is encouraged that they reach out to the Office of Learner Well-Being and Success and/or their primary care provider.