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Moving tale of will and courage

*The secret life of Laura**

This is the gripping tale of Laura, a woman who managed to overcome a serious mental affliction: schizophrenia. Not only did she cope with the illness, she succeeded in living a normal life with achievements even 'normal' people find hard to achieve: she set up her own medical surgery, which she manages on her own, and has a smart and beautiful daughter.

But if Laura - an energetic, optimistic woman who has made a success of her life – didn't keep all these achievements secret, she would risk losing it all. If it came out, the people who now look up to her and confide in her their health problems would look at her askance and sceptically, and some would even avoid her. Many would look for another doctor. They would suddenly consider her 'crazy' despite the fact that day by day, year after year she has proven to be a competent, hard-working professional.

Laura has been living with this secret for more than 20 years, since being diagnosed with one of the most serious psychiatric conditions, schizophrenia. She has overcome the disease, but not people's prejudices. On account of these prejudices she was on the verge of receiving one of the most powerful blows in her life, more painful perhaps than illness itself: after asking her husband for a divorce because of his affairs, he claimed custody of their daughter on account of his wife's illness, even though she hadn't been admitted to a medical institution for ten years and her doctor confirmed that she has completely recovered.

But Laura fought her corner and convinced the judges of her case. Her legal victory was a victory over an entire system that tends to discriminate against people for the mere fact of having been in a psychiatric hospital at one time in their lives. Their rehabilitation efforts are sometimes heroic and they receive too little recognition for life achievements – like Laura's – that many 'normal' people never manage.

'My colleagues at the surgery, not knowing anything about my illness, wondered why I was so worried about having my child taken away', says Laura. Indeed, it was inexplicable for them why a highly educated woman, making a decent living in a reputable

job, could lose the right to raise her child. Someone widely known as an honest woman who had dedicated herself to her family. Especially since mothers are almost always successful in custody battles.

But when love turns to hate and the husband who loved you once wants now to hit you where it hurts the most – by taking your child away, Laura worried that it could all go wrong. Especially when you have a condition that could at a stroke undermine your case if mentioned in court. For many, schizophrenia is one of the worst mental illnesses. Most people know that being a schizophrenic means hearing voices or seeing imaginary people who command you to hurt others, even loved ones.

However, very few people are aware that being diagnosed with schizophrenia often gives you the energy to fight it, to take the medication and still achieve extraordinary things – the approach taken by **John Nash**, the Nobel Prize laureate featured in the film 'A Beautiful Mind'. Or to recover and live a normal life, as in this story. At 30-40%, recovery rates from schizophrenia are not negligible. Chances of recovery are higher if the condition occurs later in life, you are more educated and have strong family support. Some studies also show women have a higher chance of recovery than men.

Equally, it's unlikely many people know that recovery rates for schizophrenia are higher than for alcoholism, generally estimated at 20%. **'The recovery percentage as regards schizophrenia could be even more than 30% if the condition is detected in time, if patients were regularly assessed in dispensaries and if there were support networks'** says **Virginia Fortuna**, a psychiatrist at Socola Psychiatry Hospital.

'Tormented by voices in her head'

Laura now numbers among that lucky 30-40%, despite a worrying start. **'When I met her, she was in a very bad way. She was hospitalised in the upper floor, together with the very worst cases. She was constantly tormented by voices in her head. She had awful hallucinations'**, recalls Dr Fortuna, who took care of her during her hospital stays. These became increasingly rarer, and now the 'little girl' – as she tenderly calls her patient, even though she is now well into middle age – only visits the hospital twice a year to be assessed for whether to extend the treatment and to review the dosage of her medication.

'Perhaps we will gradually reduce the dose, and eventually stop it altogether', says Dr Fortuna, convinced her patient was largely saved by the stimulation she got from having a job and never giving up her dreams. Her intelligence enabled her to regard her suffering objectively and paint an accurate portrayal of what she felt.

Laura had already graduated from medical school when the first signs emerged. She had been a good student in a reputable college in Iasi and, later, a hard-working university student. **'I was admitted to the faculty at the first attempt, at a time when exams were very tough and competition extremely tight (12 candidates for each place)'**, she recalls. After the graduation exam she failed residency, despite having studied heavily.

It seems the effort was too much. As her mother recalls about the first signs of her abnormal behaviour: ***'When she came home she strongly believed her thesis had been stolen, that someone had formed a conspiracy against her. She had all sorts of fears, she heard voices, she used to tell me she was being pursued by Ceausescu's security police.'***

'I told him about my illness and he sympathized, for we were in love'

Indeed, psychiatric literature mentions stress as a catalyst for the onset of schizophrenia, this severe psychiatric disorder that affects two million people across the world every year. ***'I used to live a double life, one in my head, the other outside. My mind framed scenarios and I was affectively involved in them as if I were watching many films in parallel. Sometimes I got the impression that there was news about me on TV. It was horrendous, I do not want to remember'***, she says, shooing away my question as if it was a bothersome wasp buzzing around her head.

After being diagnosed with psychosis and being admitted to the ward for the severely mentally disturbed, she stopped hearing the voices and resumed work as a country doctor, commuting from town like all new doctors at the end of Ceausescu's regime. ***'It was not easy for me. The commuting was hard, I sometimes rented a room, there was no running water and the toilet was outside. I was a sensitive, lonely person'***, she recalls. ***I met my future husband, Florian*, while commuting: 'I told him about my illness but he sympathized, for we were in love. I felt good, the treatment went well and I no longer needed to be hospitalized'***.

They married for love. Meanwhile, both of them got better jobs and moved away from the muddy country roads. In 1997 the baby girl they wanted so much was born, though her doctors had suggested she wait 5 years because her treatment with neuroleptics had to be stopped during pregnancy and that could trigger a relapse. ***'I took that chance'***, says Laura, but the specialists were right: shortly after delivery, the voices came back.

Thrown out by her husband's parents, together with their child

Life would have been much easier if her struggle had been only with the voices in her head. They tormented her terribly – she could hear them not just in her ears but also in her mind, a sort of insistent reverberation of her thoughts, says her psychiatrist, Virginia Fortuna. ***'Take the baby and leave her'***, Florian's mother would tell him. ***'But he didn't listen to her and stood by me. I grappled with my mind, to stand my ground and not to be hospitalized before our daughter had been baptised at least'***, adds Laura.

But the situation was more serious than that. As Laura's mother recalls, ***'Florian's parents found out about Laura's condition when she had that relapse after the delivery. He hadn't told them about it and we had no idea about that. And they just threw them out of the house, together with the newborn baby. They moved in to my place, where they stayed for three years. Florian's parents didn't even leave him the keys to their house'***. This is the kind of rejection most people with mental disorders have to face in Romania, where dealing with the stigma is sometimes more difficult than the recovery,

since the burden of the illness lingers on and people don't understand that, once treated, you can lead a normal life.

'Having someone in your family suffering from a mental disease means bad luck and terrible shame. It would be good for people to know that, in the same way their liver or stomach can stop working properly, the same is true of the brain, which is the organ subject to most stress', says Dr Forunta, adding that if people with mental disorders and their families could overcome this shame, that would be beneficial to most victims – they could share their experiences and set up support groups, just like in western Europe, where this has been happening for a long time. **'In Iasi, there are well-off people who have children or other relatives diagnosed with schizophrenia. They have the money to do something, like setting up associations or launching public campaigns to combat stigma. But they cannot. They are ashamed and they hide them in the house'**, says Dr Fortuna, adding that their reaction is partly understandable, since the weight of social opprobrium can be crushing, leaving you isolated. And people fail to understand that this can happen to any of us.

'In our country, if you tell somebody to take a psychiatric test, they feel offended', Dr Fortuna continues. Naturally, this kind of rejection and unacceptability harms both the family, who take it as misfortune, and the affected person, who is subject to a dual pressure – disease and stigma. Not all of them can cope with all this. **'As for my patient, her mother had a crucial role, especially in the beginning: she faced reality and helped Laura continue to enjoy a full family life. And she has a sense of humour that helped her rise above it.'**

'I've always tried not to complicate my life any further'

Laura managed to get over her bitterness towards her in-laws and remain focused on bringing up her daughter and going to work. **'I've always tried not to complicate my life any further'**, she says. After three years, her in-laws' resistance dimmed and they welcomed the family back. But the relationship remained cold. **'My husband and I weren't allowed to visit them. We used to sneak over there, only when they were out visiting'** says Laura's mother. Despite these obstacles, she became close to her granddaughter, as at the weekend the little girl's parents would take her to the house where she had lived up to the age of three.

'My mother always helped me a lot, even from as early as the commuting period, and I strove to keep on working, to stay focused despite my hallucinations. I was strong and stood firm. Do you think I was wasting my time? I used to see up to 30 patients a day – they came from the whole village and the surrounding area', she recalls. But that hardship in those years of commuting through the country – 'a harsh life', as her mother puts it – actually helped a lot. The difference between people with physical afflictions and the mentally ill is that the former are coddled and spared any effort, while work and socializing is precisely what mental patients need – it is isolation that turns them into vegetables, saps their strength and further undermines their already tenuous hold on reality.

'I kept going to work and had no time to think of the illness, says Laura. 'I tried to avoid conflict and keep a low profile. People cause conflicts because they want to have control. But you can also have control by keeping quiet. I tried to ignore my condition. Everything depends on your willpower: not to live in the past but rather to focus on the present and future. The important thing is to find a goal in life and avoid conflict with yourself'. This lesson of wisdom and balance from a person who schizophrenia should have predisposed to unending conflict with herself and others. ***'You might not believe it, but it was me who maintained the balance in the house for 12 years of marriage - 12 years that have now vanished into thin air. I almost always earned more than my husband - indeed, for a few years, I was the sole breadwinner, after he lost his job'***, says Laura, details confirmed by her mother and Dr Fortuna.

'When she was supporting the whole family, they didn't think she was mad

Together, they rose above all the hardships. Laura's illness and the problems with Florian's parents, then his job-related troubles, all this kept them united. Their marriage actually started to go awry when these problems started to get solved. ***"Florian found a new job and was often away on business. One day I found a bunch of receipts for restaurant meals for two people, and realised he was cheating on me.'*** Divorce and the custody battle for their daughter followed.

As for the custody battle, Laura believes the people behind it all are her in-laws, who tried many times to split them up. Not because she wouldn't be a good mother and wife, but simply because she was 'crazy'. ***'But when her income was supporting the whole family, and her earnings were all invested in the house where Florian now lives alone with his parents, Laura was not crazy. She worked hard and left them everything.'*** So says Laura's mother, who describes the custody trial as an almost unbearable ordeal, fearing the whole time her daughter might have a sudden relapse. Laura never gave in to their scandalous accusations – showing a determination that, she says, caught the judges flat-footed.

To win the case, Florian came up with a dossier designed to convince the court he was more able to care for their child. As Laura's mother recalls, ***'Every Monday, they would take her from us and keep her the entire week for, they say, private lessons. At weekends, they would take her out shopping and force her to sign receipts of toys bought for her. She used to cry and say she wanted to go home, and eventually her father had to give in. But to avoid having to face us, he would leave her on our doorstep in the street.'***

During the trial, Florian's custody case was based on assertions Laura suffered from hallucinatory fits. ***'They said nasty, untruthful things about me, that I suffered from fatigue and would let my daughter stay late up watching rubbish on TV, stuff like that'***, Laura recalls.

'My father used to upset me by calling me stupid'

Laura's daughter enters the room and insists I talk to her, too. Her mother and grandmother leave the room, at her request. ***'Dad made me sign a piece of paper attached to the supermarket invoice, saying "Today my father bought me a toy worth..." I told the judge this. It's absurd what my father did'***, she tells me. Now enrolled in a well-known college in Iasi, she told the court she wanted to stay with her mother and grandmother, not her father: ***'He used to upset me by calling me stupid and would always remind me of one poor grade I got in the 5th year'***.

She also tells me she's happy now that dreadful trial is over and she lives quietly with her mother and grandmother. What she wants is for her other grandparents to give her their cat, as she was very fond of it. ***'I want my little tomcat back, I used to dress him in baby's clothes and go out with him. He very rarely miaowed and used to bring my toys back in his mouth'***, the girl says.

Spring has come and summer will soon follow, when Laura will take her on a trip to Turkey: ***'I've got plans,'*** she says. ***'I'm modernizing my surgery, because you've always got to be better than your competitors. I want to add another floor to my parent's house, to have a separate apartment for me and my daughter. God willing, things will work out for us. I don't hate anybody, life is beautiful. I am born again'***.

Every year, 2 million people are diagnosed with schizophrenia

Schizophrenia was formally described in 1852 by the Belgian psychiatrist Benedict Morel, who named it precocious dementia. In 1896, German psychiatrist Emil Kraepelin applied the term precocious dementia to a group of afflictions emerging during adolescence and ending in dementia. In 1908, the term 'schizophrenia' was introduced by Swiss psychiatrist Eugen Bleuler. Schizophrenia is a psychotic condition with unknown etiology, featuring structural and functional abnormalities visible only through neuroimaging. It is characterized by positive symptoms (delirium, hallucinations, disorganized behaviour) and negative symptoms (affective flattening, alogia, avolition). These symptoms affect thinking, feelings, behaviour and social and occupational functioning.

The evolution of this disorder presents great individual variety, according to various factors, especially the victim's age at onset, level of education and social environment. The earlier it appears, the bleaker the prospects. Studies show a higher degree of complete recovery with people of above average intellect. Some research shows women are likely to have better prospects of recovery. In 50% of cases, the psychosis occurs before the age of 25, in 70% before 30 years and in 90% before 35 years. Between the ages of 32 and 45 incidence decreases, without reaching zero.

The evolution can be simple and continuous, or undulating, i.e. cyclic or intermittent. In the first category, the chance of developing serious chronic forms is 10-20%, and in the second category the chance of the condition leading to minor forms, even complete recovery, is 30-40%. Remissions fall into various types: type A allows victims to reintegrate into family, society and work at the same level as before; type B allows reintegration, albeit at a lower

level in the case of work; type C allows reintegration into the family, under permanent surveillance but not excluding the possibility of occupational therapy; and type D, the most serious, involves only stabilization of symptoms, excluding the possibility of reintegration into either family or society. Even in such cases, occupational therapy is recommended.

Treatment for schizophrenia must be on a case-by-case basis. It is based on neuroleptics or neuroleptics in combination with antidepressants, in cases of affective schizophrenia.

At present, 80% of patients with schizophrenia are treated through ambulatory care.

The prevalence of this disorder is 10-12% in case of first-degree relatives and higher for children with two affected parents.

If relapses do not occur within a year, the treatment is reduced by 10-20%, provided the first signs of relapse are not observed: anxiety, insomnia seclusion and strange behaviour.

Group, behavioural and family therapies (for instance, discussing problems jointly) can help reduce the relapse rate.

In Romania, there are few support associations for people with mental health problems. Among the most active are the Estuar Foundation in Bucharest and Orizonturi (Horizons) Foundation in Cimpulung Moldovenesc. Both organizations develop community actions which actively involve mental health patients themselves, public meetings with representatives of the institutions that can help them (hospitals, employers' groups, police representatives). Both associations publish magazines in which sufferers of mental disorders are involved, sharing their experience and describing their lives coping with illness and stigma.

The most famous schizophrenic: John Nash, Nobel Prize laureate

John Nash, the mathematician diagnosed with schizophrenia, who became a Nobel Prize laureate as well as the subject of the film 'A Beautiful Mind', continues to be a topic of discussion in psychiatry conferences.

It is on his case that professor Michaela Amering, from Vienna University of Medicine, delivered an account at an EU-funded community psychiatry workshop, coordinated by clinician psychologist Mugur Ciumageanu, from Bucharest, and by professor Heinz Katschnig from Vienna.

'Last year, in the American Psychiatric Association, John Nash spoke in front of 5000 people about how he got sick and is well again', said Mihaela Amering. When he was young, John Nash felt very different to his peers, but also more intelligent, and failed to find his place among them. This feeling led to his isolation and, later, to the emergence of the affliction that tormented him for 30 years.

'He reached a nadir, considering himself inferior and hanging around the university campus like a drifter. But with the help of his family, he managed to live with the sickness, producing scientific achievements that earned him the Nobel Prize. 'In older age he returned to a life that was reminiscent neither of his genius past nor of his worst period of sickness'.

Seven messages about the recovery from psychic suffering

During a training workshop on community psychiatry, for professionals from psychiatric institutions, financed by the EU under a PHARE program, Austrian professor **Heinz Katschnig**, from Vienna University of Medicine, listed 7 essential messages about recovery from psychiatric disorders:

1. Recovery is possible even in utterly severe cases of schizophrenia, bipolar disorder, schizo-affective disorder.
2. Without hope there is no recovery.
3. Each recovery is different.
4. Recovery is not a linear process.
5. Recovery can take place even if some symptoms are still present.
6. Most of the time, disease and recovery alter the person: it is not a return to what was before, but a development into something else.
7. Recovery is possible both with and without medical help, or even in spite of professional help.

** Names added by translator to aid readability.*