

Case History: Ralph

I have chosen to describe this case because of three aspects. First is the unusual and severe stressor that generated Ralph's depression. Second is the fact that his treatment had a successful outcome. Third is the fact that there was a brief 35 year followup.

Ralph was a tall, good-looking middle-aged man, raised in San Francisco where he attended Catholic schools, entered the Army Air Force, and was in sales work after WW II. He married, had several children, and lived in a suburb south of S.F. In his early years he was close to his father. They attended Mass together each Sunday. He had no siblings. His mother seems to have been rather narcissistic and did not share their devotion to the Church. Father died when elderly of physical causes.

At some point Ralph and his wife Mary were having family problems. They were referred to a psychologist, Fred, who did Family Therapy. They found Fred to appear to be very helpful. Ralph liked him very much and considered him to be a good friend. Fred suggested that he had project for which Mary would be very helpful. One thing led to another and Fred and Mary were in love. Fred divorced his wife and Mary divorced Ralph.

Ralph moved to another town and continued to work but became increasingly depressed. He was referred to a psychiatrist in a nearby town. He was managed with verbal therapy and medications but became more and more depressed. His mother informed the doctor that father's handgun from WW I was missing. Ralph denied knowing anything about its absence, but he was the only person who had access to it. It was felt that he was covertly very suicidal. He was referred to a District Hospital for ECT therapy.

I was administering ECT at that time as part of my general psychiatric practice. He received six or so treatments which seemed to be helpful. In the process we developed a positive rapport. At the conclusion of his hospital stay I suggested he continue office therapy with me and he accepted. I felt that a return to his former therapist would lead to a repeat of his former course. The fact that I had had a Catholic upbringing gave me an increased sense of empathy for him.

I had him come in twice a week and the therapy turned out to last for five years. Medication was not used. The first year the relationship was somewhat insecure. There was a period that he was rather ambivalent. I had him come in three times a week for a couple months. I let him understand that I considered him definitely suicidal and that I considered our goal to be a return to a healthy level of function and that with a condition as severe as his it would take several years.

At no time did he admit to being suicidal. He continually considered Fred to be a friend! My main request of him in therapy was that he tell me of his dreams. After about a year he finally became more trusting of me and began to recall his dreams and tell me of them. The first one was of two panthers circling around each other and sizing each other up. I accepted the dreams and did not try to interpret them to him. But they gave me a sense of how his unconscious was dealing with his feelings.

He gradually became more relaxed and active. After about three years he developed a relationship with a lady and they married. She became his office assistant. At this point he proposed to me that his marriage meant that he no longer needed therapy. I told him that while his marriage was a positive step he could not expect his wife to supplant his need for therapy. He accepted this.

After about two years he seemed to be stable in his work and in his marriage. I agreed it was time for the therapy to conclude. On the night before his last visit he had a special dream. In it he was concluding a trip to the bathroom. His father was sitting outside being mindful of him. He said the dream reminded him of his experience of being in the Air Force. He did a tour "Flying the Hump" from Burma to China (20 plus flights). It was known that a pilot's last flight could be problematic, the pilot might become erratic, so the commanding officer would accompany him to make sure nothing preventable went wrong. I found this quite touching and that it was a confirmation that it was time for therapy to conclude.

A couple of years later he called me and came in for visit. He related that he and his wife were having some difficulty in their relationship. They had been referred to a marriage counselor who was covered by his insurance plan. He wondered if this would be a wise step to take. I told him that I saw no objection. He thanked me and departed. (He had always paid privately and there was never any mention of insurance or of a financial problem) I realized that he had definitely let Fred go from his life and that I had replaced him.

Epilogue: About 35 years later I was attending a monthly luncheon of a men's group. It seemed that Ralph had been a long-term member of the group. As he entered he saw me and came by. We shook hands and the only thing he had to say was "Hi Dr Small. I didn't kill myself".

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