



Pain and Depression

Reading: Excerpt from Interview with Marty Helms

Q: Drawing on your experience, do doctors have an obligation to reduce patients' pain?

A: I think they need to treat you if you're having an issue. I don't know how they would be able to tell how much pain you're actually in. I have so much scar tissue and stuff, and so much stenosis that there's no way of knowing what's going on with me. They would have to just prescribe me something, but I don't think that's a real cure. I think you should take people off for a little while or at least reduce their dosages for a while, like me right now, just to see if they can manage on their own.

Q: I wonder if there would've been a difference if your doctor had refused to prescribe you, let's say, ten years ago, as opposed to 2017. What would you have done if your doctor cut you off some years ago?

A: Started taking nerve pills probably, like Neurontin or something. For a while, I took this drug called Topamax. It's an anti-seizure medicine, but it's supposed to reduce your pain, which it did. It did reduce my pain. I didn't have that pain in my legs that I always had, and that always woke me up.

When I sleep at night, or I used to, if I laid on my right side, just a pain would start up. It would make me move. It would wake me up. It was working great. It made me lose weight because I was never hungry. It was awesome, but my husband said it made me the worst tempered person on earth. He was like, "If you ever take that again, I'm leaving you." I was so mean. I didn't even notice and everybody around me said, "Yeah, you're horribly mean." It made me paranoid.

Q: Your need for opioids seems to have been intensified by depression. Would you say that depression and pain need to be problematized together?

A: Well, of course if you're in pain all the time, it's going to wear on you. When I first had all this, up until 2009, so, ten years after I started getting back surgery is when I started taking antidepressants. So, no.

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