

Draho to HR

MEMORANDUM

June 2, 1999

To: Holly Russell
From: Lisa Draho, Jocelyn Serio
Re: *Intimacy & Depression on David Essel – Alive!*
Cc: Leslie Miller, Lisa Weiss

Dr. Pinsky recently joined David Essel on his national radio program to talk about intimacy and depression. During the fifteen-minute segment, Dr. Pinsky communicated key campaign messages. Highlights included:

- Switching to or adding Wellbutrin is recommended for people experiencing a loss of libido
- Antidepressants such as SSRIs can decrease libido, and negatively impact intimate relationships at a time when intimacy and connection with a partner is most important
- Sexuality is important to maintaining intimacy
- Depression is an illness that pulls people away from intimacy with their partner
- Intimacy is essential for healthy relationships, and it's important to talk to your partner and healthcare provider about problems in your relationship or with antidepressant medication
- Depression is a very serious illness that affects millions of people: medication can save lives
- The Seattle Town Hall can be seen on the web site www.IntimacyAndDepression.com
- Call 1-800 – 577-8550 for information about campaign

Overall, Dr. Pinsky kept the program focus on the seriousness of depression, its impact on intimacy, and the importance of seeing a healthcare professional for treatment for this illness in an interesting and informative manner.

We have included a copy of the tape. Please let us know if you would like a transcript to share with you colleagues.

Transcribed by
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TRANSCRIPTION OF AUDIOTAPE FOR: COONEY/WATERS GROUP

SUBJECT: DAVID ESSEL - ALIVE
DATE: May 22, 1999
INTERVIEW
WITH: Dr. Pinsky
TAPE #: 1 C-60
SIDE: A
LENGTH: 13 Min.
FILE NAME: CO0602
DISC NAME: Cooney #2

NOTES:

W: I'm a 34 year old married woman and have just recently become like super multiple orgasmic. It's just, it doesn't seem possible to me to have that many, we're talking, I counted 60 one night.

DAVID ESSEL: 60. Hello Tom.

M: You all was talking about that lady that had the 60 orgasms.

DAVID ESSEL: Yeah, non-stop.

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M: I had several women like that. I had to quit after about two hours.

DAVID ESSEL: 1-800-743-800. Whenever I hear that line I just ... obviously it cracks me up. 800-743-8000. David Essel and the box with you. We have an expert right now that is going to bring on in just a second and I'm going to ask him some questions about that call because it still amazes me. I'm talking about Dr. Drew Pinsky. You know him. 16 years now hosting Love Line on the radio, that's with Westwood One. He's also obviously on MTV with Love Lines and he's chief of service department medicine and program director of chemical dependency services, Lawson [SENU?] hospital in Pasadena. Dr. Drew, welcome.

DR. PINSKY: David, thank you for having me. I appreciate it.

DAVID ESSEL: This is a great opportunity for us here. Before we get into one of the events that you're working with now on intimacy and depression, I wanted to ask you about this question, the liner that you just heard was a woman who called in and said that obviously she was 34 and she started

counting orgasms after she was making love to her husband and she laid there in bed and she counted 60 just nonstop. Is that physically possible?

DR. PINSKY: Oh yeah. For some women. What I think she was amazed about is that it suddenly started and that kind of thing most typically happens from medication, frankly. And she, you know, for women there's no refractory, for some women anyway, there's no refractory phase and yeah, that's no problem for some women. They just do it until they exhaust, physically get exhausted, there's no sort of satiation. There's a downside to that too. They don't get the large release that some people get sometimes with a single orgasm, but interesting, that's one of the things I'm here to talk about, about how medicines effect sexual function. There's no doubt that often times when people have a change in their arousal phase, in their sexual functioning, in their libido, in their orgasmic function, the number one cause for that is medication.

DAVID ESSEL: What type of a medication would increase someone's orgasmic potential where they go from three or four to 60?

DR. PINSKY: Interestingly lots of the antidepressants, but the one that I have most ... I've seen that from in my clinical practice is [BUTRIN ?] or [BUPROPRION ?]. It actually is the one we advocate, one of the things we suggest people do if they're getting decrease in their libido or decrease in their arousal from an antidepressant which typically occurs in the serotonin re-uptake inhibitor medication. We think about switching to or adding [WELBUTRIN ?] or [SERASON ?] or [RAMRON ?] or other medications that may enhance or at least not suppress sexual arousal as much as the serotonin re-uptake inhibitors do. So it's a germane point to this thing and people, you know, we live in this really screwed up society right now where people are sort of think about sexuality as sort of a recreation and it's been pulled away from the intimacy which is really what it's all about and my show, all I hear about every day is the consequences of empty relationships and the facts, the lack of intimacy we have with everybody.

DAVID ESSEL: I saw on one of your shows, this had to be about a month ago where you looked very perplexed and you made a comment about that. You said there is no intimacy. Whoever you were talking

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to, the caller that had called in you said there's no connection there.

DR. PINSKY: There's no connection.

DAVID ESSEL: You were talking about that they were trying all this variety and you said that that was a cover up for intimacy.

DR. PINSKY: Of course. People are looking for drugs and fast cars and more money and more partners and weirder sexual acts as a way of filling this amazing emptiness we all have when in fact we know that real health, I know your show is a lot about health, but health and happiness and well being is all very much tied into the human connectedness, that our intimacy is what sustain us, what allow us to grow, would ultimately give us a sense of happiness. And this other stuff, we could say it's all our whole lifetime and still have that big empty whole inside of us and not deal with it. In fact, again, another part of what I'm hear to talk about is how depression, very often, pulls people apart in their intimacy and people who are depressed withdraw from relationships right at the time when they need their partner the most, the partners don't

understand this, they get angry, they feel guilty, they feel responsible for the person's feelings. Then we as physicians put people on antidepressants that more often than not, further suppress their libido and sort of decrease the potential for physical contact and this thing kind of spirals downward. On top of that we live in a time in the world when managed care is sort of ruling the land.

You can't get the kinds of modalities of treatment that are really necessary for complete resolution of things like depression. Individual therapy, couple therapy. These things are crucial for the ultimate resolution of these problems.

DAVID ESSEL: What is your main goal? You're involved with this intimacy and depression ...

DR. PINSKY: My main goal, my personal goal in all these things, all my endeavors is to try ways to use the media to create health, to change the culture in a better direction. My clinical practice, all I see is the negative impact, the last 30 years we've been on a big spiral downward and talk to any physician or anybody that works in mental health, they will tell you, we know what is healthy for people and our culture does in no way confirm this. In terms of

the intimacy and depression campaign, my goal is A, to make people understand that depression is a serious condition. As many as 19 percent of people with major depression will die. That is ... that's antidepressant is the cornerstone of treatment but the individual therapy and couple therapy are crucial. And that communication is an essential piece of people getting over affective disturbances.

Communication with the partners so that they understand what the person is going through and stay connected at the time they need them the most and communication with your caretaker, your physician, so you can go back and say hey, this medication is screwing me up. I'm not interested in my husband any more, what's the deal?

DAVID ESSEL: And a lot of people, I know from our show, we get calls, they should be taking some of the information to their doctors, they're calling us and saying I've totally lost my interest ...

DR. PINSKY: Yup, that's the deal. They don't go to their doctors. It's bizarre to me. They don't ... it's bizarre to me they go to the radio to you and me and they don't go where they need to go. It's all, everything's all messed up right now.

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DAVID ESSEL: But part of that reason, I know why Dr. Drew, and you do to, is because there are a lot of doctors that do not have people skills, that individuals feel intimidated being in the office and they sure as heck feel intimidated saying something about their sexuality.

DR. PINSKY: That I'm sure contributes but I got to tell you, since I was in training there's been a tremendous amount of effort put into helping physicians be skilled in approaching people and being careful to listen and talk about these issues.

And I certainly see no weakness in my peers. I see weakness in the system. The system poorly serves people. People don't have healthcare. They don't ... they're afraid it's going to cost them a lot of money. They don't want to wait all day. They're afraid the doctor won't have time for them or won't listen, that they'll be somehow ungratified by the interaction. It's more a systems issue than it is the practitioner issue. And it's the same outcome.

People don't go and they don't ...

DAVID ESSEL: We're speaking with Dr. Drew of course from MTV and Love Line on the radio, both radio and

television. Out of curiosity, how did you get involved in intimacy, relationships, love ... at such a big, huge national level?

DR. PINSKY: Total accident.

DAVID ESSEL: Was it really?

DR. PINSKY: Yeah. If you told me I was going to be broadcasting I would have been, I would have laughed in your face. I was John Q. Medical Student and Resident and really involved in my training and actually for many, many years just practiced 14, 16 hours a day and did sort of radio as a community service. I did it as a volunteer for almost ten years. I was not paid for it or anything and it just happened to be in this one vehicle and the vehicle to me was a vehicle whereby I could reach a population that usually didn't listen to the kinds of things that I needed to tell them about. Things like pregnancy and birth control and sexually transmitted diseases. But when I started broadcasting I was the first to talk about something called GRID, Gay Related Intestinal Disease Syndrome, you now know that to be AIDS. And nobody was talking about it publicly and god forbid anybody

talked about safe sex with kids because oh jeeze, we can't do that, they might even have more sex.

DAVID ESSEL: You know there's still a lot of people that believe that today.

DR. PINSKY: Well I'm encountering that in terms of talking to people about the morning after pill. There's great resistance to talking about emergency contraception. I see that as a critical issue in our society and to me a way to completely eradicate abortion. The morning after pill could eliminate abortion easily. But people are ambivalent. Oh, is it an abortion pill itself? No, it isn't. We know it suppresses ovulation, that's all it does.

Anyway, but I'm here to talk about depression and communication and the fact that you've got talk to your partner, you've to identify depression. You can't be stigmatized by it. You got to talk to your doctor and sometimes you got to take medication because that really, it is a dangerous condition and although the medication too is kind of stigmatized these days, usually fairly short term, and it potentially saves peoples' lives.

DAVID ESSEL: You, I saw in some of the press materials that you are doing some what do you call, like live presentations in Seattle, that you're meeting with this intimacy and depression group, there's a whole panel of you, are you going to do it other than Seattle, is that just the one main city?

DR. PINSKY: We did it in New York and San Francisco and then the last one was in Seattle. The Seattle one actually you can see it on the Web site. It's www.intimacyanddepression.com, no spaces, or you can call 1-800-577-8550 for more information on both the town hall meetings and the campaign in general. But its really cool, look on the Web, you actually see the event. It was a very neat event. We go into big halls, three or four thousand people and you sit down with some really exceptional people who themselves are high power professionals in the field of the treatment of depression and one in particular who is actually a therapist who's been seriously depressed and her sort of journey with it and it's very, very touching.

DAVID ESSEL: What did you learn Dr. Drew? What did you learn from being involved in this panel that you

didn't know prior to walking in or was there anything?

DR. PINSKY: In New York we have the opportunity to work with a guy named Tom [WISE ?] who is the vice chair of the department of psychiatry at Georgetown and he taught me a lot about some of the numbers associated with these and I didn't understand how many, how frequent it was that true bona fide major depression occurs in our society and how potentially dangerous it is and how much the medication have revolutionized and in many cases saved lives. I was a little maybe ambivalent, I knew how to use the medicines but in my practice I ran a department of medicine in the psychiatric hospital and I was having to deal with the medical consequences of medication more often than not so I was a little skeptical but as I've learned about the disease I've really come to understand myself the extent of the problem.

DAVID ESSEL: And I know from the experience I have of traveling some and speaking that there will be people that you would not know right off the bat that are battling serious depression that can hide it and work and function ...

DR. PINSKY: Well the same applies to addiction or any other major ... we, for what ... I mean all ... why we can talk about diseases of the heart but we can't talk about diseases of the brain is bizarre to me. I mean it's like it's time we came out of the dark ages and we know so much about brain function. We even know why that nine year old can play the piano they way he does.

DAVID ESSEL: I'm going to ask you to hold that thought and you're going to come back and give us the answer there. 1-800-743-8000. We're talking to Dr. Drew, of course, from Love Line and we'll have him back and speak in just a moment or two, 1-800-743-8000. Awesome to have you on board. I'm David Essel. Stay right there.

[END OF TAPE]

Thank you.

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