

Elyn Saks

The renowned doctor and author comes to Portland to talk about mental health and her own experience with schizophrenia



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STAFF WRITER

One day, when she was 16, Elyn Saks abruptly got up from her desk, walked out of her classroom and left school. She headed home, but she could not explain to herself why. As she passed the houses in her neighborhood, the houses spoke to her – insulting, hostile words that reverberated in her brain.

Elyn Saks will be speaking at the Oregon Law & Mental Health Conference, Friday, June 16 at the Doubletree Hotel, 1000 NE Multnomah St. in Portland. More information is available at olmhc.org.

breakdown. Another decade would pass until Saks could manage her illness with the proper medication and therapy.

Schizophrenia is a psychotic disorder chiefly characterized by the inability to discern reality from delusions and hallucinations. Less than one percent of people live with schizophrenia, and it is one of the most misunderstood and stigmatized of mental illnesses.

Saks has dedicated her career to advocate for people with severe mental illnesses; she argues that, with the right medical resources and support networks, they can live with increased independence, dignity and happiness.

Saks is now a lawyer and the Orrin B. Evans Professor of Law, Psychology, and

It was Saks' first experience with psychosis and living with schizophrenia. She continued to experience intense delusions, and during her first semester attending Yale Law School, Saks was hospitalized and restrained to a hospital bed for the first time. A few years later, while at Oxford University, she experienced a complete psychotic

Psychiatry and the Behavioral Sciences at the University of Southern California's Gould School of Law as well as the founding director of the Saks Institute for Mental Health Law, Policy and Ethics. She also holds positions at the University of California, San Diego, the New Center for Psychoanalysis and the Keck School of Medicine.

Her academic and legal writing focuses on the intersection of law and mental health, but in her memoir, "The Center Cannot Hold: My Journey Through Madness," she recounts her personal struggle living with schizophrenia and how she learned to live the life she wanted to live. A TED talk she gave in 2012 about living with the illness has been viewed more than 3 million times.

Despite her many academic and scholarly accomplishments, she considers avoiding hospitalization for three decades her proudest accomplishment.

Saks will give the keynote speech at the Oregon Law & Mental Health Conference in Portland, June 16. The conference is a project of the Mental Health Association of Portland, an all-volunteer, nonprofit organization supporting recovery from mental illness and addiction.

Amanda Waldroupe: *In your TED talk, you said that the schizophrenic mind is "not split, but shattered." What do you mean by that?*

Elyn Saks: Some people think that people with schizophrenia have different personalities, given the word "schizo," which means different personalities. They confuse schizophrenia with Multiple Personality Disorder, which is now called Dissociative Identity Disorder. You're split into different parts or different personas. With schizophrenia, you're confused and disordered. It's as if your mind is falling apart.

A.W.: *How can that sense of confusion and disorder manifest itself, day to day?*

E.S.: When one is symptomatic, you would be having typically delusional thoughts, like 'I've killed people with my thoughts,' or hallucinations. Once, I saw a woman at the foot of my bed. You make word salads – words that are loosely associated with one another. When I was at Yale Law School, I said, "I think someone's infiltrated my copies of the cases. We've got to case the joint. I don't believe in joints, but they do hold your body together."

The best analogy I can give of an active psychotic episode is a waking nightmare, with the confusion and terror. When you have a nightmare, you can sit up in bed and it goes away. There's no such luck with a psychotic episode.

A.W.: *Many of the symptoms you describe, such as making word salads or having delusional thoughts, must be so confusing and scary. What cumulative effect do these symptoms have on a person living with mental illness over time?*

E.S.: It depends on how compliant you are on medication. Some people stay psychotic for the rest of their life. My husband likes to say that psychosis is not an on-off switch, but a dimmer switch. A lot of the time, I'm able to say to myself, "Oh Elyn, that's just your illness, pay it no mind." I might have two or three days going in and out of psychosis. And at the far end (of experiencing severe psychosis), I'll be crouching in a corner and shaking. There are different degrees in which it manifests itself. But for me, for many years, things have gone in the right direction.

A.W.: *It must have taken an incredible amount of work and dedication to be able to manage the illness, and talk about it, the way that you do.*

E.S.: It doesn't feel that way. I've had the illness a long time. I've talked about it. I've written a memoir. At this point in my life, it seems pretty easy, something for which I'm enormously grateful.

A.W.: *In another interview you said, "everyone becomes psychotic in his or her own way." What do you mean by that? And how does the individualistic nature of these illnesses impact the ability to provide good medical care?*

E.S.: To diagnose, you have to have certain kinds of symptoms. They vary. People have delusions, some people have hallucinations. Some people become apathetic and stop working or interacting with people. There are people who become catatonic. That doesn't happen with the drugs that we have now.

A.W.: *You think people with severe mental illness like schizophrenia can live with more independence than many already do. So much of treatment, though, is focused on things like medication and hospitalizations. Is it individual enough?*

E.S.: Some people think that I'm unique. They say there aren't people like me who are as high functioning. That's not true. It's just that the stigma is so great that people (with illness) don't come forward. I think it's a mistake when doctors tell patients with schizophrenia to lower their expectations. I was told to get a job as cashier at a store. I thought to myself, I'm a student. I'm good at it. I like it. If I'm down for a few days, I can make (the work) up. What was more stressful to me is the idea of a constant line of people asking for change.

A.W.: *How can it help for a doctor, who is supposed to provide medical care so that you get better, discourage you from doing something that you enjoy and are good at?*

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