The Benefits and Struggles of a Career in Addictions Medicine: An Interview with Dr. Gabor Maté

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When it comes to the field of addictions medicine in Vancouver, Dr. Gabor Maté is regarded as one of the leading physicians in this evolving field of medicine. Not only does Dr. Maté have over 12 years of experience working in Vancouver's Downtown Eastside (DTES) treating patients living with severe addictions, mental illness, and HIV/AIDS, but he has authored four books, all Canadian bestsellers, on several topics including addiction, mind-body wellness, mental health, and parenting.[2] His most recent book, "In The Realm of Hungry Ghosts", is a #1 national bestseller and winner of the Hubert Evans Prize for literary non-fiction.[2] I had the pleasure to attend a presentation by Dr. Maté to medical students on April 24th, 2013; afterwards, I sat down with him to talk about his career and the field of addictions medicine in general.

Dr. Maté started his medical career by running a family practice clinic for twenty years in East Vancouver.[1,2] For seven of those years he was also the medical co-ordinator of the Palliative Care Unit at Vancouver General Hospital.[1,2] Although he didn't begin his career in addictions medicine until several years into his practice, he always knew he wanted to be a part of this field:

> As a physician I wanted to work where I was most needed, and there was no area that needed doctors as much as the DTES … [also] I recognized some of what I saw [in the DTES] in myself. In fact, I'm not that different. I've had addictions to shopping, or to work … I know what it's like to be driven compulsively and emotionally. I absolutely recognized myself in my clients. I was just more fortunate… I wasn't traumatized like they had been. I was not abused by my parents. I was not left alone away from my family of origin.[1,2]

Dr. Maté's belief that a human being's early interaction with their family has a profound impact on later life is a key theme in his talks and books.[1,2] For instance, he believes that a predisposition to developing addictions may be a result of "adverse childhood events"—including sexual, physical, or emotional abuse often perpetrated by those a child holds closest.[3] He also rebuffs individuals who claim that addiction is a "genetic condition" by using an analogy: "just because an addict comes from a long line of addicts, does that mean it's a genetic disease? What if you [a medical student] come from a long line of doctors? Does that mean there is a genetic predisposition to being a doctor?"[3] However, Dr. Maté does believe that other factors play a role in predisposing an individual to addiction.[3] For example, high stress levels in a pregnant woman (e.g., as a result of abuse) results in increased levels of cortisol that could directly impact the developing fetus, possibly predisposing them to developing an addiction later in life.[3]

An even more interesting concept Dr. Maté raised in his talk is his belief that many individuals with addictions might actually be self-medicating.[3] For instance, the treatment for Attention Deficit-Hyperactivity Disorder (ADHD) is stimulants, but cocaine and methamphetamines are also stimulants.[3] Through their ability to increase serotonin levels in the brain, Selective Serotonin Reuptake Inhibitors (SSRIs) treat depression; cocaine also results in an increase in serotonin.[3] For bipolar disorder, alcohol may have the effect of "smoothing out" the highs and lows that a bipolar individual experiences.[3] Alcohol may also help with social anxiety.[3] Moreover, the rate of opiate addiction is extremely high in individuals with Post-Traumatic Stress Disorder (PTSD); could opiates be managing their anxiety?[3]

Although we discussed the benefits of a career in addictions, I was curious if there was ever a time Dr. Maté regretted his choice. Ultimately, the answer was no; however, there certainly were several occasions where he experienced frustration and anger: "I did [get angry], but that was my responsibility. In my books, I talk about what happens when 'I lose it', but that wasn't because of [my patients], that was because of me. Sometimes I act [on my] own frustrations in ways that I'm not particularly proud about, but I apologize".[2]

Indeed, it is this self-awareness that Dr. Maté believes to be an essential quality in any good physician working with the addicted:

> I see [doctors] with all kinds of characteristics trying to do this work, but I'm not always glad of what I see. Some people shouldn't be doing it—but they are anyways. I think the ideal person will have a lot of compassion, and a lot of self-awareness. We have to be careful, these are really vulnerable people. We

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must be sure to come from a good place, [because] sometimes it's an opportunity for power tripping because they are so powerless.[2]

Asked what the best part of his journey in addictions medicine was, he answered:

I got to know people at a really deep level. To see the growth, the trauma, and the beautiful possibilities that human beings have. To see how human people remain, despite what happened to them. That must be the most positive thing about [my time in addictions medicine].[2]

I want to thank Dr. Maté for allowing me to interview him, and wish him the best in all his future endeavours.

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