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188 — Coping with a Chronic Illness with Psychotherapist
Lori Gottlieb

Amy Morin:
Welcome to The Verywell Mind Podcast! I'm Amy Morin, the editor-in-chief of Verywell Mind. I'm also a psychotherapist and a best-selling author of four books on mental strength. Every Monday, I introduce you to a mentally strong person whose story and mental strength tips can inspire you to think, feel, and do your best in life. And the fun part is we record the show from a sailboat in the Florida Keys! Don't forget to subscribe to the show on your favorite platform so you can get mental strength tips delivered to you every single week. Now, let's dive into today's episode!

It's estimated that about 60% of us have a chronic illness of some kind.

If you don't have one yourself, you probably know somebody who does. Living with a chronic illness can be tough, and it can take a toll on your mental health. Today, I'm talking to fellow psychotherapist Lori Gottlieb about this issue. Lori's been a guest on my show before where she talked about her book Maybe You Should Talk to Someone. If you haven't read that book yet, I highly recommend it. In it, she shares her own journey through therapy, as well as the journey of several of her therapy clients. Some of the things Lori talks about today are how to cope with a chronic illness, how to advocate for yourself, and how to help someone who might be living with a chronic illness.
Make sure to stick around until the end of the episode for The Therapist’s Take! It’s the part of the show where I’ll break down some of Lori’s mental strength-building strategies and share how you can apply them to your own life. Here’s Lori Gottlieb on how to stay mentally strong when you’re coping with a chronic illness.

Amy Morin:
Lori Gottlieb, welcome to The Verywell Mind Podcast again!

Lori Gottlieb:
Oh, thanks so much, Amy. It's great to be here.

Amy Morin:
When we first talked to you, we talked a little bit about your first book, Maybe You Should Talk to Someone. Since then, you came out with a workbook as well. How’s that response been in putting a workbook out into the world?

Lori Gottlieb:
It’s been great. When Maybe You Should Talk to Someone came out, so many people said that they had highlighted and underlined and dotted the pages, and that they wanted to be able to take what they responded to in the book and have kind of a system to move through whatever they were going through. When I did my TED Talk about how changing your story can change your life, I realized that was the workbook, because that's what happened with every single patient in the book.

I'm a patient in the book too going to therapy. With all of us, we had to change our stories. The workbook is really a step-by-step guide to helping people systematically go through and look at the stories that are holding them back, look at the stories that maybe aren't serving them well, and to create more accurate stories in order to move into the future.

Amy Morin:
You did a really good job with it. I've checked it out. I was a fan of your first book where you take us through some of your patients' lives and then we hear the rest of the story of what's really going on behind them. I thought that your workbook was a great opportunity for us to do that for ourselves to figure out, well, what's the rest of the story? How is there more than one way to change our own narrative? I can imagine that the response has been quite good from people who then were able to take themselves through their own story. I've since also read an article with Parade where you're talking about chronic health issues. What got you turned on to start talking about that subject?

Lori Gottlieb:

Well, I have some personal experiences I wrote about in Maybe You Should Talk to Someone where I was going through some health issues, and I kept getting this message from doctors like, "It's all in your head. You're stressed out. You're anxious. Nobody was really taking me seriously." As a therapist, I've treated so many people who have had the same story where they know that something is wrong with their body and people are being dismissive of these symptoms because they're very kind of common symptoms sometimes like I'm really tired, or I feel like my heart is racing, or my weight is fluctuating.

People just assume, well, it's not that big of a deal, or you're not doing self-care. I really want to encourage people that if they feel like something isn't right with their health, that they go to a doctor who is going to take them seriously and really listen and get to the bottom of what is going on.

Amy Morin:

I've worked with a lot of people with the same issue, and I think the statistic is something like physicians have seven minutes to talk to you, to figure out what your problem, diagnose you, and then figure out a treatment on average. Well, in seven minutes where somebody says, "Yeah, I have these vague symptoms. I can't sleep. My appetite's change," they often end up in our therapy offices because sometimes it could be depression or anxiety, but sometimes it's an underlying physical health issue. I know
as a therapist it's hard for me to figure that out too, unless doctors are doing testing and at least looking at other options.

Lori Gottlieb:
And also I think there is a mental health component to this. People end up in our offices partly because of what they're experiencing, but partly because the experience of being dismissed leaves you feeling very alone and scared because you know something isn't right and you're almost being talked out of that. There's this cognitive dissonance going on. And then the people around you, your friends, your family, they'll say, "Well, did you go to a doctor?" And you'll say, "Well, yes." "Well, what'd the doctor say?" "Oh, everything's okay. I need more sleep, or I'm stressed out." But you know that's not right. There's the emotional toll that that takes as well.

Amy Morin:
There's also the issue of the unsolicited advice from the friend or family member who says, "You know what you need to do? Drink more water, or you should really manage your stress better." You hear those things and you think, yeah, but that's not what's really going on, or those things aren't going to be helpful to me.

Lori Gottlieb:
And that's why getting a diagnosis is such a relief. I think two things happen when you finally get a diagnosis. I think as therapist we always say name it to tame it, whatever it is that you have. When you name it, like I'm anxious or I have depression or whatever it is, at least there's a name for it and now you have a strategy and a team and support and you know what you can do. The same thing with a chronic illness. Once you know what it is, now you can come up with a treatment plan. Now you can work with doctors who specialize in that particular disease.

Now you can get your family and friends to understand how they can support you. I think there's the relief part. I think the other part is maybe there's a grief component to it, which is that now I have this thing that I need to learn how to live with because it's going to be with me. Some days I'll feel pretty good and some days I'll struggle quite a bit, and
to really learn how do I empower myself around this and also deal with the loss of the self that I knew going forward.

Amy Morin:
Oh, that's an important point, because I will have people that will say that. Like, "Okay. The good news is I now know what's wrong with me. The bad news is it's a chronic illness, or it's something that I'm always going to have to live with. Life isn't going to be the same. The hope that I have that this would go away maybe is gone." How do we work through that grief?

Lori Gottlieb:
I think you have to be able to sit with it and let it sit side by side with taking control of the situation. So many people feel like, "I don't have any control over this. The disease has control over me." I think one of the ways that we can do that is to write in a journal or write a letter. There's a campaign right now for thyroid eye disease, which is also called T-E-D or TED. I think just for context, people with Graves' disease, 50% of them will have TED. TED is a completely different diagnosis, and a lot of doctors don't realize that. You have double vision or you have problems with your vision. You have eye pain and people think it's just part of Graves', but it's not. It's really important to get the right diagnosis.

But I think writing to your illness, whatever you have, whatever your chronic illness is, I think it gives you so much control over the narrative to say to the disease everything you have wanted to say to it. There's a campaign where you can write to DearTEDLetters.com and you can write specifically to your illness, but the other part of it is you can read what other people have written to the same illness. I think one of the things that happens with chronic illness is people feel so isolated. Like no one understands this specific symptom or this specific way of living with this specific thing. I think when you read other people's letters you realize, A, I'm not alone, other people deal with this too, but B, here's how they're empowering themselves. It's like you have this community of people who are finding hacks, finding ways to manage what they're dealing with. I think if you don't have that community, it can feel incredibly isolating.
Amy Morin:

A couple things are. Obviously the internet, one of the great things about the internet now is we can find a community of people. You might not know anybody personally with the illness or the struggles that you have, but you can always connect with somebody across the globe. But the idea of a letter, that's an interesting one. As a therapist, we sometimes hear about people that will say or therapists that work with somebody maybe with an eating disorder and you write a letter to your stomach, like a body part. But the idea of writing a letter to your illness is interesting. What might you write in this letter?

Lori Gottlieb:

I think people write all different kinds of things. They can write about how angry they are at what the disease has taken away from them, and they weren't really able to express that in any other way. I think a lot of people are afraid of hearing the parts that people struggle with when they have chronic illness. People try to make it sound like, "Oh, it's okay," or they try to make them feel better as opposed to really acknowledging there are a lot of different layers to this. I think that it's okay to feel sad. It's okay to feel angry. It's okay to feel frustrated that today I'm having trouble driving because my vision is bothering me and it's not safe to drive today. What does that loss feel like?

There are a lot of different things that you might experience and you can write about all of that, but you can also write about how you're not letting TED dictate who you're going to be and what your identity really is, that you're still essentially you. Here are all the ways, TED, that I've got the support team. I've got these doctors, and I'm doing these treatments. I've got my family and friends around me. Here are the hacks that I've learned so that you don't keep me from doing the things or experiencing the things in my life that I want to experience.

Amy Morin:

Well, that's an interesting idea, isn't it, to be able to talk about your disease in an external way of, okay, here it is. It affects my life, because so often people become their illness. When somebody says I am a diabetic as opposed to I have diabetes, it shifts their mindset into who they are and what they're capable of accomplishing.
Lori Gottlieb:

It's like this is something that I'm living with, but there's so much more that I also live with.

Amy Morin:

Just the language we use too when we say we're suffering from versus living with something. I used to work at a dialysis clinic in a hospital and people who had chronic kidney disease had to come in three times a week for dialysis. It may take three to five hours. The people who were the most compliant and who did the best kind of looked at it like this as their job was to take care of themselves when they came in. People who just couldn't quite accept that they had it, they were just angry about it where they just wished it would go away, kept their feet stuck thinking, "This is unfair. I shouldn't have to deal with this."

Would sometimes skip appointments. They would be angry about being there and really looking at what they gave up in life. But I feel like in a situation like this, letters could be super helpful to be able to write a letter to what it's like to go through this to get those feelings out.

Lori Gottlieb:

Yeah, absolutely. I think for context too, it's important to know that six out of 10 Americans are dealing with a chronic illness. If you don't have experience with that yourself, you know someone who does, and you might not even know that someone who does. I think that the letter gives this outlet that maybe people don't have otherwise.

Amy Morin:

And that's a good point that we all know somebody who does. When we know somebody who has an illness, we want to cheer them up or give them advice or tell them, "Well, at least it's not as bad as X, Y or Z."

Lori Gottlieb:
Ugh! That hierarchy of pain is so minimizing, right? There's no hierarchy of illness. You have what you have and you have the struggles that you have. I think that the letter is really helpful with that too because chronic illnesses can seem invisible to other people. The symptoms of, "Oh, I'm really tired today," and someone might say, "Oh, so am I." But no. My level of tired is actually something that you might not be familiar with or you don't get it the way that I get it with frequency, duration.

It's different, and I never know when it's going to happen because this is the nature of chronic illness. You know if you don't sleep, you're going to be tired the next day. For me, it can just come on and I don't know when to expect it.

Amy Morin:
Let's say you're the person who is living with a chronic illness. What do you do when somebody else says, "Oh, I can totally relate to that. I didn't sleep well last night either?"

Lori Gottlieb:
I think educating them is so important. You have to remember that they're not trying to be unkind to you or be dismissive above you. They just don't know. The more that we talk about this, the more that people are going to understand what chronic illness is. I think people tend to hide because they feel shame or they feel embarrassed or they feel like no one will understand. But the only way that people will understand is if you educate them.

You can say to them, "This is what I have. I have this thing called thyroid eye disease and here are the symptoms, here's what it looks like," you can do a little printout from the internet if you want, and then they understand, "Oh wait, this is what is going on. This is why sometimes she flakes at the last minute. I didn't realize that she's not flaky, she actually can't come that day. She's not feeling well. This is why this thing was late. This is when she's talking about this thing with her eyes. Now I understand. Wow. And now I can imagine how difficult that is because now I know what she's talking about."

Amy Morin:
What can we do if we have a loved one who has a chronic illness? Maybe we don't understand, or maybe we've been guilty of doing that thing where we minimize it or we try to convince them that we can completely relate or that it's not that bad. What can we start doing instead?

Lori Gottlieb:
I think that we need to learn how to listen for how we can support them. So often when somebody that we love is struggling with something, we support them in the way that we would want to be supported, but we don't bother to ask, what is it that you would like? Because they might want something different. Sometimes they might just want to vent to you. Sometimes they might just want to hug. Sometimes they might want to say, "Hey, I'm having trouble with this. Can you help me think about a way around this so that I can get to this place I need to go, or what I can do about the way that my illness is impacting me this week? Can you help me go to the grocery store today?"

Something very practical. I think it's really important to ask, and you should share your Dear TED letter with your loved ones, because I think it will give them a really good sense that maybe it's hard to verbalize when you're looking face-to-face. But when you have it on a piece of paper to say, "I wrote this letter to my illness," I think it will help you understand how you can support me.

Amy Morin:
Other than with thyroid eye disease, are there other chronic illnesses that have a support network like that where you can write a letter where you can get on there and discuss anything you want to talk about in a forum?

Lori Gottlieb:
I think there are forums all over the internet. I don't know about specific letter writing campaigns, but I do know that whatever you have, you are not alone and someone else is experiencing that. And if you Google it, you will find people who are talking about it and who might also be a little bit ahead of you in the process, meaning they figured out ways to manage it. That would be really helpful for you to have too.
Amy Morin:
Right. And just because something worked for somebody doesn't mean it'll work for you, but sometimes it's helpful just to know, hey, this person has found these three treatments and that happens to work for them. What else do I want to try?

Lori Gottlieb:
Right, or I can ask my doctor about this that I didn't even know to ask my doctor about, or here's a way to get around this kind of thing. It doesn't work exactly for me, but it inspired an idea for me how I can do that in my own life.

Amy Morin:
You talked a little bit in the beginning about the importance of advocating when you see a doctor. We know this is tough to do, right? The doctor can be an authority figure. Sometimes we feel like they're rushing us out of the room. We want to tell them what we think is relevant, or we want to make them happy. I hear from so many people who say, "Well, I went back, I told my doctor I was feeling a little bit better. I wasn't actually feeling better, but I didn't want them to feel bad that this treatment wasn't working."
All sorts of things come up and it's often in the doctor's office. And then the seven minutes go by. We walk away and then we think, "Well, really I didn't get out of that what I wanted to." How do we become better advocates for ourselves?

Lori Gottlieb:
That whole thing I think about the doctor feeling helpless and then you wanting to please the doctor, I hear that all the time. Sometimes it helps to bring someone with you. Bring a family member or a friend who knows what your symptoms are and they've seen it in your daily life and they can go. So that when you feel like, oh, I'm backing down a little bit here, they won't back down. They'll say, "No, I've seen this. I see what this person is going through. We're not leaving here until we understand more about what the next steps are for how we can get a diagnosis."

Amy Morin:
I like that idea. Bring somebody with you. And then how do we know of when to see somebody else? When to get a second opinion? Because I think so many people are like, "I don't want to offend my doctor. I don't want them to be mad if I go somewhere else."

Lori Gottlieb:
I think that at the end of the day, your doctor has your best health in mind. I don't think your doctor is going to be offended that you went to somebody else. I think that if they don't have the answer, you definitely need to go to somebody who might have the answer. By the way, if your doctor does get offended, they don't really have your best interest in mind. Really it's about the patient and it's about making sure that you are getting the help that you need. The important thing to remember is you really have to believe yourself.

If something is not right, get it worked up and get it worked up to your satisfaction. If you have to go to somebody else who's going to listen and going to run more tests and is going to really investigate this and dig deeper, then that's what you need to do. This is your life and your health and you need to take control of it.

Amy Morin:
Absolutely. What about when you have these vague symptoms? Maybe some sleeping issues, some appetite things. You don't have a lot of energy. Your doctor says to you something like, "Well, it's probably just stress or that's normal at your age." What do you do then?

Lori Gottlieb:
You can say, "You know, this doesn't feel normal to me. I know myself and this doesn't feel normal. Compared to other friends my age, they are not experiencing the same kinds of things that I'm experiencing. I really feel like this needs more attention."

Amy Morin:
I like that. That's a really easy response, but it's hard to do sometimes in the moment, right? As a therapist, I often work with people about advocating for themselves. But probably a month ago, I was at the doctor. I said, "Hey, there's something wrong with my arm." She said, "Just don't lift weights for six weeks." I said, "I've already waited six weeks. I haven't lifted any weights." Her suggestion was to wait six more weeks. There was a part of me that was going to say, "Okay. Wait a minute, no." I spoke up and I was able to say, "I think I should just go see a physical therapist. Let's just do that," and then she was very quick to write a prescription so I could go do that.

We got it taken care of within the week. But had I not said anything, she would've let me go home and wait another six weeks. Sometimes that's all it is just speaking up and trusting that we can trust ourselves. When we know something's not okay to speak up, find the courage to do it, and then action can happen.

Lori Gottlieb:

Well, it's true. There's nothing more important than our health. When I say health, I mean holistically, our physical health and our mental health. I think they're very connected. I think that when we say, "Oh, that's not really important. I'll just wait another six weeks and see what happens to my arm," we wouldn't do that in other situations. Why do we do that with our health? Why do we defer so much to other people when we do have knowledge about how we're doing and what our health is like? When something is going on, we know that we don't feel like ourselves. We need to get to the bottom of it.

Amy Morin:

And that's an important distinction that somebody else might be the medical expert, but I'm the expert on myself and only I know when something doesn't feel right, I can give them that information, but they won't know unless I speak up and say something.

Lori Gottlieb:

Like you said, sometimes you have to speak up in a way where they've already given you a suggestion and you say, "No, I need something more than that."
Amy Morin:
Something you said too is how important our health is. We talk a lot about, well, at least you have your health or your health is the most important thing in the world. What about for somebody that has a chronic condition and says, "Yeah, but I actually don't have my health?"

Lori Gottlieb:
I think it's not so either/or. It's kind of both/and. Yes, you're dealing with this chronic condition and all that you have to do to manage that. At the same time, you still are living your life. I think that for some people, they can't hold onto both of those things. It's really important to hold onto both of those things. I feel like chronic illnesses are like weather systems. They blow in and they blow out. Some days it's a big storm and you feel like the storm's never going to end, but you have to remember that it always does. The next day might be different. The next week might be different. And also get support during those times. Go to your doctor and say, "This week is really hard. What can we do to treat this symptom?" Just make sure that you're on top of it all the time and ask for what you need.

Amy Morin:
I like that. Did you ever figure out what your health symptoms were? In the book, you talk about not knowing. Did you ever figure it out?

Lori Gottlieb:
There have been so many different tests that have shown so many different things. The way that I deal with it is I treat the symptoms, and I'm very vocal about treating the symptoms. I think that's really been empowering for me. I don't have to sit there and say, "I don't know what's going on here." We still run tests when I have certain symptoms to see is it this or is it that. There are all different kinds of autoimmune conditions that I may or may not have. It really kind of doesn't matter that much because I'm getting the care that I need. If a clear diagnosis comes to the fore, then I've already been on top of it. It's not like I've been ignoring it.
Amy Morin:
Oh, that's interesting. To be able to talk about that uncertainty too, because I think sometimes people feel like, until I get an absolute answer of exactly what it is, I can't rest comfortably. But to know that sometimes maybe that's the solution is to say, "If a symptom pops up, I'm going to treat that." You might not know the exact name of it and that's okay, and you can live with that uncertainty.

Lori Gottlieb:
Well, I think there's certain things that we just don't know yet medically. There are lots of different ways that our bodies don't work well. But I think that there is some relief for people who do get a clear diagnosis like you have thyroid eye disease. Well, now I know what to do because there are specialists in thyroid eye disease who know how to help with the symptoms that you have with your vision. It can be very jarring. Our vision is so important. When there's something that's not working right there, it impacts everything you do all the time. When you have someone who's a specialist in that and they know exactly how to help you, that's really important.

Diagnosis does matter. I'm not saying it doesn't. I'm saying that sometimes we live in uncertainty. But when you do get that diagnosis, it can really feel like a relief because now you can really take control and say, "I'm going to the people who know how to treat this." There are specialists for all of these things. I think with thyroid eye disease, so many people are just, "Oh, you have Graves' disease and that's what this is." Now what I'm trying to raise awareness around is whatever chronic illness you have, if it doesn't sound right, keep digging because so many people with thyroid eye disease are not getting the correct diagnosis.

Amy Morin:
And things like chronic fatigue or fibromyalgia, things that can be hard to explain. There's all these different symptoms, but there's not like a definitive test that will tell you that you have it. I know so many people that say, "I think I've been diagnosed with this. I don't know if it's accurate. I don't really know what to do about it." They don't really know when you keep searching for answers versus when do you just accept it?
Lori Gottlieb:

Well, yeah. I mean, I've been diagnosed with both of those, and then some people will disagree. I think the important thing is that I do get care when I need care and I'm very on top of it. I think the other part is self-care, that when you are dealing with a chronic illness, and I think self-care gets bandied around on Instagram as something that I'm not talking about right now. What I'm talking about is how do we care for our health more generally? How do we be healthy people even if we are dealing with a chronic condition?

Are we getting sleep? Are we eating right? Are we getting exercise when we can exercise in a way that works for us? Do we have emotional connection? Do we have social support? All of the things that matter for our well-being, we want to really be on top of anyway, whether or not you have a chronic disease, but especially if you have a chronic disease. Are you taking care of yourself?

Amy Morin:

I'm a big fan of having people too when they have a lot of different symptoms just figuring out a way to track it, whether they have charts or logs or something, just to then know, are you getting any better? You might not notice that your sleep has gotten a little bit better over time because it happened so gradually. But when you can look back and say, "Yeah, I was struggling more last year or six months ago," and you can see some of those changes in improvements too.

Lori Gottlieb:

And also to really notice the small victories. I got a great night's sleep last night and that felt really good, or today I had lots of energy. That felt really good. Today, I went outside of my comfort zone. And even though I wasn't sure if I could do this, I did that and that felt good. I really think celebrating the small victories on a daily basis really helps you to have perspective.

Amy Morin:
Oh, I think so too. I like that. When do you recommend that somebody go to a therapist and talk to somebody?

Lori Gottlieb:
I always say that if you are asking yourself whether you should go see a therapist, that's your inner therapist telling you that you should go see a therapist. Because I think that people have a lot of misconceptions about therapy. They think you go to therapy if something is terribly wrong emotionally, like you're having the equivalent of an emotional heart attack. The problem with waiting that long is that first of all, you've suffered unnecessarily for however long. But the other part is now we got to get you back to where you would've been if you had just come in when you first asked yourself that question, should I go to therapy?
And now things have gotten much worse. It's like with your physical health. If you're having chest pain, you wouldn't wait until you were having a heart attack. You would say, "Okay, something's wrong here. I'm going to go in." I think if you're having any kind of discomfort physically, emotionally, go see the appropriate healthcare provider.

Amy Morin:
That makes sense to me. Because I know sometimes people will say, "Well, my doctor said it's all in my head. But if I go see a therapist, then I'm kind of proving it's all in my head, so I don't want to talk to somebody," and they dig in their heels and hesitate to do it.

Lori Gottlieb:
I get that completely because that was the message that I got too. I was like, no, this is not that kind of problem. But the thing is, you go to a therapist and what you get there is you get someone who actually hears you and understands you, and then can help you advocate for yourself. It's not like you're going to go to the therapist and they're going to say, "Oh yeah, the doctor was right. You're crazy."
What they're going to do is they're going to really help you understand, "Well, it sounds like you need to go to somebody who's going to listen to you and do some tests. It
sounds like you need to go to somebody who's going to send you to a specialist, and it sounds like you need to speak up and here's how you can speak up. Let's practice that in here."

Amy Morin:
Yeah, absolutely. Sometimes just having those conversations where you practice saying, "Okay, when the doctor says this, what might you say," makes it seem so much easier when you're right there in the moment. Well, Lori Gottlieb, thank you so much for being on The Verywell Mind Podcast and sharing all of your wisdom with us again.

Lori Gottlieb:
Oh, my pleasure. Thanks so much for the conversation.

Amy Morin:
Welcome to The Therapist’s Take! This is a part of the show where I'll break down Lori’s mental strength-building strategies and share how you can apply them to your own life. Here are three of Lori's strategies that I highly recommend.

**Number one: name it to tame it.** When talking about how to manage symptoms, Lori said, “Name it to tame it.” You’ve heard this on our show before. We talk about how putting a name to something, like an uncomfortable emotion, takes a lot of the sting out of it. The same can be said for having a name for an illness. That's true whether it's a physical health issue or a mental health issue.

I've seen so many people breathe this huge sigh of relief when they're told they have bipolar disorder or borderline personality disorder. They often feel relieved to know that there's a name for the symptoms that they've been experiencing. While some people never really get a clear diagnosis, working toward one can be helpful. You might find some relief in knowing that you aren't alone in what you're going through. Even if you've had a lot of people say your symptoms are a mystery or they're all in your head, don't give up.
**Number two: write a letter to your illness.** I love that Lori suggested writing a letter to your illness.

It's a really good idea. After all, you don't have a person to be angry with or a specific moment in time to grieve things that you've lost when you have an illness. Writing a letter to your illness might help you work through your emotions in a helpful way. We use letter-writing in lots of different ways in therapy. Sometimes people write letters to themselves that are just a kind letter, something we've talked about on the show before, so that they can boost their mood when they need it the most. At other times, people write a letter to a body part.

Someone with an eating disorder might write a letter to their stomach, or someone who struggled with a substance use disorder might write a letter to an organ that they've damaged. I've seen how powerful this can be for people, so I think writing a letter to your illness could really help too. You don't have to share it with anyone or post it online if you don't want to, but you might find that reading it to loved ones or to your therapist helps too.

**Number three: advocate for yourself.** I'm glad that Lori talked about the importance of advocating for yourself, but I know it's really hard to do. You might have a doctor or a specialist who talks fast, tells you the plan, and then walks out of the room.

It's hard to ask questions. You might feel like you're bothering your doctor if you call to ask a question in between appointments, or you might feel silly asking questions about things you don't understand. But I can't tell you how many people come into my therapy office saying things like, "I have no idea why I'm taking this medication." They weren't sure what the medications were supposed to do or why they were prescribed. I've worked with plenty of other people who thought that they might have been diagnosed with a certain condition, but they weren't really sure because it was never explained to them.

It's tough to tell a doctor when something isn't working as well, like to say, "Hey, that medication you prescribed doesn't actually help." But you know your body, and you're the expert on yourself. It's important to speak up and share what's working and what isn't. If you struggle to ask questions, bring someone to the appointment with you if you
can. A loved one might be able to speak up on your behalf and help you get the information that you need. Remind yourself it's okay to ask questions. It's important to speak up, and you're deserving of your doctor's time so that you can get the information you need to make the best healthcare decisions for yourself that you can.

Those are three of Lori's strategies that I love: name it to tame it, write a letter to your illness, and advocate for yourself.

If you know someone who could benefit from hearing this message, share it with them! Simply sharing a link to this episode could help someone feel better and grow stronger.

Do you want free access to my online course? It's called 10 “Mental Strength Exercises That Will Help You Reach Your Greatest Potential.” To get your free pass, all you have to do is leave us a review on Apple Podcasts or Spotify. Then, send us a screenshot of your review. Our email address is podcast@verywell.com. We'll reply with your all-access pass to the course!

Thank you for hanging out with me today and for listening to The Verywell Mind Podcast! And as always, a big thank you to my show’s producer (who does a good job taking charge of his health), Nick Valentin.