

HEALTH AND STRESS

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STRESS & LAWYERS: MORE THAN JUST MISCARRIAGE OF JUSTICE?

KEY WORDS: lawyers, job stress, gender differences, stress and miscarriage, breast and ovarian cancer, hypertension, heart attacks, white coat hypertension and atherosclerosis

In ancient times, wise men and rulers like Solomon made decisions based on either their interpretation of existing laws, or what they thought was just. It's not clear when the practice of law actually became a trade or profession, but it would seem that except for fictional TV heroes like Perry Mason and Ben Matlock, lawyers have never been very popular.

"Woe unto you, lawyers! for ye have taken away the key of knowledge" says the New Testament. In his 1509 *Praise of Folly*, Erasmus described lawyers as "the most self-satisfied class of people, as they string together six hundred laws in the same breath, no matter whether relevant or not, piling up opinion on opinion and gloss on gloss to make their profession seem the most difficult of all. Anything which causes trouble has special merit in their eyes."

A century later, Shakespeare suggested in the Second Part of *King Henry VI*, "The first thing we do, let's kill all the lawyers."

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And, as Jonathan Swift explained: "I said there was a society of men among us, bred up from their youth in the art of proving, by words multiplied for the purpose, that white is black, and black is white, according as they are paid. To this society all the rest of the people are slaves."

Voltaire complained, "I was never ruined but twice - once when I lost a lawsuit, and once when I gained one." Lawyer bashing has been a popular sport ever since, as evidenced by some of the following more recent examples. (These are quite mild compared to numerous others we have collected.)

Lawyers are like rhinoceroses: thick skinned, short-sighted, and always ready to charge.

Changing lawyers is like moving to a different deck chair on the Titanic.

The judicial process is like a cow. The public is impaled on its horns, the government has it by the tail, and all the while the lawyers are milking it.

The best description of "utter waste" would be a busload of lawyers going over a cliff with three empty seats.

Why does the law society prohibit sex between lawyers and their clients? To prevent clients from being billed twice for essentially the same service.

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*The Newsletter of
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A lawyer is defined as someone who is trained in the law, and especially one whose profession is advising or representing others in legal matters. The practice of law was formerly considered to be a very dignified and honorable occupation. Very skilled and wise lawyers might go on to become judges, an even higher status. In English courts, judges and lawyers were separated from the rest of the participants in a trial by a railing, or bar. Accredited lawyers, or "members of the bar", had the right to use Esquire after their names. This old term, meaning "shield bearer", was used to refer to a member of the gentry just below the status of a knight. In the U.S., Esquire (Esq.) is still reserved for lawyers, or certain high status public officials.

However, the connotation of words can change dramatically. Being called a "politician" used to be a compliment that implied statesmanship and high principles and foresight in dealing with matters affecting the public. Today, it infers scheming and opportunism for personal gain. Being a lawyer now similarly often insinuates being a shyster, or someone who uses unethical or tricky methods to achieve results. Adjectives such as attorney, advocate, barrister, counsel, counselor, or officer of the court are often utilized as euphemisms to create a more favorable impression, but can be confusing.

An attorney is anyone who acts on behalf of another, so many lawyers describe themselves as "Attorney at Law". In England, a lawyer who deals with clients is called a solicitor, and one who pleads for them in court is designated a barrister, or in Scotland, an advocate. In the United States, the Supreme Court and some jurisdictions also make a distinction between an attorney and a counselor. The former applies to lawyers who conduct the formal parts of the suit, and the latter to more senior individuals who provide advice in some particular area of their expertise. While all of these may specialize in different branches of the law, the public perception is that most are involved in a profession primarily devoted to making money, rather than seeing that justice is done. The portrait of a patrician in a powdered wig, pleading a case in a polite and scholarly fashion, has been largely replaced by a picture of Johnny Cochran, F. Lee Bailey, or some other flamboyant, mercenary showman. Some of these hired guns seem willing to use every trick of the trade, with little regard for the guilt or innocence of their clients, as long as their hefty fee is paid.

Job stress is clearly the leading cause of stress for adult Americans, and lawyers in general practice may be particularly affected. "No fault" auto accident and divorce procedures have cut sharply into their income. Increasingly educated and sophisticated clients now often opt for colleagues with particular expertise in contract litigation, divorce proceedings, or drawing up wills to avoid Federal and State taxes. Growing and fierce competition is a major problem in some cases. Although the U.S. has only 5% of the world's population, it has 75% of all the lawyers on earth, and one third of all billings emanate from Manhattan.

However, job stress is not limited to those practicing in urban areas. In one survey, more than one out of ten lawyers in North Carolina admitted that they had contemplated suicide at least once a month. A Johns Hopkins study found that severe depression is more common in lawyers than in 103 other occupations. Therapists who specialize in treating stressed-out attorneys confirm that a common problem encountered is that many lawyers

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chose their profession because of its prestige, and the opportunity to correct injustices. But the status and dignity associated with being a lawyer has progressively declined. Like doctors, many also chose their profession because they wanted to help people. The big difference is that in order to do so, lawyers must often deliberately hurt someone else. Many become disenchanted because they have to sacrifice their altruistic ideals in order to survive. Some who join large firms find that they now have a different set of principles to adhere to that puts the bottom line first. Those in solo practice must constantly compete for clients, and in their struggle to survive, cannot afford the luxury of spending time that does not produce income.

This often means developing a nastier and more aggressive attitude, which conflicts with their usual values and personalities. As one noted, "Nobody ever says they want a nice lawyer. It's 'I want a barracuda, I want a real throat slasher'." The problem of this personality/job conflict may be heightened because law firms tend to recruit scholarly and often introverted, thinking-type individuals, who performed well in law school. However, once they are hired, they are then required to engage in extroverted-type activities, like drumming up business, beating up on an adversary, or other assignments they resent.



"As your attorney, Charlie, I feel it's my duty to tell you that you can't afford me."

Job stress is greatest in those who perceive they have considerable responsibilities, but little authority. Other factors are not being able to express your emotions and get things off your chest, little opportunity to use your talents to their full potential, or to derive any pride of accomplishment from your work because you have no control over

the finished product. This is a particular problem for many young lawyers who spend long hours doing extensive research, and in churning out lengthy reports for senior partners. These may never be used, and even when they are, appropriate credit is rarely acknowledged. In addition, they are often treated like children, and rather than having one boss, may be at the beck and call of numerous partners with conflicting demands and priorities. A frequent gripe is that the work itself is too detail oriented, dull, or obsessional because of splitting hairs over the precise meaning of certain words. As one lawyer complained, "It's hard to get passionate or derive pleasure from that."

Strong social support in the work place is a powerful stress buffer. However, despite the camaraderie that appears to exist in popular TV shows like *Law and Order* and *L.A. Law*, lawyers seem to have a lack of collegiality. Some law firms are now the size of major corporate headquarters, and more often, there is an atmosphere of back biting as competitors scramble to climb the ladder in order to make partner. This is a particular problem in large organizations where partner means sizable financial rewards, as well as security. "Every man for himself" may be true literally, as well as figuratively. Female lawyers appear to be at a distinct disadvantage, both with respect to adverse health, as well as fiscal consequences.

Job Stress, Female Lawyers, And Miscarriages

The causes of miscarriage are poorly understood, although stress has often been implicated as an important contributor. There are numerous old wives' tales and anecdotal stories associating emotional stress with increased contractions and precipitating premature labor. A very recent report seems to support this. Australian researchers found a high correlation between premature delivery, and increased levels of stress related corticotrophin releasing hormone (CRH). In a study of some 500 mothers, those who miscarried or delivered prematurely, had much higher levels of CRH earlier in their pregnancies, compared to others who delivered on or after their due dates.

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More than 10% of U.S. babies are born prematurely, and are therefore at increased risk for lung disease, mental retardation, and other potential problems. The hormonal response to stress involves a cascade of events that is initiated in the hypothalamus by CRH. Hypothalamic CRH promotes the production and release of pituitary ACTH, which in turn, stimulates the adrenal cortex to secrete excess cortisone-like hormones. These reduce resistance to infection, and can cause an increase in blood sugar that could contribute to diabetes.

One study of 5,000 cases designed to evaluate possible causes of miscarriage, found that women under extreme stress were at much greater risk, even when all other factors had been taken into consideration. A variety of stress measures were assessed, including spousal and social support. The most significant predictor was a high antecedent life change event score involving divorce or severe family disruptions. This alone was associated with a 50% increase of risk of miscarriage!

In another British report, women hospitalized for spontaneous miscarriage were matched for age, health, and parity, with healthy pregnant controls who went on to have normal deliveries. Both groups were interviewed, and rated for measures of known predictors of miscarriage, as well as stress levels. Here again, stressful life change event scores proved crucial. Researchers found that the miscarriage moms were more likely to have experienced a "severe life change event" in the three months preceding miscarriage, or "life events of severe short term threat" in the two weeks immediately prior to admission. More than half of the miscarriage group had experienced at least one of the above before miscarrying, compared to only 15% of controls. Having fewer close social contacts was also significantly associated with a higher risk of miscarriage, again confirming the stress buffering effects of strong social support. Other stressful risk factors included childhood maternal separation, and poor reported relationships with partners.

Numerous surveys have confirmed that job stress is far and away the leading source of stress for American adults. As might be expected, a variety

of reports have also linked high levels of job stress with an increased incidence of spontaneous abortion. In one survey of 4,000 pregnant employed members of a prepaid health plan, information on occupation, psychological stress, physical exertion, social support, at work and home, magnitude of life change event stresses, pregnancy worries, and other potential contributors to miscarriage were rated. Job stress was also evaluated by the best validated measure, which compares the degree of demands and responsibilities, with the amount of control or decision making capability. Stressful work was particularly associated with an increased risk of spontaneous abortion in smokers over 32 during their first pregnancies. In another study of almost 6,000 pregnant women, Danish researchers found that those with high life change event scores, or who felt they had high stress levels, were 76% more likely to have premature births! Here again, this usually involved the death or significant illness of a family member, or an increased number of arguments with a partner, close relative or friend.

From all of the above, one might suspect that female lawyers would be at especially increased risk for miscarriage. A recent report now confirms this, and provides additional insights into some of the factors that may be responsible. Researchers found that women lawyers working more than 45 hours a week were five times as likely to experience high stress in their jobs, and three times more likely to have a miscarriage in their first trimester, compared to others working less than 35 hours a week. As the senior author noted, "women traditionally have had to juggle the responsibilities of both work and home, putting in extra hours to meet the demands". However, long hours at work appeared to be much more hazardous to health than working the same amount of time at home.

Almost half of all married female lawyers spent more than 20 hours a week on domestic work, and a slightly smaller percent spent more than 70 hours a week on combined work and home duties. Nevertheless, there was no evidence that more domestic work contributed to perceived stress on the job. Indeed, married women reported less stress

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on the job, when compared to those who were single, and spent much less time on work duties at home. Working more than 45 hours per week on the job proved to be a strong predictor of both higher stress levels and miscarriages, even after taking into account all other contributing factors, such as age, smoking, alcohol intake, and history of previous miscarriage.

In this particular study, researchers investigated close to 600 women who had graduated from law school between 1969-1985. Information was obtained about their place of employment, legal specialty primarily engaged in, work hours both on the job and at home, tenure, age, marital status, satisfaction level, etc. Self-perceived stress at work was determined by responses to the question, "When working, how often do you feel tense, stressed, or high strung?". Responses ranged from "all", "most", "much", "some", "a little", or "none" of the time.

Almost half of the respondents reported feeling stressed at work "much, most, or all" of the time, and this was highest (63%) in those working more than 45 hours a week. High stress levels were most commonly found in female lawyers who had achieved partnership and/or associate status, specialized in criminal law and litigation, and had worked up to five years at their present job.

Work overload is a well documented, widely acknowledged source of stress in the legal profession. After graduation from law school, young lawyers typically spend the first five years of their careers working to achieve associate status. It is a highly competitive work environment, especially for women. A prior study of over 3,000 male and female lawyers by the American Bar Association, found that nearly half worked over fifty hours a week, and another 34% between 40 and 50 hours. While they tended to work slightly fewer hours than their male counterparts, female lawyers were twice as likely to feel more job stress, because of office politics and intrigue, back biting, sexual harassment, lack of appreciation and/or respect by fellow workers and superiors, and less likelihood of advancement. Men adjust much more readily to the need to be highly aggressive and competitive. Such changes in personality and behavior are often es-

sential to attract clients and win cases, so that they can make more money for the firm, and thus advance faster up the slippery ladder to make partner.

In an effort to accommodate their work demands, most working women tend to marry and have children later in life. Many may never become pregnant, which may put them at greater risk for cancer of the breast and ovary. It is well established that the earlier a woman becomes pregnant or has her first child, the less likely she is to develop breast cancer. This protective effect of pregnancy is thought to be related to a reduction in prolactin, a pituitary hormone that stimulates breast tissue growth, and promotes breast cancer in experimental animals. This may partially explain the current increase in breast cancer rates, since the percent of women having their first child over the age of 35 has quintupled since 1970. Single career women have fourteen times more deadly ovarian cancer than a matched group of homemakers. In this study, 60% of those reporting high stress at work felt that it would not be to their advantage to have a child in their current position, and 50% of all of those surveyed said it would be "somewhat to very difficult to do so". In contrast, only 26% of female lawyers who perceived they had low stress jobs responded in this fashion. Of particular interest, was the incidental finding that more than one out of four indicated that they had no knowledge of the company policy with respect to maternity leave. Career issues were so important, that getting pregnant had apparently never even been considered!

Hypertension, Heart Attacks, Cancer And Job Stress In Women

In addition to miscarriage and malignancies, stressed out female lawyers may be at greater risk for other health hazards. One study of over 700 working pregnant women revealed that those who had little control over their work, were more than twice as likely to develop high blood pressure than pregnant counterparts who felt more secure. In another, even women with high status jobs like lawyers, but little control over their schedules, had triple the hypertension rates of other workers at all levels without this complaint. A very recent report

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also shows a link between job stress with depression and hostility in women. Researchers at Duke found that women who were not satisfied with their jobs because they felt either overworked or under challenged, scored significantly higher on standard measurement tests for depression, anxiety, and hostility, compared to those who had a more manageable work load and a greater sense of control over their jobs.

Previous studies have shown that hostility, depression, as well as anxiety, are associated with an increased incidence of heart attacks. This risk can be lessened by reducing job demands, number of hours worked daily, instituting flex time, allowing more work at home, liberal vacation and time off policies, providing time and space for regular exercise, meditation, or other stress reduction strategies, etc. However, such options are not likely to be available to female lawyers, especially those who are not self-employed.

Paul J. Rosch, M.D., F.A.C.P.
Editor



"In this version of Frankenstein, the monster receives the brain of an attorney and terrorizes the townspeople with frivolous lawsuits."

Is White Coat Hypertension Really Harmless?

So-called "white coat" hypertension refers to an elevated blood pressure reading found only when individuals are under stress, which frequently occurs in anxious patients when measurements are made by a physician. An unexpectedly high blood pressure is not uncommonly found in healthy, young individuals being examined for routine purposes, such as applying for an insurance policy. Decades ago, experienced physicians would usually suggest lying down and relaxing for ten minutes, or more, if

necessary, after which repeat measurements were invariably lower and usually normal. Because of the frenetic pace of contemporary medical practice, busy doctors are less likely to take the time to go through this procedure. Others are concerned about possible malpractice suits arising from failure to treat a potentially dangerous condition, and find it safer and more advantageous to simply prescribe some antihypertensive agent and arrange for a repeat visit.

A not uncommon scenario is that the patient then becomes increasingly concerned, particularly if a relative or friend has hypertension, which has been widely characterized as "the silent killer". On the next office encounter, anxiety and blood pressure levels are apt to be even higher, leading to a larger dosage or additional medication. On successive visits, blood pressure recordings are likely to remain high, especially if the pills cause side effects such as headache or weakness, which the patient now attributes to a worsening of the condition. Another contributory factor is that patients may be talking while their blood pressure is being measured. Blood pressure regularly shoots up as soon as we start to speak. These elevations are not blocked by any antihypertensive drugs, and beta blockers actually increase this rise.

Hypertensive responses to stress vary considerably, and at times can be alarming, especially when associated with breath holding. Blood pressures as high as 400/230 have been recorded in elite weight lifters when they strenuously hold their breath for sustained periods of time. However, in the absence of a strong family history, there is no good evidence that they are at greater risk for developing strokes or permanent hypertension. Marked hypertensive responses to emotional stress, talking, breath holding, or immersing a hand in ice water for a minute, are all believed to be exaggerations of a normal reaction. In general, they have been considered to have little prognostic significance, except for some reports that there might be a link with a higher incidence of subsequent coronary heart disease.

Over 50 years ago, a two year follow-up of 38 patients, showed that physician blood pressure measurements were repeatedly higher than those ob-

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tained by the patient or others at home. This was attributed to "the excitement and tension associated with the visit to the clinic or doctor's office." More recent studies confirm that 15-30% of individuals with repeated elevated office or clinic readings have normal blood pressures on ambulatory blood pressure monitoring and home self-measurement. Indeed, it has been suggested that up to 40% of individuals being treated for modestly elevated blood pressures (diastolic 90-104), are essentially normotensive. The consensus of opinion has generally been that the vast majority need not be sentenced to a lifetime of drug therapy that could significantly impair their quality of life, or have adverse long term consequences.

However, some reports now suggest that white coat hypertension may not be so benign. In one six year study, 75% of white coat hypertension patients went on to develop persistently elevated blood pressures. This tended to occur more in older patients, and particularly women, perhaps because of hormonal changes related to the menopause. In another ambulatory monitoring study of over 100 patients with white coat hypertension, about one third had permanent hypertension after three years of follow-up. Those with the highest blood pressure readings at the beginning of the study, or who had the largest fluctuations in office measurements, appeared to be at greatest risk. However, these findings may partially reflect the normal age related increase in the incidence of hypertension. In addition, it is not clear whether drug treatment could provide any benefits, since this does not appear to significantly affect ambulatory blood pressure readings in white coat hypertensives.

The real hazard of white coat hypertension may be its contribution to accelerated atherosclerosis and coronary heart disease. It has been well established that emotional stress has a far more potent effect on elevating blood cholesterol than dietary fat intake. Conversely, it now appears that high cholesterol individuals are at greater risk for stress-induced hypertension. Mental arithmetic tests were administered to normotensive individuals with high cholesterol and controls with normal cholesterol levels. The elevated cholesterol group had slightly increased blood pressures at baseline,

but during the mental stress test, they had much higher systolic pressures than age matched controls, and these elevations correlated with their cholesterol levels. The mental stress test was repeated after the high cholesterol group had been treated for 6 weeks with either lovastatin, a cholesterol lowering drug, or placebo, in a cross-over designed study. The lovastatin group had a 26% average reduction in cholesterol and significantly lower baseline blood pressures, compared to those receiving placebos. In addition, their blood pressure elevations during the mental stress test were identical to those seen in normal cholesterol subjects, suggesting that lowering cholesterol may be beneficial in the overall control of hypertension.

At the recent annual meeting of the American Society of Hypertension, Italian investigators reported that white coat hypertension patients also had more blockage of the carotid arteries with atherosclerotic plaque, as well as abnormalities in the heart's ability to relax between contractions. Using sophisticated ultrasound techniques, researchers in Scotland similarly found that even though patients with stress related hypertension showed no structural abnormalities, they exhibited the same decrease in arterial elasticity and cardiac dysfunction seen in age matched controls with persistent hypertension. Since these disturbances can be reversed by early treatment, they argue that drug therapy could reduce the likelihood of future disability and premature mortality. However, this can only be confirmed by long term clinical trials.

Deciding which white coat hypertensives require treatment, how early this should be instituted, or what constitutes optimal therapy and endpoints, are still very thorny and controversial issues. Such determinations must obviously be based on careful individual observation and periodic 24 hour ambulatory monitoring. Unfortunately, such testing is expensive, and often not covered by insurance companies. A more practical and possibly equally effective approach might be to teach patients or family members how to take blood pressures at home in less stressful settings, as well as controlling cholesterol and other possible contributory risk factors.

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BOOK REVIEW

Science and Human Transformation: Subtle Energies, Intentionality and Consciousness, William A. Tiller, Pavior Publishing, 1997, Walnut Creek, CA, \$24.95.

Subtle energy medicine refers to a wide variety of psychophysiologic phenomena and observations that cannot be explained by our current concepts of physico-chemical laws that regulate biologic activities. There is no longer any doubt about the power of the placebo effect, or the role of a firm faith and strong social support in improving prognosis, or even causing spontaneous remission in patients with cancer and other fatal disorders. It is equally clear that infinitesimally weak magnetic fields, light, and sound energies, can have powerful effects on cell growth and transformation, central nervous system and immune system function, as well as mood and emotions. The clinical application of these feeble forces has already been demonstrated by the beneficial results achieved in far advanced malignancies and cardiac disorders, accelerated healing of bone and soft tissue injuries, and the successful treatment of drug resistant depression, anxiety, insomnia and pain.

Can such effects be achieved by similar subtle energies generated internally? Individuals proficient in a variety of eastern disciplines can display remarkable control over skin temperature and pain perception, or start and stop the flow of blood from wounds at will. Incredible feats of strength and endurance are often seen in ordinary people when under severe stress, or in a hypnotic state. Acupuncture points that have been known since antiquity, have now been shown to have electrical characteristics different from surrounding skin areas, even though no distinctions can be seen with electron microscopy. The energy

characteristics of these specific sites can be influenced by mental processes, and energy fields emanating from healers can be readily demonstrated through Kirlian and even conventional photography. The powerful external force of *chi* energy, and the ability of some well established healers to produce voltage surges of 100 volts and more in subjects who were several feet away, have been illustrated at our annual International Montreux Congress on Stress. How can all of these well validated observations be explained? Are they interrelated?

Dr. Tiller has been a pioneer in the field of subtle and psycho energies, and has published over 50 scientific papers and several books during the past 35 years. This contribution represents a distillate of scientific research in this area, and integrates this knowledge into a comprehensive theory of how it relates to creative life forces operating throughout the universe. Such energies have previously been described as *Qi* (*chi*), bioplasma, orgone, animal magnetism, Odic Force, archaeus, spiritual healing, faith, and love. Now, for the first time, Dr. Tiller has described how this power can be harnessed to improve our health and quality of life, and how properly applied consciousness can produce myriad psychophysiologic effects through previously unappreciated pathways.

This remarkable offering distinguishes itself from numerous other publications on such subjects because of its solid scientific background, and the author's impeccable credentials. It is a landmark contribution to our appreciation of the awesome potential for self-healing, and the intricate interrelationships between man, and his external and internal environments. It is quite impossible to do justice to it in a review of this length, and cannot be recommended highly enough.

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