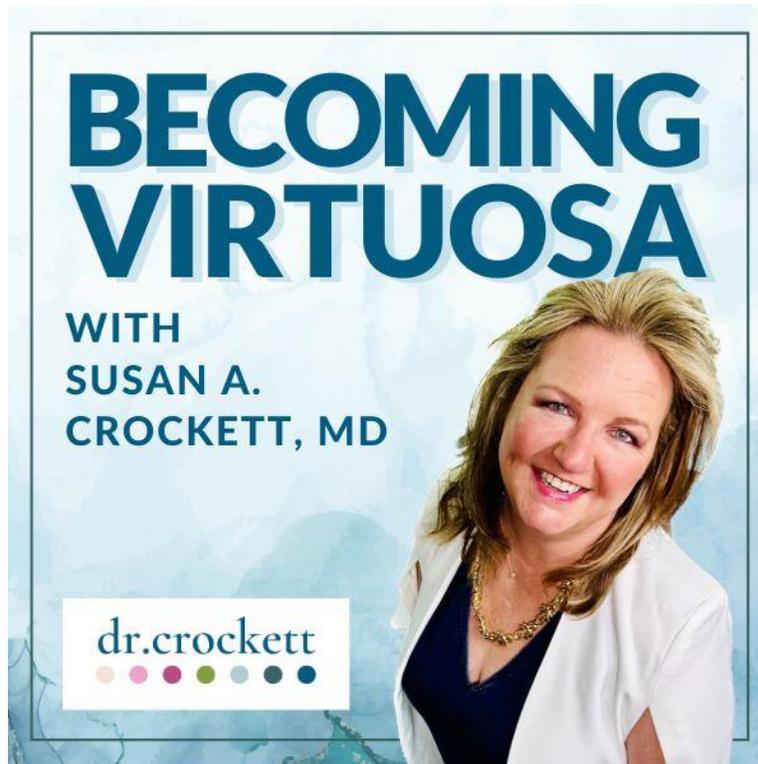


Ep #86: Good Grief: Leveraging Your Brain After a Loss



Full Episode Transcript

With Your Host

Susan A. Crockett, MD

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So, we had a conversation about this thing called complicated grief and how that is a very normal part of going through life. Life is rarely black and white, and what I think is more often than not our grief is complicated.

Welcome to *Becoming Virtuosa*, the podcast that encourages you to become your best virtuosa self. Each week Dr. Susan Crockett goes where the scalpel can't reach, exploring conversations about how to be, heal, love, give, grow, pray, and attune. For the first time ever, she's bringing the personal one on one teaching that she shares with individual patients to you on this broader platform. A weekly source of inspiration and encouragement designed to empower you.

By evolving ourselves as individuals. We influence and transform the world around us. Please help me welcome board certified OB-GYN specializing in minimally invasive GYN surgery, internationally in the top 1% of all GYN robotic surgeons, a certified life coach, and US News top doctor, your host Susan A. Crockett, MD.

Welcome back to *The Dr. Crockett Show*. I'm your host, Dr. Susan Crockett. If you're new to the show, let me introduce myself. I am a board-certified OB-GYN practicing in San Antonio, Texas, the great state of Texas. I practice minimally invasive GYN surgery. That is robotic surgery mostly and got all kinds of fun things going on in my life.

I told one of my friends this week that I feel like I'm getting pinched through the hourglass. Do y'all feel like that ever? See that hourglass there? I feel like I'm moving from one way of living to another. I've got a bunch of transition happening right now, and I feel like I'm getting pinched right in the middle of that.

But good things are coming. So stay tuned. We've got lots of developments for the show. My practice is building a new office and a new outpatient women's center that's opening within the next month. In the middle of all that, I've been going through some significant grief over the last couple of weeks.

Dr. Crockett presents [Becoming Virtuosa](#)

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So the title of today's segment is Good Grief. I really feel like that all the way around. I think grief is a really important topic for us to talk about. This became so much more relevant to people around the time of COVID. I know I saw it with my patients. It's a difficult topic to have a conversation about or to do a show about. So I thought I would take it on today.

So I wanted to start just by talking about what grief is. It's defined as mourning the loss of something or the absence of someone or something. In my life, I've got a pretty amazing life. I've got an incredible life, actually. I have a great practice and amazing friends and family and a little doggy who adores me. So, so much abundance in my life. That sometimes people look at me and they don't realize that I've also gone through a lot of grief and hardship and loss.

So my backstory is that I started off my pregnancy, well should I say my pregnancy story with a miscarriage after seven years of infertility. Actually had to go through an infertility treatment to get pregnant. So my whole OB story, I was an obstetrician. I couldn't get pregnant. That loss that comes along with the loss of an expectation of a pregnancy was something that I felt with my first pregnancy. Then I was fortunate enough to go on and have four beautiful children who are mostly grown now. They're really great kids.

But that was probably one of the first major losses that I had in my life, but I've also had a couple others. I've had two divorces and neither one of them were easy. I went through the unexpected passing of my first husband, the father of my children, seven years ago. That was devastating.

We're going to talk about the losses that come from loss of businesses. I had a prior practice that went under, and that was my, I joked that that was my MBA in real life. I got a degree through the School of Hard Knocks with that. Recently, as many of you know, my father passed away. He had been ill for a long time. That grief that surrounds him and our relationship actually was a very prolonged grief for the last four years or so.

I have grief over the loss of money. I've lost money. I've made money. I've lost friends. I've made lots of friends. A lot of women in my age, especially

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coming into my practice, they're mourning the loss of their youth or the loss of their health. I see that a whole lot in my practice. So I think it's really interesting for us to have this conversation about grief and how we deal with it and some of the nuances around it that maybe you haven't thought about before.

So in this past week, I had a surgery. I had a patient, a young woman in her 30s come in through the emergency room. She had an ectopic pregnancy or a tubal pregnancy. An ectopic pregnancy, for those of you that don't know, is when a pregnancy lodges incorrectly in the fallopian tube instead of in the uterus.

When it lodges in the tube, it's lodged into something that's about as narrow as my pinky finger. The pregnancy, when it starts to expand, it basically does a blowout of the tube and can cause the mother to hemorrhage. It's a life-threatening situation for her. It is always a non-viable pregnancy. There is no way to implant this pregnancy into the uterus correctly. If we could do that, we would be doing that procedure a lot.

So this is a complicated grief story because the woman had a high expectation for this pregnancy. It was a wanted pregnancy. At first, it was an unwanted pregnancy. Then she found out she was pregnant and changed her mind and decided it was a wanted pregnancy. Then she came in with the life-threatening condition to her health, met me very quickly, went to the operating room, and had surgery.

So she was grieving the anxiety of losing the pregnancy. She was grieving the loss of control over what happened around her body and the ectopic pregnancy. Then when I met with her the following day, we talked about some of the differences between grief and depression and sadness and suffering.

So I kind of wanted to use that as a lead-in for you about differentiating these four things. When I see my patients back for their one-week visit after having a miscarriage or an ectopic pregnancy, a lot of times we talk about depression.

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Because postpartum depression, which is a specific type of depression, can happen after any type of pregnancy. So we commonly think of it as happening after a full-term pregnancy, but it can happen after a miscarriage or a tubular ectopic pregnancy. Depression is different than grief. Grief is different than sadness. Sadness is different than suffering.

I'm not going to go too much into the really detailed clinical stuff. I'm not a psychiatrist. In my show and the way I talk with you in the camera is I'm sharing with you in very, very practical terms how I talk with my patients and try to make sense out of this for them and for me too.

The grief of losing a wanted pregnancy is grief. It's the mourning the loss of something that you wanted or that you expected. That grief is a normal part of the loss. Sitting in the lamenting and the sadness around that is a normal part of grieving something that didn't happen the way you expected to go.

But that's not supposed to go on forever. We're supposed to recognize the loss, process the loss for however long it takes, and then we're supposed to pull ourselves together and move on for what is living or what we do have. I think most of the time we get to that point on our own.

There is a specific type of grief called a prolonged grief disorder where grieving goes on for more than six months. Personally, I don't think it's very helpful for us to put timelines on it, whether it's six months or a year or 10 years. People need to grieve.

But I think the part that I'm trying to emphasize is that we were not made to sit in a permanent state of grief. Just like when we grieved the loss of our freedoms and what was happening with our health during the times of COVID, we were not meant to stay in that forever. We were meant to recover. We were meant to have resilience. We were meant to pack that up and keep it in our hearts for what it is, but then pull it together and move on with our lives in the direction and the future of happiness and joy and fulfillment with what we have.

So when I talk with patients about the difference between grief and depression, depression I think of more as a biologic term. It does have a

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specific definition in the DSM-5, and you're welcome to go look that up. But in general when we think about clinical depression, I'm thinking of it in terms of a chemical imbalance in the brain. Is there not enough dopamine? Is there not enough serotonin? Does somebody need the nutrients like the methylfolate to help bump up those neurotransmitters in our brain that help us feel better?

So when we think about depression, as clinicians, we're looking more for things like an inability to find pleasure and things that normally give you pleasure. Weight changes, either weight loss or weight gain that were not intentional. We think about a prolonged unhappiness or prolonged sadness.

In the case of postpartum depression, there are more extreme levels associated with a psychosis and weird thinking and weird thoughts, and that's not what we're talking about here nor are we getting into the discussion about self-harm. That's not part of this discussion either.

So when I'm talking with my patients who have experienced a pregnancy loss, for instance, or the loss of a family member, very often I talk with them about the difference about depression symptoms versus grief symptoms. We encourage counseling with their pastor or their minister or counselor for either one of these conditions.

I certainly support the use of medications when it's indicated for depression. There are really great medications available out there. If you're somebody who's dealing with depression and you need help, I would encourage you to seek the help of your physician as well.

Let's talk a little bit about sadness. So we have depression, we have grief, and then we have sadness. Sadness is just the emotion. We've talked before about how emotions are vibrational energies in our body. They are literally neurotransmitters creating energy between our neurons and sensations that we're able to feel in our body.

So sadness is very commonly associated with very lower vibration, heaviness, pit in the stomach, physical sensations like that.

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Sadness is an emotion of, well, the opposite of happiness is not being able to find joy in things or feeling down or blue or having pervasive thoughts of things that are not bringing you joy and happiness in your life. The main purpose of *The Dr. Crockett Show* is to go where the scalpel doesn't go and help you find joy and healing in your life. So if we can talk a little bit about what happiness isn't or joy isn't then we can understand better about what it is.

Like I've said before, neither emotion is good or bad. Emotions are neutral. They are also yin and yang. Like you can't fully understand what light is without darkness. You can't fully understand what happiness is without sadness.

The last part of this that I'm going to talk about, we've talked about depression, sadness, and grief. The last part of this little four-part discussion about emotion surrounding loss is the concept of suffering. So suffering is what we see when our brains start to argue with what reality is versus what we would hope it is or what we wanted it to be.

Suffering is something that's created in our brain as we argue with reality. That can happen with any of the other things. You can have suffering along with grief or depression. Actually, you can have all of them together. But suffering is the one piece where if we're able to look at it, like we teach ourselves to step out of our brains and look at what our brain is thinking.

If we can recognize it as a problem where our brain is just sitting there arguing with a reality that isn't then it makes us able to look at what the reality is and to come into alignment with what the reality is. That is what ends the suffering. You still may have grief over the loss, but the suffering, which is the prolonged arguing about what happened or what didn't happen is something that is completely in the control of our brain.

Oftentimes, I see patients that come in, and they're having a grief reaction for something that they lost or they don't have or they didn't ever have, but they're making it worse because they're sitting there arguing in a place where there's no way out of it. There's no way to make that better. You

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can't go back and fix history. They don't have a place where they can change the reality. We sit there, and we have a conversation about what suffering is and how suffering is something that we do in our heads. It's compounding the grief.

Let's talk a little bit about compounded grief. Compounded grief is when you have multiple levels of grief, multiple events that happen over time that stack up. So, for instance, let's talk about somebody who had COVID and then something else happened. I'll give an example of what happened to me this week.

I was in a funk still grieving what was going on with the loss of my father. Then I was driving back into town. I got a flat tire. So then I was angry and pissed off at the car and the tire. I was grieving the fact that I was driving a car that's not my normal car and that I had lost my other car in an accident a couple months ago. That if that hadn't happened, then I wouldn't have had the blowout.

I was dealing with compounded grief, compounded things that had happened that didn't go the way I wanted them to go, the loss of several things right in a row. You know what? I'm fine. My car is fine. I took it, got the tire fixed. But I recognized in that moment that I was dealing with several incidents that had stacked up quite close to each other.

When you see that happening in your life, sometimes bad stuff just kind of piles up. It's important for you to be able to step back and say oh, the reason I'm having such a hard time keeping it together or keeping my emotions with margins of energy and on track are because I'm taking multiple hits all at once.

When that happens, it's really helpful for you to sit down and give yourself some grace. Just sit down and take a big breath and just get a rest. Like give yourself grace and quit thinking of all of the should've's and could've's and the suffering that you're causing, which is the next layer of compounding on top of that grief. Let it go. Accept what is. Do what you can with what you have and keep going on.

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The last type of grief that I want to talk about is complicated grief. So complicated grief is something that happens when somebody has both a happy feeling about it, like a relief, and a negative feeling about it, like sadness about the loss.

So I see this a lot in patients when, for instance, I had an elderly patient recently who had a partner who had Alzheimer's, and they had had an amazing 50-year marriage. It was really incredible story. She told about how they'd met on Pike's Peak. I mean, it was just a really cool story. Yet she had taken care of him for many years as he descended into Alzheimer's.

So when he passed, it was a complicated grief for her because she had true happiness and true relief that he was no longer suffering and that she had relief from not having to continue to wear herself out taking care of him. But she was also dealing with the opposite emotion of the sadness of missing him and the grief that comes along with mourning the loss of somebody that you love and the times that they had.

So we had a conversation about this thing called complicated grief and how that is a very normal part of going through life. Life is rarely black and white. What I think is more often than not, our grief is complicated. Definitely that ectopic pregnancy patient that I talked to you in the beginning of this segment, that was definitely a complicated grief.

I'm going to challenge you as you go through your life in the next months and days and weeks and you look at examples of grief, I want to challenge you to see if you see anything that's a real pure grief. I'm going to bet you're going to find more often than not it's complicated with feelings that we usually see as opposite but that we're holding space for together. That's a really cool thing that we're able to do as humans.

Last thing I'm going to leave you with is what to do when you are suffering from the loss of someone or something, the grief that you're having from the loss of something or someone. I'm going to give you a little

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tool to help you come to terms with it and to be able to take what you need to to move forward with your life.

That is I want you to think about what you loved about that person. What was it about them that made you happy? What was it about them that made you feel special and inspired? Or what was it about that situation that gave you joy? Then I'm going to challenge you to take those things and incorporate them into your own life.

If you had a special friend that you lost, and she was special because she always made you laugh because she watched, I don't know, TikTok videos or something then maybe one way of dealing with that loss is for you to incorporate watching those TikTok videos into your life and remembering her or the levity that she had. I bet you can think of other examples.

So I'd like for you to challenge yourself when you're dealing with a grief to think of the things that you lost, what did you love about them, and how can you incorporate that into your being in your life and continue to transform and grow through the pinch of the hourglass to the other side? Take care, my friends. I will see you next week on *The Dr. Crockett Show*. Love you.

Thanks for listening to this episode of *Becoming Virtuosa*. To learn more, come visit us at DrCrockett.com, or find us on YouTube for the Dr. Crockett Show. If you found this episode helpful or think it might help someone else, please like, subscribe, and share. This is how we grow together. Thanks, and I'll see you next week. Love always, Sue.