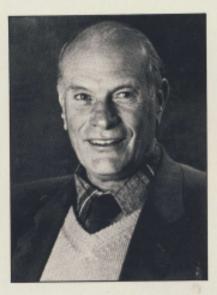
Patient Education Column

Let me explain

by Dr Howard Botha



Marital Pathology

I know these two young people. John and Liz both come from broken homes.

This couple recently got married and would not like to make a mistake similar to that of their parents.

They have been under my care since childhood. Now, having entered adulthood, they set a value on the deeper things of life.

"We have lived through a sad experience", John began. "It is not that we are ungrateful. Both of us have had an upbringing that was sheltered in many ways. We are, however, determined to let our marriage succeed."

"We have come to you because we know you are impartial", Liz adds. "A few nights ago we saw a television programme dealing with marital breakdown. One of the participants used the term 'marital pathology'. What does this mean? Can it be repaired, can it be prevented? When is a marriage not remediable?"

In trying to formulate my explanation, I can't resist reviewing the sad history of two well-known families. As their family doctor, I ought to have foreseen the dangers.

So verduidelik ek

Lesers word uitgenooi om hulle standpunt oor enige aspek van gesondheidsvoorligting aan te bied vir hierdie rubriek.

Whatever could have gone wrong? In both marriages no mentioning of a third person, no extra-marital adventures. On the surface, both couples were very near to each other, a mutual affection that was striking. For unknown reasons they started drifting apart until they literally hated each other, bitter and wounding remarks were used. I failed to pay attention to what is referred to by family therapists as "alarm bells ringing loudly". I could kick myself. John's mother began to come with complaints that became lingering and which I labelled vaguely as chronic pelvic infection. Then John's father came with symptoms suggesting peptic ulceration. On further questioning, he accused his wife of becoming very withdrawn, listless and also very suspicious of his motives. He could refute that, most of her suspicions were totally unfounded. Yes, I could kick myself, because in that early stage specific family therapy was indicated. By the time irreparable damage set in, the advice given was ignored. At their request I referred them to different clinical specialists, without any real hope that an organic cause would be demonstrated.

The case history of the parents of Liz has been different. Her dad was a rather good-looking man and full of ambition. Although this was admirable, it sometimes led to a stubborn refusal to listen to advice, and unfortunately his wife derived pleasure from being hurt and humiliated. Her recurrent "migraine" attacks reminded me too late to attempt active family therapy.

The question is bound to be asked whether and how this breakdown has affected these two young people. Up to now none of them have come to me with either somatic or psychological complaints; they have not encountered difficulties at school or university, and for a brief moment they reminded me of what Mary Decker, the American hope for Olympic gold in the 3 000 metres, had said a few weeks before the Games. She had referred to her unhappy childhood and eventual divorce of her parents: "If you come out of things like that in the right frame of mind, you're just more competitive."

Patient education column.

I decided to base my explanation of marital pathology on their real-life experience.

As in most other conditions, giving a definition is much easier than knowing how to heal and especially how to prevent. Marital pathology is characterised by a sustained and persistent tension in the relationship of a married couple. If this tension cannot be reversed, a breakdown inevitably follows. It is impossible for me to discuss all five components of marital pathology — social, intellectual, spiritual, psychological and physical.

John becomes impatient. "Liz has majored in psychology, and what has happened to both our parents, has given us some insight into how to take preventative social and other steps. But we are at a loss when mention is made of the physical component."

"I wish this component were less complicated. There is often no somatic cause for tiredness, headaches, chest pain, other pain or discomfort of gastro-intestinal origin. We also know how existing disorders can be intensified by emotion, by tension.

"But there are purely physical reasons why a marriage can become unhappy. I should perhaps try to identify them as they appear in the various phases of marriage, without letting you forget that marriage is a delightful union in which man and woman can live together in a sexual relationship which meets the approval of their social group. This togetherness should be the in-thing, perhaps the reason why there is no word for "bachelor" in The Old Testament!"

John is apparently not impressed with what I thought was a reasonable definition.

"Doc, it sounds rosy and all that; we are, however, and have as you very well know, for a long time been, acutely aware of the many marital pit-falls and would like it to be spelt out."

"Through all the phases of marital life, marriage depends on healthy lifestyles. It takes two to tango. It takes two healthy lifestyles to guarantee a solid union: eating moderately and regularly; eating a breakfast after seven to eight hours sleep; no cigarette smoking; take some exercise; use alcohol moderately or not at all."

"I am underlining this because you as young people might get the wrong impression that protective health care depends on sophisticated medicines and new surgical techniques. Far from it! In preventive health — and this includes prevention of marital pathology — the modern trend is back to a more natural, humanistic approach. Yes, perhaps jargon! But what it really means is that we try to apply throughout the KISS-principle. Keep it Simple and Stupid!"

Liz smiled approvingly: "Yes, we liked the plain, straightforward talk in the booklet 'You and your Marriage' you gave us. But why is there so much fuss about sexual adjustment today? So much reference to sex therapy? Should every newly married couple undergo this? Where does normal adaptation stop and where does a sexual problem begin?" "You and John need not to be unduly worried. My task as your family doctor is to help you to use your sexuality comfortably and responsibly. Never hesitate to come to me to discuss what might look like something trivial in your sexual relationship. I am used to it; these problems are discovered in 15 to 50% of patients. It is a most rewarding aspect of my practice; where I cannot help, I will refer you for more intensive therapy."

John reacted somewhat tensely: "We regard ourselves as normal in this respect, but what of the danger of falling into the hands of self-styled sex therapists and other forms of quackery?"

"No, what I have in mind is established family therapy units and recognised marriage guidance organisations or therapists."

"Of course, you must give us some guidance on how to cope with the second phase of marriage", Liz almost matter-of fact interrupted. The bond of love between her parents and John's parents started to degenerate from when they were about thirty and the final break came when Liz and John had left home.

"I feel that in so many ways you are well-informed, yes, perhaps painfully informed of the reasons of marital problems in this phase of life. Although it has made you prepared, it would be helpful to be reminded of a few practical considerations:

 — sexual activity does not stop at middle-age and women over 35 should no longer be on the pill, although they would probably have to continue with contraception until they reach 50;

 the role of touch and caressing should never be underestimated throughout marriage;

— older children of married couples might be responsible for conflicts and mistrust, but their parents must reach them before they become mature and especially sexually active."

My receptionist interrupts to announce that my next patient is waiting. A pity time has run out. I almost feel a need for apology, to reassure and make amends, to tell them of the other vulnerable phases of marriage, of the time when their own children will leave home . . .

"Then the day will come when your little nest will be empty again. Preparation for that phase cannot start too early. It might become a period of disorganisation because of chronic illness, serious operations and even death. But even then, medical science has much to offer to restore the happiness of the original one-to-one relationship."

FOR FURTHER READING:

- You and your Marriage. Lay Publications. Medical Association of South, 1979.
- Weinreich, F. Why Family Therapy? Journal of Continuing Medical Education 1983; 1: 57.
- Sapire, KE. Summary of Contents. Journal of Continuing Medical Education 1983; 1: 11.
- Marital Pathology and Counselling. Dictionary of Medical Ethics. London: Darton, Longman & Todd, 1977: 197.