

A Voice, Singing: Reflections on Losing a Colleague to Suicide

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A FEW MONTHS AGO, WE RECEIVED news of the death of our colleague Jack Ruddell, a fourth-year medical student at Brown University. Jack's life ended tragically through suicide, and revelation of the event created immediate shock and devastation in our local medical community. The loss of Jack was deeply saddening and warranted taking a personal inventory of our relationship with him.

Jack was an exceptional classmate and a truehearted friend. We were blindsided by his passing; in a moment, the life of an ambitious young man with innumerable future accomplishments had been halted. As a young student eager to get involved in the Department of Orthopaedics, his quiet but confident demeanor and intense focus immediately separated him from his peers. He appeared wise beyond his years - truly a quick study with amazing natural potential. His meteoric rise with several high-impact publications in just two years of work impressed an array of senior faculty. When faculty encounter a rare student with potential as great as Jack's, we in academic medicine dream of a future colleague, a future partner, a future educator and revolutionary thinker; we selfishly think how great it is for our careers to train such a superstar.

Fellow students knew him as a matchless vessel of positivity, intellect, and life. His soul was vibrant, his laugh infectious. Whether you were meeting Jack for the first time or were a lifelong friend, Jack consistently and unapologetically displayed his whole self. In an environment wrought with feelings of imposter syndrome and an insecure sense of belonging upon entering medical school, Jack's authenticity

rendered comfort and peace. His presence was palpable, and his cheery and charming disposition augmented every situation, good or bad. He was gifted with a tender playfulness which comforted frightened young children in the office and an unrivaled knowledge base well beyond his level of training. Yet, his legacy remained most indelibly in his relationships. "Happy Jack," as he was known to family and friends, touched us all; his sensitivity and sincerity seemed to naturally unmask the emotional disguises of those around him. He filled his life with music and would sing aloud, unprompted, with a voice that immediately brightened any room. With the news of his death came a heartbreaking sense of the loss of this joy in our world.

One must marvel at the mountains Jack was conquering despite the special challenges of struggles with mental illness. Perhaps his shadows had lingered for some time. Jack knew to make much of his relationships with others, and the staying power of his friendship was a substantial force. Yet still hidden to us and many others was a constellation of emotions and thoughts within Jack that remained unroofed by others in his moment of crisis. This realization is the most saddening. It is impossible to say whether anyone could have reached that depth within him, but no one deserved the attempt more than Jack, who had given so much of himself to his friends and colleagues.

We are bound in the obligation of looking after each other. While we cannot try to control the decisions of others around us, we must cultivate a vigilant concern for their wellness and trajectory. Medical training imposes various challenges to our sense of self

and wellbeing, including necessary pressures toward stoicism and perfection. These forces must be counterbalanced by coping skills, most notably leaning on our connection with others. To that end, we must build the bridges for others to walk toward us when they are in need. We may probe when we sense hurting or issue out the sense of our presence when silence is preferred. Ultimately, creating an approachable environment by whatever means is doing the work of protecting the lives of our colleagues, who are humans before they are healthcare workers.

Dismantling the stigma surrounding the conversation of physician suicide promises to yield immeasurable benefit to physicians, and their families and patients. The medical profession is unique in our daily management of life-and-death situations and life-altering tragedies; yet, we are not unique in our personal battles with mental health challenges. Together, we lament the loss of Jack's potential influence on his future patients and his contributions to medical knowledge. But his example has reminded us of our ever-present duty as a reinforcement for others, to constantly build bridges to safety in our professional relationships so that we all may navigate times of trouble together. The bittersweet reflections on Jack's life have lifted our heads and encouraged us to do the same for others. And we will continue to hear his voice, always singing.

The impact of losing a colleague to suicide carries a weight that is both permanent and deeply human. We present our perspectives on the premature death of our colleague as a peer and mentor to memorialize the incredible young man he was, but also to issue

to our community a call to action to establish deep roots with one another. The time is now to begin this difficult, even unfamiliar work together.

While we as colleagues stand as one of the primary layers of defense for each other, we urge physicians and medical students at risk or those who feel isolated to reach out and speak to someone. This may be informally, to a close confidante, friend, family member or colleague, or formally to a therapist, the anonymous National Suicide Prevention Lifeline (1-800-273-8255), or support group. A comprehensive list of local, state, and national resources for Rhode Island physicians and others at risk of suicide can be found on the National Alliance on Mental Illness Rhode Island Chapter website (<https://namirhodeisland.org/resources/national-and-state/>). Therapeutic modalities for depression and mental health issues including suicide have improved and diversified greatly in recent years. Help

is available to all, even in a dark and most desperate hour. May we as a community strengthen our connections so that our lifelines with each other are never far away. From medical students at the earliest stages of training, to physicians and surgeons in long-standing group practices and academic departments, we all have a role to play. Creating a culture of caring, openness, and support is our collective duty; we are the ones to wield this responsibility to protect each other from the known occupational mental health dangers of working in our challenging but rewarding profession. We urge our community to build bridges in our professional relationships, so that a way out is always close at hand, and a kind ear is always ready, to disarm the threats of feeling isolated, abandoned, or distressed. We take great care of our patients everyday; we must also remember to take care of each other. ❖

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