

Anna Lopez: Do we need a medical diagnosis?

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SPEAKERS

Anna Lopez, Katy Weber



Katy Weber 00:00

Thank you for joining me today, Anna. And I was so excited to discover you when you were having a Instagram Live Chat with Elizabeth Brink. And I was just riveted. And I love your perspective and just wanted to have an excuse to pick your brain a little more and to get to know you are so yeah, I love it. So I will open with the sort of my first opening question that I'll ask all of my guests, which is kind of what, how long ago were you diagnosed with ADHD? And what kind of led up to your diagnosis? What were some of those signs that led to actually looking looking into this more?



Anna Lopez 00:41

Yeah, so I was diagnosed last year. So I feel like a lot of people are diagnosed with a pandemic, which completely makes sense. This is a crazy time. Um, but yeah, I was diagnosed at 33. So 33. And, you know, I can't even remember exactly when I was diagnosed, that's ADHD for you. And also living in a pandemic for a year like, well, I don't even know, like, what today is. So I think I was like, diagnosed in May or June of 2020. Like officially, um, and really how it came about, which is crazy, because I work in psychiatry, right? Like, I have people told me who they've had ADHD, I knew what the symptoms were, I knew what the DSM five said, but the symptoms didn't really tell me like what that looked like in a person. And so I didn't know how to, like, attach that to like, a person like,

what what do you experience as an adult, or even as a kid with ADHD? Like, I know, these kids are bounce off the wall or whatever. But like, truly, what does that look like in day to day life, I had no idea. And so the reason I started looking into it actually was for my husband, because my therapist was like, I think he might have ADHD. And like, for a long time, I just kind of dismissed it, or I looked into it a little bit for him. But I didn't really think much of it. And then I was like, I do this thing where I go on the Amazon app, and I just like on a rabbit hole of like going looking at books and like clicking on them, I don't buy them. But I just like kind of do window shopping, internet window shopping for books, and like counseling books and psychology books, because I love books on like trauma and whatever. And so I was like reading different descriptions, and one came up about like ADHD and relationships. And like the difficulties people have with relationships when there's a partner or both partners have ADHD, and I was like, this is a thing. And so like, that kind of just opened up the doors for me where I was like, Wait a second, I don't really understand what ADHD looks like, really, like, if I truly think about it, I don't know what that is. And so I was trying to find examples of what does a person look like when they have ADHD. And so I was like, looking at you do videos, I was reading articles. And I was just like, going all over. And while I was reading it, I was like, Oh my god, that sounds like me. And it like, kind of was not good. Because I was trying to like, I was trying to diagnose my husband, right? Like, haha, this is what's going on with you. But then I was like, wait a minute. I feel like I relate to a lot of these things. And then it but it started to make sense, because me and my husband have a lot of like similar issues, you know, and I've spent years trying to like, figure out how to help myself remember not to leave my lunch at home, like I just packed it, how do I leave my lunch at home? You know, how to remember my badge for work at you know, all these things. And he was dealing with a lot of the same issues. And so I was trying to help him figure out how to help help help them remember these things. Because like, I always had to, like, figure out how to help myself do these things, right? And I was like, Okay, this makes sense. Like, I relate because we probably have the same diagnosis. And so, yeah, I, I just yeah, I went on this like hyperfocus trail for like weeks, just trying to figure out like, what's ADHD? Do I have this or not have this and I was like, I just need to go talk to someone who understands ADHD. And so I found a provider, and like, made an appointment immediately. And that's basically it. That's how I found out and it is definitely, I'm sure you probably relate, or a lot of people probably relate but when you first are diagnosed, you're like, this is like this wave of grief because you're just like, wow, this all of these things that I've struggled with in my life makes so much more sense. Now I thought it was just me. I thought it was my problem. I needed to fix it. And I didn't realize like no, this is just the way my brain is wired. So that's kind of how I got there.



Katy Weber 04:45

And it's not even just these things like, Oh, these memes are relatable because I also forget my keys. I mean there is that sort of element but then once you start to really realize like how far reaching it is and how much of it goes into That, like, I remember, Rachel Morgan trimmer, I interviewed her recently. And she was talking about you know that she calls it a piece of shit syndrome, you know where you're just like that feeling like we're use it almost like you never were able to consciously think about how far reaching this was, and how far reaching that feeling of like inadequacy and brokenness existed in your life, because we were working so hard, we didn't have the time, or the words or the vocabulary to even really kind of label this. And then I think not so much of that grief is like realizing, oh, my goodness, is it? Is it possible that all of this comes back to this one diagnosis like that is mind blowing?

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Anna Lopez 05:47

Hmm, yeah, it is. It really is. And it's just like, and, you know, it would be one thing if, like, you didn't have a diagnosis, but you just learned how to accept your quirks and like, Oh, this is how my brain You know, this is how I am but like, I always was, like, I can do better. I like, Why don't keep forgetting. Like, why don't you do it, you know, like, you just keep going, like, I should be able to do this. Other people do this, why am I not able to do this? And it's just like, and then you realize, oh, like, this is actually a thing. Like, this is my brain. And it is true, like, You work so hard. You're working so hard, you're so tired. And everyone says they're tired. But like, you're like crawling on the floor, when you get home, you know, because you're just exhausted from trying to fit in and mask and you have, yeah, you have no idea because that your brain is wired differently than your other co workers, the other students in your master's program and all this stuff, it just, it's just mind blowing to know that you like went this long without knowing or like being able to have combinations or being able to just be able to accept that things work differently for you. It's just crazy. Yeah,



Katy Weber 06:55

I remember going to my husband and I both had a strep throat. And he was complaining and complaining and complaining about how much it hurt. And I was like, Yes, my foot my, my throat also hurts, but I think you're being a little like, Man coldish about it. And, and we went to the doctor, we both had our throat swab, and he was just like, would not let up about how terrible it was. And the and the technician was like, yeah, hers is actually way worse. And it was like this moment of objective, like validation that I was that, you know, it's like when you hear somebody complaining about a headache, and there's always that part of you that wants to switch bodies to be like, is it as bad as you say it is?

Or Yeah. Or do I just complain less? And it was this moment of validation? Where I was like, No, you just complain less. But I think it's that same thing of like not being able to have a gauge, when it comes to struggling like is this normal struggle? Am I struggling? harder? am I working harder? I don't know. Like, we don't have those answers. And we desperately need them. When it comes to like, defining ourselves, I think probably Yeah, more. And it's so funny. Like,

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Anna Lopez 07:59

I don't know, if I would have gone to a psychiatrist, you know, eventually, and have figured it out if it wasn't for this whole pathway through like my therapists and Amazon apps and stuff. But it's so funny, because like, probably a year or two before my diagnosis. You know, I'm working in psychiatry, I'm seeing people who have like bipolar disorder, and I'm like thinking, I have similar symptoms to mania, but I know I don't have bipolar disorder, but like, I can, like, be very hyperactive, and I can't stop moving. And, you know, and I actually made an appointment, or I was going to make an appointment as soon as I address and then when I got off the waitlist, and I could make an appointment like You know what, I think I'm okay, I don't need to make what is like so funny, because it's like, I could have had the diagnosis a year or two earlier. But at the same time, it's like, what I really have accepted it or understood it, then, you know, so it's almost like, I got to it when I needed to because I actually was curious to understand what does this mean? What does this look like?



Katy Weber 08:56

Yeah, that is also fascinating to me, because it was suggested to me by my therapist for like, two years that I had ADHD and I was sort of like, Hmm, interesting. I must look into that at some point. Like, it didn't like land with me. Until the pandemic when I really just like imploded. And then and then she kind of pressed me to like you should you should look into this in terms of like, you should look into treating this, but I still don't really know, like when that switch went off for me from kind of being like, yeah, maybe I do, maybe I don't, too. Oh my goodness, this changes frickin everything. And there's a light at the end. And it's like this three step process. There's sort of like, there's the oh my goodness, this is me. I'm relating to this. And then there's the self diagnosis part where you're sort of like, yeah, this is definitely something I need to look at. They're like, I definitely have this. I need a doctor's confirmation. And then there's the after diagnosis, you know, it's like these, but I still don't really know what it what was that like solitary moment where I switched over from like, Hmm, interesting literature to like, Oh my God, this defines me and every fiber of my being

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Anna Lopez 10:07

so yeah, it's crazy. But I think like, that is just an, I feel like that's a human experience with a lot of things, especially if like, when I was doing my internship in counseling, because I also have my Master's in counseling. And when I was doing my internship, you know, you can say things to somebody you can like, or even people can like you, your clients can say stuff to you, too, like they can say, they can have some insight to something, but they really, it doesn't really click with them. And it can take weeks, months, years before they really click like they're talking about these things. But they really don't get it at a deeper level for such a long time. And it's just, that's just how we evolve, I don't know. But I think like, every step, though, every time your therapist said something, or every time my therapist said something, it really does help kind of like, solidify it a little bit more to be like, Wait a second, I need to like think about what she's saying a little bit like more? or What does this actually really truly mean? Like, you need all of those tiny little steps to finally kind of let it click, I



Katy Weber 11:10

think so when you were talking about the bipolar? I feel like I definitely related more to that idea before I was diagnosed. And I think I feel like I've heard that from other guests as well, because there is that kind of swing from hyperfocus to like depression and lethargy and self deprecation or whatever you want to call that state, you know, but it was that it was that drastic swinging of the pendulum that made that I much more related to a possible bipolar diagnosis than ADHD because of the whole, you know, the hyperactivity part. I was like, I'm not hyperactive, I spend, I will literally spend days in bed. staring at my phone doing scrolling and I can't possibly have ad

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Anna Lopez 11:54

Yeah, yeah, it's just weird. Because it's like, yeah, I understood the bipolar disorder, diagnosis a little bit more just because like, I work in psychiatry, so I was like, I don't feel like I don't think I have bipolar disorder. Because I don't have these like, episodes of like hyperactivity for like three or four days or anything. And like, my depression wasn't like i've you know, struggled with depression. But like, even when it was treated, I had like a physical depression. Like, I just don't have the motivation to do things. Like I don't feel like getting up. And it was just what I would call it physical depression, but I didn't realize it was that kind of like, I don't know, that what do you call it in ADHD, just like that, that negative movement, like you just, you're okay, we're just sitting around or even you want to get out, but you just can't you just like,



Katy Weber 12:41

can't it's like a it's like a bodily shutdown. You know, I've like heard it described as, as like walking through mud. I've described it as like walking around and a foot of water like there, but there's just something where it's like, you slow down and it's like, everything just shuts down like you. It feels like you're on he feels like you're underwater.



Anna Lopez 13:03

Yeah, I had a adopter once call it when I was depressed. She called it like, it feels like you're moving through jello, like, yeah, basically feels like that. It's like I'm trying to get everything done, but I'm moving through jello. Yeah. It's not easy.



Katy Weber 13:21

So um, so looking back, as I was also i'm, i'm very, I'm fairly newly diagnosed, I was diagnosed in the fall, but again, it was sort of like, I don't remember the whole last year was a blur. Like I don't remember when it was that my therapist suggestions turned into me really sort of hyper focusing on it and becoming more interested in it, but I didn't actually get the official doctor diagnosis until end of October. And, and it's funny because I see you know, I'm so so many women who I've reached out to interview and say, I'm not officially diagnosed, I'm self diagnosed. Is that okay? You know, especially women in the UK and in Europe, where it could take years to get a doctor's appointment. And there's this sense of like, you know, how important is it to have a doctor's diagnosis because I feel like my journey began long before I got the doctor's diagnosis and I feel like so much of ADHD and so much of treating ADHD is really just knowing you have it and then doing the work that or or knowing what work to do you know, like it's Yeah, and and yes, there is the medication side of it. And there is the you know, you need the doctor to get the medication. But going to the doctor is like so it's such a hurdle. on so many levels. medication is such a hurdle on so many low. It's so cost prohibitive for so many people. And like I'm curious with from your background in the psychiatric field, like how, what is the importance of having a doctor's diagnosis because I certainly felt like I know I needed it I needed the doctor to tell me because otherwise I would have second guessed myself my whole life because that's what we do. We don't trust ourselves. Yeah, but it. But I also felt like so much of the work has starts well before you get to the doctor's office and so many of us know more about ADHD than our medical providers by the time we get to that end prescription. So I'm, I sort of, like, where does that fit in the kind of hierarchy of needs?



Anna Lopez 15:28

Yeah, I feel like it I feel like it depends on the person. Like, mental health out answer, it depends. But it's really that, like, it depends on the person, like, some people really like to have a name a label, like to like, really understand what's going on, so that they can like, dive deep and figure it out, figure out what treatments will help, what interventions will help you know how to go about doing anything extra, like therapy, or even like, what foods will be better for me, you know, I mean, like, some people really need that. And some people don't truly need it. And they're just like, I think I have it, like, I'm pretty sure just from what I can remember from my childhood, and what I'm dealing with now. And they're just trying to find supports online or in person to help them. And so I think it depends on the person, I think like, again, also depends on the like, the environment. So if you're living in a place where that's not very accessible, but you, it would help you to just like navigate the world a little bit better to have a little bit, you know, to have more accommodations, in your, at school or at work, it would make sense to have a diagnosis. But that's like changing a whole like society, though, like, because I know that I think, and France, like it's not really, they just think it's like a, like a disorder for young boys, you know, so it's really hard to like, get a diagnosis as an adult, especially as a female adult. And that sucks. And a lot of people want that or need that, because it would be helpful to them so that they can actually, like, be more successful in what they're doing. Because people just don't understand what they're what they're dealing with. And so yeah, I just feel like it depends on the person depends on your environments. If you actually need an official diagnosis, I had some other thoughts, and I'm trying to think what they were,



Katy Weber 17:29

that's a good point about getting, you know, feeling like you're better able to advocate, especially for yourself or for your kids. I mean, obviously, like having a diagnosis so that you get a 504 for your child is important and that sort of thing, like sort of legitimising something, I just feel like, there's so many ways in which the medical community talks about, like, the dangers of Miss diagnosing, or like, maybe it's not ADHD, maybe it's one of these other factors. And then they list factors that are symptoms of ADHD, you know, like, maybe it's not 80 years, maybe it's just anxiety. And I'm like, if you're not able to see that correlation, then I need a second opinion. Like,



Anna Lopez 18:10

it's so nuanced, right? Like, because a lot of I mean, again, like with the whole media thing, or depression thing, like a lot, they're all similar symptoms, we call them the same things, but they look different depending on what you like, you know, what you struggle with? So you know, anxiety, yes, you can have anxiety with ADHD, but anxiety and ADHD are going

to look different. So it's like also having a competent provider who can actually figure out which one is it? Or is it both, you know, because a lot of people they should have anxiety, like, they can either be anxieties because of the ADHD, or they can be two separate things. And so you really have to know someone have a provider who's good at like, the nuances of Okay, what's, what is it? And also, it's very common to have like comorbid, bipolar disorder and ADHD. And so you have to know, have a provider who knows how to tell the difference in those things, you know? And so it is it is, it's difficult because it is just disorders or it is like things that are happening in the brain. Sometimes we have behaviors, but it is not as simple as like being able to like diagnose high blood pressure, no, right where you can just, you know, take someone's blood pressure three times and be like, you have high blood pressure, we need to like put you on some medication. And so that is the that's the frustrating thing in a way about ADHD, and a lot of like, other psychiatric disorders, because you really do need someone who's competent, and also it just can be a very nuanced and difficult Sometimes it takes me, it takes me a while to be able to see my patient. Like if I have a patient actually has ADHD like I actually have a patient I'm like, ADHD or do so, you know, dissociative disorder, or maybe both, you know, and but really, when it comes down to it, it's can we find medications that are helpful for you? Can we find interventions like therapy that are helpful for you? So even if the diagnosis isn't perfect? are we helping you? Are you getting better? Are you improving? And so I think that's like something that we kind of have to remember sometimes that it is nuance, sometimes you have to change your diagnosis that happens in psychiatry all the time. Someone who has bipolar disorder with psychosis actually has schizoaffective disorder, bipolar type it just like, it happens all the time. And I think we need to be okay with switching. I think some doctors are so rigid. And they're like, no, this is what you're diagnosed with, that they don't want to switch. And we also need to just like almost sometimes get away from like the label and recognize the symptoms and think holistically, what would be helpful for this person. What kind of medications would be helpful, what is not just medication wise, like what also will be helpful, like therapy, you know, nutrition, exercise, whatever. So, I don't know if I answered your question. I feel like I'm rambling.



Katy Weber 21:22

That's what this podcast is for. It's like adulterated rambling. Yeah, I mean, I think that's one thing I like about the neuro divergent community and how interested they are in their selves in their brains and the way that we're always questioning that stuff. You know, like, I love thinking about neuro divergence as just this, like, conveyor belt, or that, you know, this is like spectrum, and everything is interrelated on some level, and things just kind of pop up and pop and go back, and then they pop up, and then you have like, a baby and different things come out. Like, you know, Mo, it's, there's so much but like you said, is nuanced and, and so I'm getting kind of confused by this backlash against misdiagnosis,

you know, because I sort of feel like this is not a medical condition, like you said, like, this is not a blood pressure issue. This is not a medical condition that could be like you clearly need a medical professional who can lead you through the proper medication and etc. Like this neuro divergence that can be treated in so many ways. And sometimes I feel like the if there's a backlash against the the, if you start to bring in this fear that you can somehow Miss diagnose yourself, when so many of us feel like this is the first time in our lives, we feel hope, you know, that we aren't this broken person. There's this backlash against self diagnosis. Like, I just don't understand why that backlash is there. Because it feels to me like with self awareness is part of the treatment, you know, and so, more like, is there this feeling of like, oh, too many people are saying they have ADHD these days. And I'm like, that is great if we could change society and realize that it's not 5% of people, but maybe way more, you know, like, I think it's way more way more than



Anna Lopez 23:15

like the four or 5%. But then again, remember, like, a lot of people are not diagnosed through their whole life, right?



Katy Weber 23:20

So exactly, or later later



Anna Lopez 23:22

in life. So it's way more than the four or 5% I'm pretty sure but



Katy Weber 23:27

and and if you treat yourself like you have ADHD by bringing more structure in your life or exercise, like these are all good things that will benefit anybody that thinks that benefit people with ADHD benefit everybody. So that's the other thing. I feel like there's not a lot of harm in accidentally thinking you have ADHD. So why is there this backlash? Yeah, and I you know, I



Anna Lopez 23:49

go about it with patients saying, like, Look, it's just as important to rule it out as it is to rule it in so if you end up not actually having it this thing that we're, you know, screening for, that's fine. We're really just trying to have a better idea of what's going on. So if you

accidentally Yeah, like if you accidentally diagnose yourself with ADHD and you figure out things that are help you to be more successful in life, and you're not able to access a doctor or medications like I don't really understand the harm. I think there's just like this like elitist attitude in medical community and to me, it's more I love doctors, okay, I'm not a doctor, I'm gonna be a but I think it's more with the doctor community and then like the PA or the NPS, I'm just, it's just, it's just a cultural aspect of doctors, especially in the US. I don't really I can't speak for doctors other in other places. But it's just like, wait, we are the experts. We know we're the ones who are supposed to be diagnosed. You can't diagnose yourself and I don't know. I don't know exactly how that comes about. I like to look into the history of that more now. I'm, I'm curious,



Katy Weber 25:05

I think I think there is that that cautionary feeling of like, it's a slippery slope when people start going to Dr. Google or whatever they call it, you know, like the the web of the rise of what I get, when it comes to medical conditions that this is a dangerous, slippery slope, I just don't feel like ADHD falls into that category. And maybe the medical community is like, it's too dangerous to try to allow some things and not others. So we're just gonna, we're just going to say no to everything. But that is such a neuro typical response, like you think about schools, right? And that is how schools discipline children, which is like one kid is acting out, so nobody gets recess, and you're like, What is wrong with you? Yeah, yeah. So anyway, that's my little soapbox.



Anna Lopez 25:48

Yeah, no, I hear you. And I think like, that is something that I've thought about, like, you know, I've, I've worked in different areas of medicine, and like family medicine, and pediatrics, especially parents will come to be like, my kid has this. And you're like, and I'm like, Okay, I'm trying to hear you and like, understand, and we'll look into it, I'll ask the questions. And then, you know, if I do everything, we do all the tests, we do all the exams and the questions and everything. And I think they don't have it. And I tell them that they're not happy with that answer. And so I think that there's some like, there's a bad taste in medical community's mouth sometimes, because people who don't, are not, don't have great health literacy come to us and say, Hey, I have this, I have this. And you're like, No, you don't even have close to any of the symptoms of it, you know. And so I think that there's, I think that there's some validity, and in the medical community, not liking people self diagnosing. But also, there is a sense that we do have more information about things out there, too. And we are in our own brain. So it's like, we you think we would know a little bit about what's going on? with us? So I don't know. It's it's a catch 22. And I, and I'm a part of both right, like, I see mental health providers, and I also have a mental health provider.

And so so I could see both sides of it. I don't know. But I think like the, the approach, I feel like doctors should take more just medical professionals in general, like Listen here, validate, like, you know, why do you think that you know, and then do what you can to, like, help them either confirm or deny what's going on with them? You know, I have patients who tell me, like, I think I have autism. And part of me wants to be like, No, No, you don't. But then I'm like, Wait a second, I don't know enough to say that they don't like I have to stop myself and be like, let's look into it. Let's ask more questions, or let's get you refer to someone who can like, actually look into that more. And so you can actually have a yes or no answer, if that really matters to you. And so it does take you to like, step back and just be like, Wait a second, let me not just like, let me not just invalidate a whole person just because I'm the expert. You know, like, I went to grad school and spent \$70,000 on something, it doesn't mean that they're wrong. Right. So



Katy Weber 28:13

yeah, interesting. I know, it's not I wanted your perspective so much, because I knew that you were going to have the that like dual perspective. But it's also I don't think it's a question that can be answered in an in an hour on some random person. It's complicated, but I think that there's validity in both sides. For sure. I think it just takes humility on both sides. And it takes I've also, I'm really big into like patient advocate, advocate, advocating. So like, I really want patients to be able to advocate and push for, you know, what they deserve as patient as you know, you deserve good care. You deserve answers. You deserve to like, bring up questions and not be thought that you're stupid for asking these questions or thinking that you might have something so bright. Exactly. And I think self advocacy is already difficult enough for somebody who is who has had ADHD or is seeking out a diagnosis. So that's why I think the subject gets me so frustrated, because I feel like like, why are you not acknowledging the overwhelming mental and fiscal hurdles that people face getting to a dice state of diagnosis? Like why can't we kind of include that in this journey? Yeah, for sure. backtracking a little bit, what are some of the things looking back over your life or in your childhood, especially that you that you look back and you think, Oh, of course, that was that was clearly the ADHD? Yeah, so



Anna Lopez 29:43

when I like went through the whole grief period of realizing I probably had ADHD. Like, I just remember like, a lot of my core memories as a kid. I don't remember a lot of things and I think that's an ADHD things like, are like these negative memories. And I think they had some ADHD element in it. Like they're just one time in the fifth grade. I remember exactly that was the fifth grade, dude. We're like, we're split up into these groups trying to

do this history project or answer these questions on this history thing. And I got overwhelmed. Like, everyone's talking in the room, everyone's trying to figure this thing out in my group. And like, you know, I was a bright kid, like, I got things I did really well in school. But like, that whole element of working in a group and trying to figure something out something out right now, dislike, shut me down. And I just put my head down on the desk the whole time, everyone else was figuring out this project this or these questions. And I didn't participate. I couldn't like it. It was too much for me, like it's too overwhelming. And now I'm like, oh, okay, that makes a lot of sense. Like, I've never been able to do group work like group studying. Like, people can get concepts a lot faster than me. And so I'm like, very behind. And I'm like, I'm, I'm not following. I'm not, I'm not catching on. And so like, I would do worse on a, on a test if I group study because I wasn't keeping up with what everybody else was doing. So I was very much an individual study or all the time. And then what are some other things Oh, just like, in college, I'd rather get like, if someone was like, hey, let's go run around outside at midnight, like, Okay, then go do that. And then instead of like studying or whatever, I just have a hard time making myself study. Like, I need to study, I need to get up, I need to do this. And I just couldn't do it, I couldn't do it. And it will get to the point where it's like, I'm almost about to fail these, this science class, and I'm a science major. So I like have to banish myself to the library four hours a day, just to make myself study just to get myself to study. And so I didn't realize that was ADHD like, no, like, I had no idea. I just thought that I was a terrible student, you know, like, my parents were like, you need to do better, why aren't you doing better. And I had no idea that like me, forgoing studying for fun or like having such a hard time making myself study was a thing. And also, I just like, I think I daydreamed a lot. I really don't know. Probably, I think I like would read ahead in the books. So I wasn't really paying attention to the teachers ever. I got the concepts fast. And so you know, I would just read ahead and just fill out my worksheets and not pay attention. And so I just had a hard time paying attention in class, especially in college and trying to keep up again with concepts. And so in science class, I'm like, I have no idea what they're talking about. And I'm just pretending like I'm writing notes understanding, and I don't know, anything. I don't know what's going on. And so yeah, it's just a lot of a lot of that a lot of that do not understand, like feeling behind. And I've always been very more behind in math stuff do like I do, okay, in math, but it just takes me a little longer. And I didn't realize that was a thing. Like I had a teacher actually, I think in the fifth grade do like, she had to keep me behind at recess to teach me something. And like I like I said, I usually did really well in most everything. And for her to have to take me behind to make sure I understood some math concepts meant that I was not getting it or zoned out when she was teaching it or something for to like keep me behind at recess to make sure I understood it. So That won't do.



Katy Weber 33:27

So now when you were diagnosed, did you try medication? Are you on medication? What's your experience been?



Anna Lopez 33:32

Yes. So I am on medication, like the first one I tried, worked really well at first, but then it just like stopped working. I was like, I'm not gonna hard time making myself move again, like a super hard to like, get going. And so I switch and I'm still trying to figure out the nuances of it. Like, make sure I eat obviously, try to avoid any vitamin C, in it. So it's like, I don't I don't know, I think this is like the common thing for people with ADHD too. It's like, what is working? And what is it? Like how much is okay? And how much? You know what I don't know. It's just it's very confusing



Katy Weber 34:12

to figure I think that's an extension of that idea of like, so many of feeling like, there's so many factors at all times. You know, like, even with motherhood, like I remember always feeling like when I had babies, and I had and struggled with depression and anxiety and always feeling like, I would try something and then be like, Is this working? Is this not working? I don't know. There's so many factors. How am I supposed to be able to tell everything might be placebo? And then then you're like, then it's like, or it's estrogen or like, you're this guy. And then I'm just like, I'll just lie in the fetal position until it passes.



Anna Lopez 34:44

Yeah, is there's a swarm where you're trying to figure out like, Is it enough? Is it not working? How much do I need to did i do i need to ask for more like, so I'm still kind of figuring out. Is it working well enough and also just trying to figure out like what interventions work For me in daily life to make sure like, like you said, like, focus on this one task and stop thinking about the swarm that's over here all the time. And I think that's like, that's one good thing about diagnosis and following up with your provider, is that they can help you, like piece together whether or not the medication is helping or hoping enough. Hmm. And I think that's like something I talked to a patient about recently, too, though, because he, he or she was talking about some medication, like, I can't tell if it's working, I'm like, well, that's why I'm here. I'm gonna ask you questions. And I can like, compare it to what he said to me last time to see if it actually is making a difference. And they're like, Oh, yeah, that makes sense.



Katy Weber 35:36

Um, you know, it's funny, because when I was on, I was on solexa. So I was on an SSRI and Wellbutrin for a decade after my postpartum depression and anxiety. And so you know, there was this constant conversation with my medical provider, which was like, I don't feel like it's working. You know, at first it was the SSRI, I don't feel like it's working, let's up the dose, let's up the dose. And then it was like, I don't feel like it's working. Let's bring in this cocktail of another one, you know, and then I was sort of like, then it just became so complicated that I just wanted to get off everything to sort of rediscover what what is my baseline, you know? And so yeah, and so there was always that feeling of like, if I feel I feel miserable, and I'm on antidepressants. So if I go off the antidepressants, imagine how much worse it'll be, you know, there was always this feeling like maybe they are helping. I'm just such a basket case, that if I went off of them, I would be that much worse. And so I would stay on them. And I would have to, like, it's so the just like you said, it's like, yeah, that feeling of like, Is it too much? Is it not enough? What's going on? Is it placebo like? And so I went on medication and went off of it. After two weeks because of that, I felt like that quest constant questioning of is it working? Is it not working was like interfering with my mental health. And I was like, I feel like I might actually, and I am not anti medication by any means. But I just like for me, I feel like it's easier for me to just be on nothing and like, start from that baseline. Yes, the questioning becomes, its it becomes too much for me.



Anna Lopez 37:11

It does, it does. It does, it can become too much for for some and then, you know, there is like that idea do like as a provider, like you can increase doses. And still they're saying it's not working. And you're like, Is it really not? Or they just can't really tell? Or it's just, I mean, for me, because I have a ADHD like, I get confused, too. And I'm like, What should I do? Should I? And I think that's part of like my anxiety with with work. It's like, Am I going to be able to help them? Am I going to be able to make a good decision about what to do with their medicines? Because it's like, maybe they need an increase, maybe they need a different medication, maybe they need to just stop it and see what happens with that. It's just like, a constant anxiety spiral, trying to trying to help people and I want to help people well, but also there's this part of me that will hear people say like, hey, I've been on these medications, and I still don't feel better. And so it's like, hmm, something else is going on. And I've actually, like, come across, what the like, what the answer might actually be for these, when they say that, like, sometimes it takes me a while to figure out the answer. But I'm like, Huh, then that means something else is going on. And I think that's something that you learn if you actually train in ADHD as a psychiatrist, or even family is that if you have patients who are on like, the antidepressants or into anxieties, but they're still have,

like, there's still stuff going on, even though like they're doing all these other interventions, or they're going to therapy, like something else is happening, and you should probably rule out ADHD. And so like, that happens recently, where a patient was talking about, you know, this is not working. And then I was like, have you ever been diagnosed with ADHD like as a kid? And I was like, Oh, well, you're not gonna be enough for you. Because there's a whole nother element that's playing into what your what's going on with you. And he's like, Oh, that makes so much sense. And so I don't know, it's a very confusing, nuanced thing. And then when you have ADHD and like a field like psychiatry, it is, it can be like, a little nerve racking, because you're always trying to, like, figure out if you're doing the right or the best thing. At least for me, I don't know about other things.



Katy Weber 39:24

It must be it must feel very meta a lot of the time. Well, and that's the other thing I asked a lot to what I when I hear women talk about how the medication has been life changing, or it's even just like, yeah, it's really working. And I'm like, what does that mean? I'm working how because I don't even know what I'm looking for.



Anna Lopez 39:44

I think that's part of it, though. Like, if you take medication and some of that, like, anxiety or over analyzing kind of like dies down or we can be like some big deal. I'm gonna figure it out. I'll know when I know it. If it's working, then it's probably working. Because that's me like I can be very over it like overanalyze everything. And then the fact that I'm not over analyzing as much, I'm not anxious about the end of the day, even though like, I hate the end of the day, because I'm like picking up my kids making dinner, do you know all this stuff? The fact that I'm not as anxious about that, like, I'm not over analyzing things as much, or even if I am like, not sure what to do next, like, I'm not worried about that, I'm gonna figure it out. I'm like, okay, that means it's probably working. Yes, at least something right.



Katy Weber 40:32

So that's a great point. And I do often feel like, that's what the SSR I did for me when I had babies, which was like, rather than falling in a puddle of tears, anytime anything happened, like, you know, dish broke or something, I gave me the ability to just be like, dish broke moving on, let's go, you know, like, so I used to always say, like, it gave me the ability to cope. And so I've often when I went on, on tried vyvanse, and really didn't notice much of a difference. I was like, I thought like, maybe what I'm looking for is that feeling I

used to have on an SSRI. And have I lost that feeling. I don't even know if I would get it. But like, again, I'm just like, so that's a great point that it's actually like maybe all of this, like manic questioning is what you need to treat. Yeah, I

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Anna Lopez 41:19

mean, it's just so it's just trying to figure out if medication does work, and what will work best for you can be very exhausting. And we don't have patience for that, right? either. So like, can be very impatient, trying to like figure out something works or doesn't work and like watching medications. And that's just hard to navigate and organize when you have ADHD to when there's a lot going on. So I completely get bad sometimes just like not even dealing with medication or not being in that season to say, it's just not for me right now. It's just too much to too much. There's already enough in my head, and I can't think about that. So I completely get the reason that people don't want to try or don't like or not in that season to try. Yeah,



Katy Weber 42:06

and you know, and then and then usually the medical provider is sort of like, well treat it like it's like it's a vitamin or, you know, if somebody was on needed blood pressure medication, they wouldn't not go on blood pressure medication. And so I'm often like, Well, why is it so different with psychiatric medicine? And I think that's it. I think it's that idea of just like the is it? Or is it working? Or isn't it working other medication, there's like really quantitative ways of knowing if it's working. And that's just doesn't exist when it comes to your mental work

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Anna Lopez 42:37

quickly. Yeah. And then we're quickly and then with like, a lot of psych meds, they take time can take two to four weeks. Well, stimulants they take, they're supposed to work instantly, right? But like other psych meds can take a few weeks to work. There's a lot of side effects associated with psych meds. Dude, you don't really know what you're supposed to feel or not feel you don't know if you're okay with certain certain side effects, or you want to stop it if they bother you enough. Like, it's just a lot. And then like, you know, everybody's different and metabolizes medications differently. So you might have to try a bunch of different things. And all you want to do is feel better. And so and so like, having to have the patience to do that is really hard. And that's the conversation I have to have a lot with patients is like I understand, it's not fun, it's not easy having to just figure out what works and to be patient and, you know, for it to actually kick in. But

unfortunately, this is the only way it works. This is the only way I hate it. I hate it for them. They hate it for me too. But I don't I wish there was a better way.



Katy Weber 43:45

I really just keep just keep your head down and tunnel through. It's so hard. It's it's hard. Okay, so now what would you rename ADHD? If you could, if you could come up with a different name for it that was a little less problematic for so many of us. What would you rather call it?



Anna Lopez 44:07

I wrote something down that I say, Oh, so there was this? I don't know if you follow live from snack time on Instagram. It's like it's a it's an Instagram site where or page where like, they post funny things that kids say. And some kids said something about some dream thinkers or dream thinking or something and I was like, Oh my gosh, that's totally ADHD brain like dream thinkers. Be let's go should be called. But um, you know, I don't know like tornado brain. I don't know. That's how more like when you're talking about the buzzing bees. Like I always think about like Twister, the movie. Where is it? The Helen Helen Hunt character or whatever she's buying on? They're not the same person but they look exactly the same, and they're not related. Anyway, they she's like, always want to know what the middle of a tornado Looks like and she gets the chance to, like stretch herself to some like, metal bar. And like it's to like, see what a tornado looks like inside. And I feel like that's what my our brains are like, it's like what, just like tornado brain like there's, like no one really knows what we're going through unless you have this thing but I don't know, I asked my husband and he's like, I think we should just take away disorder, because what is order? What is it order supposed to look like? Like, there's no specific kind of order to the brain, you know. And I can see that like I think in a way where we're kind of progressing into like just thinking of it as a neuro type and not as like, a different like abnormal. It's just a neuro type. It's just a type of brain. And I, I think just like that better just think of the as a neuro type. Yeah, but I don't know,



Katy Weber 45:55

I have this conversation with my therapist a lot. Because I, you know, when I was first diagnosed, of course, I was like, this is a superpower, oh, my God, everything good about my life is thanks to this one neuro divergence. And she was like, yeah, slow down. And she was like, you still have to honor the fact that you really really struggled, you know, and that was it. Like that's about that time of, you know, that's what we were talking about of

like stopping and having that grief and realizing how hard you do have to work and how hard you did have to work and you were too busy working to realize that there's that you are a square peg in a round hole, and that society is not built for you and that that sucks. And so she was sort of like it is a really important part of your identity to, to acknowledge that and to not like get swept away in the fact that this is a wonderful thing. Because it's really hard. And I feel like it can be dangerous if you don't acknowledge that. And I was like, Yes, I get that. But at the same time, there is a part of me that Yeah, like it feels like in an ideal society, we would be no different than someone who's left handed. You know, like, there's just ways in which Yeah, it sucks, because you can always use scissors and like, there's ways in which society is not made for you. But it shouldn't, you know, if we can just work on society and not work on the individuals who have the disorder, like, I totally get what he's saying in terms of like, yeah, there is the way in which we are kind of contributing to the stigmatization of treating this, like it's a medical condition and all of those things where it's like, no, it's a, it's a subset of society that are square pegs. And we only have round holes. And so it's the holes that need to be fixed, not the pegs.



Anna Lopez 47:34

Yeah, exactly. It's like, get rid of, you know, like, think outside of the box. It's like, why do you even have the box? Like, why don't you know what I think like, when do we, what are we? Or will we get to the point where we don't even think twice about it? And just people who are other angels, you know, are? It's just like, oh, okay, well, like, you're ready, like you already can, like, shift and be flexible for that person versus like, we having to, like, fit into an you know, another space, like, we all kind of can sit and be in the same space and be flexible for each other. We all like we're not, I don't know, I don't know what I'm trying to say. It's not so much like this other thing, like, we're just a part of the rest of society. And it's easier for us to be understood and have what we need to accomplish what we want to accomplish. And also just like not also, not just looking at behavior, I feel like, if you're just looking at behavior, people look lazy, or they look like they're not, you know, they don't want to, you know, pay attention. And that's not the truth. And so I think that sometimes I feel like we could just throw the word behavior out and stop, like, talking about behavior by itself without recognizing, like, what's happening for people to do like behavior is a signal of something deeper, you know, so I think it's just it's kind of annoying sometimes when ADHD is like, called it like, like a behavioral neuro behavioral thing is not easier. It's, it's what's happening in our brain that makes it look like behavior that makes right what makes it look like we're not paying attention.



Katy Weber 49:22

Well, and yeah, and I think a lot of the that, that tornado feeling, and the buzzing and all

of these kind of side effects of ADHD are the result of being put into systems that aren't helpful for you, you know, so it's even like the way in which you describe the symptoms of ADHD those symptoms only exist because of the our current environment. They might not I mean, none of those. None of the negative side effects none of that piece of shit syndrome, feeling all of those symptoms would exist if we lived in a in a different imagined society. Like it's like inclusivity you know, like, if you You know, I can understand why it didn't occur to you to put a wheelchair ramp next to the stairs, because maybe it just didn't occur to you, you know, but once it does occur to you, if you still don't put that there, then that's on you, then you're the asshole, you know, because then it's like, yeah, you know, it's your job to be inclusive. And that's sort of like, that's our human existence. It's our job. Right? And so what is it about you that makes you say, I, it's now occurred to me, and I still don't want to change that. I still don't want to do that thing. Yeah, sir.

A

Anna Lopez 50:34

I think that's what's happening. For people who have these invisible disabilities, you know, it's like, we're, you know, our, our bosses and, you know, our school schools are supposed to be understanding what ADHD are, just like neurodiversity is in making accommodations for that, but they're not doing it. And so that's, that's hard, because it's like, like you said, like, now you know, you need the ramp, and you're not putting the ramp there for for for your students or your co workers to be successful. And that sucks.



Katy Weber 51:14

Oh, my goodness. Thank you. I've rambled for like over an hour, I have no idea what I talked about. I know that's why I love this podcast so much. It is literally just like, it's just, it's just tangent and tangent after tanjun and I have so much fun. I love these conversations so much. And I love talking to people about talking to other women about ADHD. And I'm just like, I love it so much. And so the fact that it's like that I put it out there and other people are listening to these and reacting strongly to them. I'm like, this is just blows my mind.

A

Anna Lopez 51:49

Yeah, I love the feel. I love talking about it. Like it's changed my life. And I think it's just like, so interesting and like so liberating to but also so frustrating. Like, there's so many aspects of ADHD and talking about it, but I could talk about it forever, say for sure.



Katy Weber 52:06

Well, I'm so glad you agreed to talk with me today. And yes, thank you for asking.