



PROFILE: Jennifer Pate, MD



By Trudie Mitschang

Dr. Jennifer Pate was diagnosed with CVID when she was a teenager. Today, as a psychiatrist, she helps people cope with serious chronic illnesses.

AS A TEENAGER, Jennifer Pate had ambitions of making the professional tennis circuit, when a series of recurrent infections relegated her to the sidelines. Her eventual diagnosis of common variable immunodeficiency (CVID) changed the course of her life and her career plans. Today, Dr. Pate is a recognized psychiatrist who specializes in helping the chronically ill cope with their diagnosis.

Trudie: How were you diagnosed with CVID?

Dr. Pate: I struggled with recurrent sinus and ear infections and episodes of pneumonia that would linger for weeks or more since I was 11 years old. When I was a senior in high school and preparing to launch a professional tennis career, I developed an unusual parasite infection. After my condition continued to worsen, I was admitted to Texas Children's Hospital (TCH) and eventually diagnosed with CVID. I've been coming to TCH every three weeks for the past 30 years for life-saving intravenous immune globulin (IVIG) infusions. Without accurate diagnosis and treatment, I would not have survived.

Trudie: Why did you become a physician?

Dr. Pate: After seeing firsthand the importance of the doctor-patient relationship in helping patients manage chronic illness, I decided to go to medical school myself. I became a psychiatrist and am currently the chief of psychiatry at Baylor St. Luke's Medical Center. I specialize in helping patients cope with serious chronic medical illnesses and have been named repeatedly in lists of America's Top Psychiatrists — something I'm very proud of.

Trudie: Why psychiatry?

Dr. Pate: I care more about the people behind the illness than the actual symptoms or the medications involved, and I like to get to know people and help them with whatever experience they're dealing with. So



psychiatry ended up being a great fit for me. It's also less risky for someone like me with an immune deficiency, who really should avoid being around people who are sick.

Trudie: How has being a patient made you a better physician?

Dr. Pate: I clearly understand the anxiety, sadness, frustration, vulnerability and loneliness of being a patient better than I would if I were not chronically ill. My patients often compliment me and are shocked that I “get it” or understand their experience so well. I also have a unique view of the doctor-patient relationship. I know how patients want their doctors to communicate with them, and I also know what works in terms of how physicians interact with their patients.

Trudie: As a psychiatrist, what are the common issues you see facing patients with chronic illness?

Dr. Pate: Many of my patients are struggling with depression, anxiety, insomnia, chronic pain, substance abuse, delirium/hepatic encephalopathy, end-of-life issues and noncompliance. The theme of conflicts in the doctor-patient relationship is also very common.

Trudie: You had a serious health setback not too long ago. Tell us about that.

Dr. Pate: Three years ago while swimming laps in a neighborhood pool, I developed a life-threatening ear infection that has caused me to become deaf in one ear and required multiple operations, ongoing surgical care and long-term intravenous antibiotics. Despite these challenges, I continue to push forward and fulfill my passion for helping others even in the midst of

this serious illness.

Trudie: What are your biggest challenges, and how do you overcome them?

Dr. Pate: Fatigue and hearing loss. With regard to the fatigue, I go to bed very early and plan my days around my energy level. For example, my best times are very early in the morning. I am much less likely to be productive after a long workday and rarely plan social activities during the work week. With regard to the hearing loss, I work with an outstanding ear, nose and throat doctor and audiologist, and I have a special type of hearing aid to compensate for single-sided deafness.

Trudie: Tell us about the fund you established at TCH and the motivation behind it.

Dr. Pate: On Feb. 17, my mother and I hosted a breakfast at TCH to honor my medical team for 30 years of outstanding care since my diagnosis of CVID. This was one of the happiest days of my life. We established a fund to support nursing education and also to help patients with exceptional medical expenses not covered by their insurance (hearing aids, noncovered medications, etc.). As a result of this fund, nurses have opportunities to attend conferences they would not have otherwise had access to.

Trudie: What is the best advice you've received as a patient and/or physician?

Dr. Pate: Dr. Tim Connolly, a critical care physician and dear friend of mine, has repeatedly used the metaphor “stay off the roller coaster.” I think this is excellent advice. Chronic illness brings with it multiple frequent stressors. Managing the illness is a load unto itself, and getting on the emotional roller

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coaster will only increase the weight of the burden.

Trudie: How do you stay positive?

Dr. Pate: I have wonderful family, friends and my dog. Knowing I make a difference in the lives of my patients is the reward that keeps me positive.

Trudie: What are your goals for the future?

Dr. Pate: I would eventually like to write a book to help patients and physicians understand the experience of chronic illness. As a young patient, I was certainly someone who saw my physicians as perfect and thought that they couldn't have anything wrong with them. I think my story sends an important message to patients that it's possible to overcome a lot of things and accomplish a lot, even with chronic illness. ■

TRUDIE MITSCHANG is a contributing writer for *IG Living* magazine.