

### DE-IDENTIFIED CASE STUDY 1

Simon\*, married with 3 school aged children was diagnosed with terminal oesophageal cancer at 45 years of age. Two children were in private high schools and one was in primary school. Simon\* originally trained in Ireland and had just been admitted to the College of Anaesthetists when his illness was confirmed.

He contacted MBANSW on diagnosis, wanting to be sure that his wife had support options in place after he passed away. Simon had planned to take out income protection but it didn't get to the top of his list. Simon's wife wasn't working- they agreed she would care for the children while he cemented his career. By the time Simon\* died, 9 months later, there were little savings left. His wife was exhausted from caring for him at home and there was little family support. 3 months after he died, his wife was unable to manage the mortgage. She sold their home and moved the children to public schools.

MBANSW provided assistance with rent, health insurance and electricity for 6 months, by which time Simon's wife had found work. She remained in contact with MBANSW Social Worker for a further 6 months for support.

Financial assistance provided by MBANSW \$7,600

### DE-IDENTIFIED CASE STUDY 2

Susan\* was a 49 year old GP, who moved her family to a rural location following her divorce. Her ex-husband remained in contact with her and the children. Both regretted the divorce, however, the pressure of 2 careers ended their relationship.

Susan struggled with depression as a teenager and at University. She intended to set up mental health support once she was settled. However, she found that a rural GP practice is very different from a city group practice. She wasn't sleeping well and was feeling 'black'.

Her husband offered to take the children for two weeks in the holidays to give her a break. Sadly once the children were no longer a distraction, Susan took an overdose. She was hospitalised and later transferred to the Mental Health Unit.

Susan was accepted into the Medical Council's impairment program and returned to work after 6 months with conditions on her registration. Susan's husband paid her rent while she was off work and MBANSW assisted with the utilities so that she and the children could manage on the Centrelink assistance approved.

Financial Assistance provided by MBANSW \$4,749.00

### DE-IDENTIFIED CASE STUDY 3

Thomas\* worked in anaesthetics. He and his partner had a 6 month old baby and Thomas felt things weren't going well since the baby was born. He had a 'short fuse' at home and felt tired at work. As a student he had found stimulants helpful in getting through study and a part time job. When a drug error in theatre was identified, fingers were pointed at the nursing staff. When a second and third error was noted, all with his patients, the DMS asked for a meeting. Thomas

decided to self-report his addiction to AHPRA. He entered treatment. Thomas was off work for a number of months and was able to return with conditions on his medical registration. He had additional expenses for his psychological treatment and thrice weekly drug screening.

MBANSW gave a small amount of financial assistance, and the Social worker remained in contact with Thomas and his partner for support until his conditions were reviewed and his partner returned to work.

Financial assistance provided \$3,872.00

*\* All case studies are representative and de-identified to ensure confidentiality*

BY DOCTORS FOR DOCTORS



SINCE 1896

MEDICAL BENEVOLENT  
ASSOCIATION OF NSW