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Healing the Heart and Soul

Cardiologist-Turned-Patient Prescribes Alternatives

By MICHAEL LEAHY
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In hospitals, cardiologists are demigods, worshiped and obeyed. So it was no surprise that Christopher Leet had spent his professional life acting as confident and omnipotent as Zeus among his minions. Then one day, Zeus crumbled. He was sitting with his colleagues at Prince William Hospital when a horrific pain struck him square in the chest—the beginnings of a heart attack.

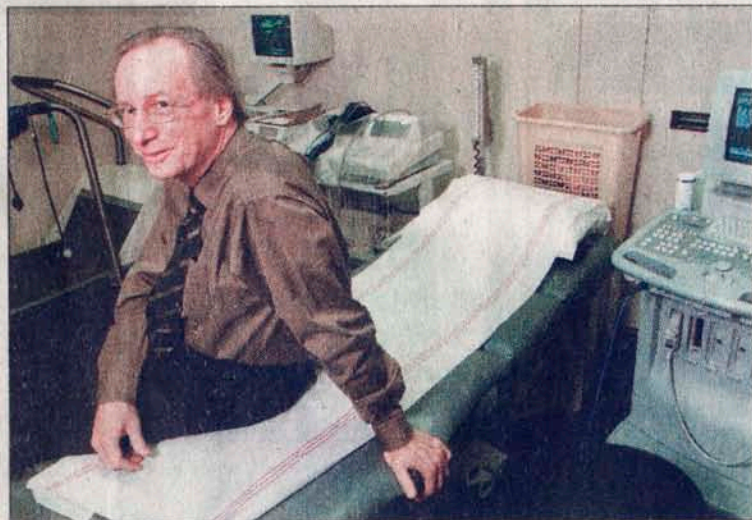
Others might have howled, but Leet—an admitted control freak—stayed quiet, wanting at all costs to avoid the embarrassment, the humili-

ation, really, of a cardiologist collapsing of his own disease. Some might see that as evidence of personal failure, he thought.

So he stood. In his last act of hubris, he shuffled away from his puzzled co-workers, walked down a flight of stairs, got into his car and drove to his nearby office, determined to give himself an electrocardiogram in private.

"There was a slim chance it might not be a heart attack, and I didn't want to explain anything to anybody," he recalls. "But when I got to the office, I was doing a lot worse.... I started thinking, 'Wow, this might have been real stu-

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BY JOHN BRIGHT—THE WASHINGTON POST

Christopher Leet prodded Prince William Hospital to offer meditation, self-hypnosis and other New Age treatments for heart attack patients.

A Taste of His Own Medicine Leads a Doctor to Change

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pid."

At 51, he was an overweight, self-satisfied winner, a man who probed other people's diseased, flabby hearts and plucked the dying and near-dying from the abyss, routinely so.

The first board-certified cardiologist in Prince William County, he had been medical director of cardiology at the hospital for 21 years, a commanding figure who had but two directives for his patients: Eat low-fat and exercise regularly.

But what was about to happen to Leet would shake his confidence in the absolute power of those commandments, ultimately triggering a philosophical change with implications for himself and his hospital.

Feeling increasingly awful by the time he reached his office that late afternoon in March of last year, Leet unbuttoned his shirt, tenuously affixed the electrodes to his chest and began his own EKG. He was sweating so profusely that the electrodes wouldn't stay put. Still, he got enough of a reading and shouted to his secretaries that he was having a heart attack.

Minutes later, he lay stretched out in the hospital's emergency room, staring up at the heart monitor from an angle he had never seen. The spiky lines meant he still had a viable pulse. But when the spikes suddenly disappeared, replaced by little squiggles signaling that contractions had stopped, Leet realized he had five seconds before he would lose consciousness and die if no one intervened.

He called out to the nurses, "Girls, take a look at the monitor!" and pounded his chest once with his fist in an attempt to jump-start his heart.

Then Christopher Leet went to sleep.

It was the deepest kind of sleep, the one that comes to those in tombs. For the next 30 seconds, the world existed without him. Electrical shock restarted his heart, and Leet was taken to Inova Fairfax Hospital—by turns woozy, fearful of something he couldn't articulate, already in the midst of a change he couldn't see coming.

By the time his metamorphosis was complete almost three months later, Leet would come to believe that both his life and his approach to helping people had missed critical elements. That he had emphasized the physical to the exclusion of the spiritual and psychological. That he and his patients needed to find lifestyles and meditative ways to reduce stress and let their hearts find peace—and with it, health.

As a consequence, in September the cardiac program will dramatically change at Prince William. Prodded by Leet, the hospital will no longer confine its treatment to conventional methods. Instead, drugs, diet and exercise regimens will be supplemented with psychiatric services and what Leet calls "well-grounded alternative methods of treatment." Meditation, self-hypnosis, breathing exercises, therapeutic massages and other New Age treatments will be made available to recovering heart attack victims and those on the brink.

Although in recent years the public has become more accepting of such alternatives to traditional medicine, hospitals and some doctors have been slower to embrace them. A growing list of cardiologists, Leet now among them, are warming to the possible benefits, convinced that meditation and related techniques can lower heart rates and stress as effectively as some drugs do.

Additionally, supporters contend that these alternative methods can do what drugs cannot: provide a sense of confidence and self-worth whose benefits will be felt long after doctors have cut patients loose, making it far easier for the jittery to return to normal lives.

"The public has really driven this by their interest in these techniques," says George Beller, chief of the cardiovascular division of the University of Virginia Medical Center, which recently incorporated meditation, breathing exercises, tai chi and yoga into its treatments for cardiac patients. "The medical community has responded by looking for worthy programs, and so what we have now is momentum in that direction. But it doesn't suggest getting rid of what we have, just adding to it."

Prince William's comprehensive alternative medicine program will be the first of its kind in Northern Virginia and only the second in the Washington region, "a melding of medical techniques to treat mind and body," as Leet describes it.

Those closest to Leet express astonishment. "That my big brother is talking about meditation... is such a change from the Type-A guy who couldn't work enough hours," says his sister, Rebecca.

The old Chris Leet had never much considered meditation and had derided many New Age health practitioners as "quacks" and "charlatans," doctors touting herbs and experimental drugs as panaceas, and non-doctors prescribing psychological approaches that sounded like hokum to him.

Leet's no-nonsense two-step regimen for his patients—hit the treadmill and bike, and stop eating garbage—was the essence of conventional treatment.

But four days after his own heart attack, there were already signs that *doctor* Chris Leet's approach could not help *cardiac patient* Chris Leet. With his own doctors assuring him that all would be fine, Leet was sent home to his idyllic five acres near Manassas only to find himself edgy, not quite believing what had happened.

He looked out on his pool and the woods beyond, able to hear the chimes coming from his sun room and the gurgling of his simulated brook. It was a house with skylights and bleached wood floors and a view of a preternaturally verdant lawn, a place designed for serenity. But none of it helped Leet, who felt tormented and didn't know why.

Willing himself to remain stoic, he returned to work after five weeks, simultaneously going through the cardiac rehab program that he had administered for two decades. His weight, which had ballooned to 255 pounds before his attack, dropped steadily.

He had embraced the recovery regimen but went home at night feeling himself sinking, terrified that his heart had left him permanently diminished. "You ask yourself, 'What kind of damage did it do to me? Will it affect my career? Am I less of a man?' I was only 51. . . . I wasn't nearly ready to retire."

He broke down and wept to his wife, Caroline. Anxiety turned into depression. At night he dreamed he was driving around in circles for hours, searching for a parking space that was never there. He'd awaken morose, unable to motivate himself to work on many days, sitting on his couch, staring into nothingness. "I hit an emotional wall," he recalls, "and everything collapsed."