The Deepest Well: Healing the Long-Term Effects of Childhood Adversity

by Nadine Burke Harris, MD

Review by Melvin Belsky, MD¹

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Not only will men of science have to grapple with the sciences that deal with man, but—and this is a far more difficult matter—they will have to persuade the world to listen to what they have discovered. If they cannot succeed in this difficult enterprise, man will destroy himself by his halfway cleverness. — Bertrand Russell 1872-1970

Hungarian-born physician, Hans Selye (1907-1982), first "discovered" and described the necessity of physiologic stress for maintenance of homeostasis.¹ His studies led him to develop, for the first time in medical literature, the concept of the General Adaptation Syndrome as the first neurohormonal model of physiologic stress implicating pituitary and adrenal function in the etiology of many chronic diseases, and the associated sickly appearance of those suffering from chronic illness. The concept of General Adaptation Syndrome was more fully developed in his 1956 book, *The Stress of Life.*²

Selye, a prolific, pioneering neuroendocrinologist, claimed the physiologic life is fundamentally a process of adaptation to the totality of one's experience, with real health and happiness being the successful adjustment or adaptation to those everchanging conditions. Failure to adapt to the stress burden, in his view, resulted in disease and unhappiness.

In 1985, Vincent Felitti, MD, Chief of Preventive Medicine at Southern California Permanente Medical Group, San Diego, added mightily to Selye's work with his findings of the profound, destructive, multi-organ system consequences of adverse childhood experiences (ACEs).³

Nadine Burke Harris, MD, discovered Felitti's pioneering work later, yet immediately understood the potential power of its lessons if implemented in her pediatric practice. She describes well her newfound understanding of the pathogenesis of ACEs and the excitement of potential, effective therapeutic interventions.

It is in this historical context that *The Deepest Well* is best understood as another admirable and effective attempt to "... persuade the world to listen ..." to the lessons of Selye, Felitti, and others. *The Deepest Well* is, in part, the story of how Burke Harris transformed herself into a champion persuader of truths difficult for others to hear, and a better clinician.

The language used is often colloquial, not formal, but the book reads well. It is both Burke Harris's personal story of discovery of the pathogenic consequences of early childhood trauma/ACEs, and includes illustrative case descriptions and experiences, with creative explanations of often complex medical concepts. The recounting of individual patient stories is powerful and effective, and told with the kindness and gentleness they deserve. They are revealing and instructive of the many lessons to be learned.

Burke Harris is bright, well informed, caring and authentically committed to using her newfound understandings to minimize the destructive, negative consequences of ACEs within her large community pediatric practice in San Francisco, CA. Her commitment to the broader community is evident. Her efforts at forming the personal and institutional relationships needed to get others to understand ACE, and use unfamiliar HEALING the LONG-TERM EFFECTS of CHILDHOOD ADVERSITY NADINE BURKE HARRIS, M.D. New York, NY: Houghton Mifflin Harcourt, 2018

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clinical interventions for best outcomes, are admirable.

Burke Harris's descriptions of the "stress response," immunology, epigenetic regulation, neuroanatomy, and neurophysiology are imaginative and effective. The description of pathogenic stress as "toxic" seemed off the mark, yet her acknowledgment of the reality of multiple end-organ pathology suffices. Beyond Burke Harris's obvious humanity, the strength of the book for me lies in the creative, clever, and sometimes elegant descriptions of complex ideas in physiology, pathology, and treatment. I do not think this book would be compelling to the nonclinician without them.

Having said that, I also greatly appreciate the fact that Burke Harris insisted on re-emphasizing the principle that ACEs occur at similar rates across socioeconomic strata. She rightly avoids any urge to politicize this profoundly human problem. For that, I am respectful and grateful.

Finally, despite the minor criticisms of the book outlined, I do believe *The Deepest Well* is a "must read" for clinicians (including physicians), as well as patients/laypersons unfamiliar with

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the terrible and predictable consequences of early childhood trauma/ACEs. *The Deepest Well* is an excellent introduction to anyone interested in understanding this "elephant" in our human "room," and is a formidable effort to "persuade the world" to understand ACEs, and do something about them. For that, we should all be thankful because helpful interventions do exist.

I encourage physicians, unaware of the profound implications of ACEs/early childhood trauma in the treatment of their own adult patients, to read this book. Its content should motivate physicians to assess ACEs in their own practices and direct burdened patients to appropriate therapeutic resources. I believe, as does Burke Harris, that once the pathogenesis and implications of ACEs are understood, the physician's point of view and practice will change forever, and for the better, both for the patient and for the physician. *****

How to Cite this Article

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