

“The Truth Behind the Smiles”, The Interview

Dr. Christopher Hart interviews Melissa Methven, author of *The Truth Behind the Smiles*.

CH: Hello, my name is Dr. Christopher Hart, and I am a dentist in Mitchell, South Dakota, at Hart Dental and Hart Dental Sleep Solutions. Today, I have with me an author and a friend of mine, Melissa Sue Methven. We are talking about her new book, *The Truth Behind the Smiles*. It is a very touching and heartwarming book about her journey with mental health, specifically talking about her husband, Dr. Scott Methven, who sadly committed suicide a few short years ago. She's going to share with us today about her journey through this and her journey toward healing. I just want to say thank you, Melissa, for coming and joining and sharing with us.

MSM: I feel it's so important to share my story. I've seen it have such an impact already. So, I thank you for taking the time.

CH: One of the things I loved about your book is, you started with hope. You are obviously addressing some very difficult subjects—depression, suppression, suicide—and it's important to recognize those things so that we can deal with them. But that's not the goal, to stay there; we want to work through that, to get toward healing. I think one of the things that seems to have carried you through that was hope.

MSM: That's what I was hoping it would give people.

CH: So in addition to hope, what kind of things inspired you for this book?

MSM: It was a calling to use my voice and address suicide awareness. My children inspired me because I saw their pain and their confusion. My son and daughter were in so much pain.

CH: As a dentist, what can you tell me about him?

MSM: He was a perfectionist. Excellent with precision. He could connect with patients, and ease their fear. He loved dentistry. It got hard, though. You give so much, which he did, and then for some people, it's never enough. That just takes a toll, and it did on him. The management does get really stressful, the insurance and financial stress. He kept on saying, “I just want to focus on doing what I love, but not everything else.”

CH: The heaviness that you talked about, the burdens are starting to pile up at some point. What were you seeing and at what point did you start to get concerned?

MSM: Well, when I look back, there were a lot of red flags early on, you know, even after just 3 years of owning the practice. The heaviness of the student loans was half a million dollars, then we opened up a practice and took out a big loan. He was working 6 days a week. The back pain kind of showed up then. I do remember the pain medications showing up, you know, to keep going. He had a good handle on it then, but as it progressed, you need more, a little bit more, because that pain never goes away, because you never stop working those 5 days a week. Scott was so good at taking care of everybody else, but unfortunately, he didn't take care of himself. I think as dentists, you'll often hear negativity from patients. Well, he would take that on, that fear from the patient. It's almost like an energy exchange of some sort: “Let me take that fear for you.” But then he never had a way to release that. As the years got harder on his body, then the pain medication increased. There was more heavy drinking on the weekends, just to kind of numb from the week. He was very good for a long time at not drinking during the week while he worked. It was just the heavy drinking on the weekends. Those were some red flags. You know, it wasn't always like that. Yeah, there was a time when he did take a break from drinking, and did PT. That was really good. He had started swimming, and I was seeing a change. He really got into jujitsu. But then he got off that, off track.

CH: It's very clear in the book that you did everything you possibly could to help Scott. Did you, even in those dark moments, ever consider that he might be considering suicide or having any suicidal ideation?

MSM: You know, I had asked him a year prior, because he had just received news that his dad was terminally ill, and he was really close to his dad. He was still in the lawsuit, it had been 5 years at the time, and I said, "Do you have suicidal thoughts?" He said, "No, I'm just really stressed, my dad, I'm just really sad." He would never say that he was depressed. Scott always hid it so well. I think a lot of men do. Every time I would check in on him and get worried, he'd give me enough to think, "Okay, he's got it together." Because I was concerned. I'd see all the pharmaceuticals, and he would say, "I've got a handle on it." But deep down, I didn't see the immense pain he was in. Yes, he'd have these downs, but I thought, "Oh, the lawsuit, his dad is passing. Of course, he's going to have these downs." But never did I think he would die by suicide. That's why I want to bring awareness for a lot of (especially) men to be able to speak and feel safe to do so.

CH: What are some of the red flags that you would say would indicate somebody is probably struggling with either depression or addiction? Which signs would you encourage people to take seriously that they might be tempted to overlook or minimize?

MSM: Isolation. Scott started not wanting to do so many things with his friends, like fishing, and those are the things he really liked and enjoyed. He would plan them, but not as often. So isolation, not doing the things that he used to love as much. There was also the progression of the drinking. He said, "Okay, never work days, just the weekends." But then it progressed to every day. So that increased. I also think the highs and lows. I saw so many really high and then really low points. They would just change so much. His sleeping habits changed. He would feel so tired during the day, but then he wouldn't sleep at night. He'd be up all night. I'd ask, "What are you doing?" I'd hear him in the kitchen. It was like a couple hours, two, three o'clock in the morning. So sleep changes started happening too, and the moods. I feel like as a wife, I tried everything, but I tell people now, even as a stranger seeing something is off for someone, go ask that person how they're truly feeling. If you're sensing it, that person is probably going to think, "Oh, wow, that person noticed, and they don't know me very well." They might be able to take that advice from somebody who is not as close to them. This is why you really need a community. You can't do it alone. There is also the 988 line for suicide prevention. There's always someone on the other end. I really feel that there needs to be a separate one for dentistry. Dentists might be more inclined to call if it's another dentist on the other line, either a retired dentist or someone who's already gone through a burnout and is coaching dentists.

CH: You obviously did see the warning signs and did try to intervene. There are others who are struggling and trying to address it with their loved ones. You wrote a powerful quote: "Ultimately, the environment and life he chose were up to him," referring to Scott's struggle. For those who have loved ones that are battling depression, addiction, some people are successful and get through. Others, no matter how hard they try, it's never enough. How would you encourage somebody in that position?

MSM: I would encourage them to start doing some healing for themselves because (dentistry) is a lot of giving. You truly need to start working on yourself as well and taking care of your own mental health because you can't fall alongside and spiral into their spiral. Start taking care of yourself.

CH: Let's talk a little bit about dentistry and the dental profession. As a dentist, just like Scott, I love what I do. Like many dentists, it just matches my skill set, my interests. But there's a dark side to the profession. In your book you pointed out that the ADA and other sources reported that 54% of dentists suffer from moderate to severe depression, and that's heartbreaking. And 68% of them, you said, are 39 years or younger. And if that weren't shocking enough, the ADA reports that female dentists have a suicide rate of 5.28%. That may not sound like a lot, but I think the national average is about 0.42%. So female dentists come in ranking number 4 in the highest occupational suicide rate, and male dentists rank #1 for the highest occupational suicide rate at 8.02%. That's shocking and almost angering as a dentist. Are you seeing enough discussion about mental health with dentists, or do you still think we're in a bit of denial?

MSM: Yes, I think we're still tiptoeing around. I tried to look for podcasts and YouTube things, and they'll mention burnout, but not so much suicide, or the why. It's hard to see that truth, maybe, for those people. I was encouraged to write this chapter by a dentist. He said, "You *have* to write about the dark side of dentistry"—because it gives dentist's a voice and awareness. It also brings patient awareness. I've had many patients saying (after reading the book), "Wow, I'm going to be nicer to my dentist. I'm afraid of dentists, but I didn't realize how that impacted my dentist when

I keep saying, 'I hate seeing you or I don't like coming here, even if it is jokingly.' I know so many dentists who feel stuck. They do not love dentistry anymore. But this is what they have studied, and now they feel like, "Well, I don't have anything else to fall back on."

CH: You talked about burnout, and after reading your book and reading these statistics, I think most of these dentists—maybe they are burned out, but they might also be experiencing moderate to severe depression. By saying burnout, I think that we're just softening it. We're probably talking about a lot of mental illness. It feels like we may have stuck our head in the sand, and I'm not really sure why. So I want to ask you, what is it that drives us to ignore an obvious problem in dentistry? When you have an 8% suicide rate, there's obviously something going on. What is it, a bootstrap mentality? Is it fear? Pride?

MSM: Ego definitely comes into play. You're a dentist and successful, you have it all. You don't want to lose that. So I think it's hard to talk about the dark side and seeking help. I think in schools, they say, "This is going to be a fantastic career. You go out there, maybe you'll have a great lifestyle." They don't really address the effects on mental health once you get out there, and I think that's where it needs to start. I think dentists don't talk about it because they feel ashamed, and stuck. They've worked so hard to become dentists. So I think the more we talk about it, more dentists are going to come and say, "Yes, okay, I also feel that, and I do feel stuck, and I don't know where to go." Many don't know how to get out of it. But having a community is important, people you can check in with. There are some dentists out there I've gotten to know who are addressing this issue. But we need more. There's a heaviness, there's a dark side in dentistry that needs to be changed.

CH: Yeah, I think since Scott's death, in my various circles, I've heard of at least 2 other suicides. It's something where we all need to be a part of the solution. I loved your section on recommendations for dental schools. Even aside from suicide, if we have over half of our profession suffering from moderate to severe depression, we're not really taking care of each other. Again, it just seems to be reflective of this kind of chronic problem, taking care of everybody else, whether they appreciate it or not. We're going to take care of our family. We're going to take care of our staff. We're going to take care of our patients. We're just going to give, give, and give. We've got to find some ways to be able to help others but also meet these needs and support each other and learn to receive it as well.

MSM: Yes, I think that's so important. There's exercise, nutrition, therapy, cold plunging and breath work and all these things. Dentists need to know tools like that, and about therapists as well, because of all they are taking on. When you're in someone's mouth, you're so close in proximity. You've got to find ways to release all that and not take it on—all your patients' fears. They need to be teaching that in school and giving them those tools.

CH: Reading your book, I had kind of an "aha" moment: dentistry is one of the most personal professions that I can think of. I'm in your personal space, and you're in mine, and I'm in your face. There are all sorts of factors (that contribute to the stress/anxiety)—there's an artistry to it, so it's very obvious to you (and the patient) if it doesn't go well. There's a very real functionality that needs to be accomplished. There are so many aspects that need to occur properly. We're bonding in the most inhospitable environment—warm and wet, and with tongues moving and cheeks. We stress over and fixate on fractions of millimeters. No wonder it's stressful. So the people-pleasing all day, in addition to maybe what we carry with us personally, maybe a trauma, maybe a tough marriage, maybe trouble with parenting or on the business side—it's a lot.

MSM: It just kind of builds up and builds up. And I think it just creates a lot of internal pain and depression. You know, so many dentists I know have fused their necks and their backs—surgeries. Many are not looking forward to going to work anymore because of everything else. Finding that balance is really hard for dentists.

CH: So, I know what a day in the life of Scott probably looked like because it's very similar to many dentists. Maybe 30 patients a day. So, that's 30 times where you're bringing in the smiles. It's "show time" all day long. You have several staff members that you're doing this for as well. You feel responsible. You're not only providing a paycheck, but you want to provide a place for them to thrive and grow as well. Throughout the day, you hear those types of phrases you mentioned... "You know I hate you, right?" or "You know, I hate coming here." I would often take it as a challenge and thought, "I'm going to change their mind." And a lot of times you do, and other times you just say, "You

know what, I'll just roll with it. It's part of the game." But there are other times when dentists say, "You know, I've got a lot going on in my life too, and I showed up here, despite the fact that I had a sick kid," or maybe had a fight with a relative, or stress from bills to pay, or maybe they are on their tenth ibuprofen for the day, but they showed up for that patient, and the patient smiles and says, "I hate you." This is surprisingly common. It doesn't matter how good of a dentist you are, everybody I know hears it. How do you think some of those patient attitudes contributed to Scott's challenges with mental health? What would you say to dentists who are hearing that? What advice can you give them to try to stay positive and to try to achieve good mental health in spite of those circumstances?

MSM: Scott, too, he would take that stress on quite a bit, and like you said, try his hardest to make them feel at ease and spend more time with them. But then it was very discouraging for him sometimes. Even if he showed up on the weekend or came in for an emergency for free, they still might get upset with him. It definitely took a toll on him. I think, when you're working with patients, it's safe to create this barrier for yourself. You have to be able to not take that on. But that would take a lot of practice, and/or a way to release it. You almost have to spend some time yourself in some healing to release it, to just let that go. I think it just became really overwhelming for him by the end. I think he felt that he could take all that on, and it wouldn't affect him. I think over time, dentists think, "Oh, well, it's not really affecting me." You kind of suppress it. You think, "I'm fine with it. It doesn't bother me. But it is. It is impacting you just a little bit here and there every time. You start seeing signs. Your body will start to speak.

CH: I love the aspect of boundaries coming up, acknowledging, "That's them, I don't have to take on their junk." I think that would be profound advice. I can come, and I can bring my best, and I can serve you, but I don't have to take on the emotional baggage that you're (the patient) carrying. I can do good work, and I can be proud of it. Because there are many people that are so appreciative, and you can choose to fill your cup up with those people and that feedback and just hold yourself accountable to what you're letting in and say, "I'm responsible. I am the gatekeeper to my mind, to my heart."

MSM: Yeah, the gatekeeper. That's good. I like that because you have to be so careful and have the boundaries with your patients.

CH: Let's talk about the physical. We touched on the emotional toll, but as you know, dentistry is surprisingly physical. Scott had debilitating back pain, as unfortunately many colleagues do. If it's not back pain or neck pain, it's some sort of musculoskeletal disorder. I know dentists, including myself, who have had to have PT, massage therapy, neuromuscular work, or myofascial work, chiropractic work, and some even have to have fusing of the back and neck. How are physical health and mental health connected?

MSM: They say stress shows up in inflammation. It'll start causing you those back pains, the hip pains, the neck pains. The stress, if it's not released, it's going to start giving you a lot of pain. I know for Scott, not dealing with his childhood wounds and just continuing to suppress that, was starting to attack his back, and causing him a lot of inflammation. It's important to address those things, seek help, a therapist, PT, and maybe not working as many days helps, but that's hard because you see all the bills. But what are you going to choose?

CH: There's a great book called: *The Body Keeps Score* That really goes into depth about this. We all get busy, and we just say "I'll take some ibuprofen," or "I'll just go to the chiropractor and get that worked out." But sometimes there are deeper issues, as you're saying, and we're so tense and inflamed that we're not even breathing properly. It's compounding one thing on top of another. So I really appreciate how you bring both the physical and the emotional together and how they impact each other. As we're talking about depression, suppression, and suicidal ideation, we would be remiss if we didn't give some good practical advice. So for someone who is listening or reading this, maybe they are struggling, they are realizing that something is wrong. They say, "Maybe I am struggling with some depression. Maybe I am drinking too much." Whatever it is, fill in the blank, "I'm using something to numb myself so that I can deal with life." Where should they start?

MSM: Well, start with the Suicide National Hotline, 988. But also just pick up the phone and tell someone, anyone. The first thing is seeing your truth, seeing reality. Say, "I need help." Just say it out loud or write it out, but tell one person, at least one person that is willing to accept you, hold that space for you, then that'll open that door. There are different drug abuse centers that can take them on, if it's addiction. There are definitely different avenues. There's a

multitude of resources out there, and there are a lot of people wanting to help. But ultimately, the first step is willingness to see your truth and asking for help. You stop isolating and hiding the truth. From there, then having the courage to just pray, pray for that strength. Because a lot of people are just overwhelmed. They're tired. They're ready to give up. The more you pray and allow God in, more light will come in. The more you dwell on the shame and the guilt, that's going to bring more darkness. Focus on just praying more and allowing God in to open these doors for you, because He will. I've seen it for myself. Space (not isolation) is also helpful to heal—stillness, to look within, like meditation. I started waking up at 5 a.m. because that's the only time I could get that space, with the 2 kids. It was just a quiet space. So I started meditating. I started doing breath work. That space allowed me to reconnect with me. What's my truth and my heart? What am I feeling? Am I feeling some anger today? Am I feeling some sadness? Allow it to feel. So often we keep ourselves so busy with our jobs, our kids, our friends, and we don't allow ourselves to truly reconnect with ourselves.

Be cautious with alcohol. You'll just keep numbing because it's so scary to see your pain. It's hard because it is such a social thing.

Sometimes you feel like you don't have your strength, but I always tell people, "No, you do." If you don't feel like you do, God will give you that strength, because I do not know how I would have made it from the day my husband died and I found him to when we moved to Arizona. The more I let go, and I committed to my practice of prayer, stillness and meditation and calm, I could hear guidance.

I always want to leave people with hope that in that midst where it seems so overwhelming and they don't know what to do anymore—well, they don't have to do it alone. What role do I have in that? Maybe just to listen. Sometimes you just need to be there for someone and listen to them. If someone's telling you they're not okay, dig deeper. Listen, actively listen. Don't listen and think of something else you're going to say. Just let them talk. Because as they talk, they're going to see a little bit more clearly. They're just seeing it themselves just because they're putting it out there. There's always hope. There's always light. We've got to allow that light in. So the first step is opening up that first door and asking for help and telling someone you're not okay.

CH: You shared a beautiful story. It was the story of when you and Matéas and Sofia were coming home after Scott passed, and you shared what your friends and your family did to welcome you home. The word that came to mind is just presence. They didn't ask. They just showed up. They came, and they cooked. Your house was clean. I believe that there were probably people that didn't even say anything, but just their presence blessed you in more ways than you can count. Please speak to the importance and value of presence, to someone who has received it and now understands it, as well as the value in supporting others struggling with mental health.

MSM: Be present for them, show that you see them, and you're here for them, and just keep showing up. It's going to be hard for any of them to ask for help. For me, I didn't know what to ask. People would ask me all the time, and I couldn't voice it. But that presence, yes, that gave us hope. Show them that you see them, and you're here for them, and you love them. Little things show you care, like the meals, it's even the little text messages, the cards.

CH: Dr. John Townsend wrote a book called People Fuel. He has a concept of the importance of relational nutrients. Just as we need physical nutrients, we need relational nutrients. So, having that one or two people—obviously more is good, but you need at least one or two people that just see you. I think a lot of us feel so ill-equipped to help, to know what to say, to know what to do, so I love what you just said, "Just listen." Just someone's presence communicates acceptance. "I'm going to sit with you in this. I have no idea what to say. But I see you and I'm here with you and I accept you." Send a gift card. Send a note. It doesn't even have to be anything special. It could be a text—just act.

MSM: If your heart is saying, I need to do this for that person, then do it. It will make quite the impact in being present for them and knowing that you took the time to do that. A lot of people overthink what you should say, what you should do, and it's uncomfortable. And you could just say, "I don't know what to say or do for you, but I'm here for you. And I love you." It could be as simple as that.

CH: What else do you do to maintain good mental health?

MSM: For me, what I eat is important and fitness has always been a big part of me. So I do work out. I make space for that 5 days a week. Hot yoga, I've been doing a lot of breath work and some meditation as well. That helps me calm my nervous system and builds that resiliency as well for what's piling up. I also make space. As much as we feel guilty sometimes making that space, I'm just a better mom. So I've gone to a couple of grieving retreats. I felt guilty, leaving for two or three days, even though they were with my mom. But I had to make that space for me too. I had to heal as well. Then I could physically show up better for them. So I did explain that to them, and I know they understand that now. But it's so important to do that work, even when we could say, "I don't have time." I just start with 10 minutes a day, just even journaling, waking up a little bit earlier. That's where I find that space. I have so much more clarity as to where I need to go next, and I feel calmer. I can handle more challenges when my kids are overwhelmed because they'll co-regulate with me. They've still got lots of emotions going on with the loss of their father. So I'm better prepared for that.

CH: One thing that we just can't overlook—a very common thread in your journey from chapter 1 through the very end of your book is your faith. This would be a very difficult journey for most people, and for some it would rock their faith. Maybe it would cause them to "lose their faith." But for you, your experience seemed to actually strengthen your faith in spite of all the pain and the struggle, and the struggle for your children. Instead of blaming God, you actually seem to have a stronger faith in spite of this. Why do you think that is?

MSM: God showed me so many miracles along the way that it did strengthen. I knew I needed more of God and connection. Actually through my breath and meditation, that's how I truly connect. It grew my faith because I really saw how He worked. It was clear to me that God was guiding me and helping me all along.

CH: I want to thank you for writing this book and for speaking on behalf of dentists. How can people find you?

MSM: My website is melissagratitude.life. There are resources there: books, recommendations to find counselors, many on Zoom, sessions for breath work virtually, in person, or groups. I can be reached there for speaking engagements. I also am on social media. My Instagram is [Melissa_gratitude](https://www.instagram.com/Melissa_gratitude) and my Facebook is [Melissa Sue Methven](https://www.facebook.com/MelissaSueMethven). My book, [The Truth Behind the Smiles](#), can be found on Amazon and the Audible version should be out any day now.

Thank you so much for the opportunity. This is really beautiful. I love being able to share Scott. My son says, "I don't want to forget dad." I said, "We'll never forget dad. We will keep sharing him. His legacy will live on." I want everybody to choose to live.