# I’m a doctor and autistic. This is why I kept my diagnosis secret

## Consultant anaesthetist Mary Doherty worried her career would be threatened when she was diagnosed at 45 — but discovered she wasn’t alone

*Mary Doherty. The “biggest group [of autistic medical professionals] are general practitioners, then it’s psychiatrists, then anaesthetists”, she says*
*TOM JACKSON FOR THE TIMES MAGAZINE*

Mary Doherty had cancer but wouldn’t know about it for another year. An urgent biopsy would have shown up the disease, but she never made the call to book one. She couldn’t get past the anxiety of picking up the phone.

What makes this scenario more surprising is that Doherty is a consultant anaesthetist. She is aware of the potential consequences of inaction in the face of a medical concern, having worked with hundreds if not thousands of patients with diseases and tumours that are not picked up until it’s too late.

So why couldn’t she make a simple phone call? Because she is autistic, and being a top health professional did not mean she could escape the white-hot grip of her fear of that unpredictable conversation over the phone.

Autistic trainee doctors report losing their place in medical school, Doherty says
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In her local surgery 12 months later — an appointment she booked via email — the GP checked her notes and spotted she hadn't gone for the biopsy.

"I then had to admit that I didn't, and explain why. I felt ashamed," Doherty says. "In the end, my GP sorted out an appointment for me and I had a delayed diagnosis of skin cancer, which is now fine after surgery. I was very, very lucky."

Most of those within the autistic community know the overwhelming dread of making what the non-autistic world considers a "simple" phone call.

This anxiety, combined with the fact that most medical journeys begin with a phone call, is one reason autistic people die an average of six to sixteen years earlier than "neurotypicals" — non-autistic people — according to two studies by University College London (UCL) and the Karolinska Institute in Sweden.

"For me, the difficulty with a phone call is not knowing who is going to answer or what's going to be said," explains Doherty, who works at Our Lady's Hospital in Navan, Co Meath, in Ireland.

"Then there is the processing time," she says, drawing an analogy between the autistic brain and a computer program. "It takes a while to boot up. We need that extra time to process what's been said, but on a phone call you don't get it and you're scared of being thought of as weird, and then all those horrible experiences throughout your life of being thought of as stupid come back to you… The stress just builds and builds."

• **Later-life autism diagnoses are helping many make sense of their problems**

Doherty is an internationally recognised expert on why autistic people die early. At work, she marches across the hospital to speak to colleagues rather than calling them.

Eleven years ago, she had no idea why phone calls caused her such anxiety — nor why she found the lights flickering in the corridors so painful, why she misunderstood her colleagues, or why she

was terrible at small talk. It all became clear at the age of 45, when she received her diagnosis.

It helped her make sense of her childhood. Highly academic, she had buried herself in books and preferred the company of adults, who were less erratic than her peers. She was, in her words, “the classic ‘little professor type’ of autistic child”.

“I didn’t book my own cancer biopsy for fear of making the call,” Doherty admits
TOM JACKSON FOR THE TIMES MAGAZINE. HAIR AND MAKE-UP: NICOLE FAIRFIELD USING GHD AND ICONIC LONDON

“Dogs were an intense interest,” she recalls. “I spent hours reading the Kennel Club breed standards. I knew the ideal requirements for all breeds of dog.”

Because her father died suddenly when she was seven, her social differences were put down to this traumatic experience. Often suffering from abdominal pain, her early experiences with doctors were that they didn’t believe she was in pain. This made her determined to be a doctor when she grew up — one who would always believe her patients.

In her twenties, Doherty decided to train as an anaesthetist “for very autistic reasons”, she explains. “I liked the predictability, the fact that we generally give our complete focus to one patient at a time, rather than managing many patients simultaneously. And my sensory differences mean I love wearing scrubs.”

But it was only after her son was diagnosed as autistic in 2013 that she began researching the condition. “My son and I are so alike. I thought, ‘If he is, then I am.’ ” Doherty received her diagnosis in 2013, and believes her own mother was autistic too, but died never having known.

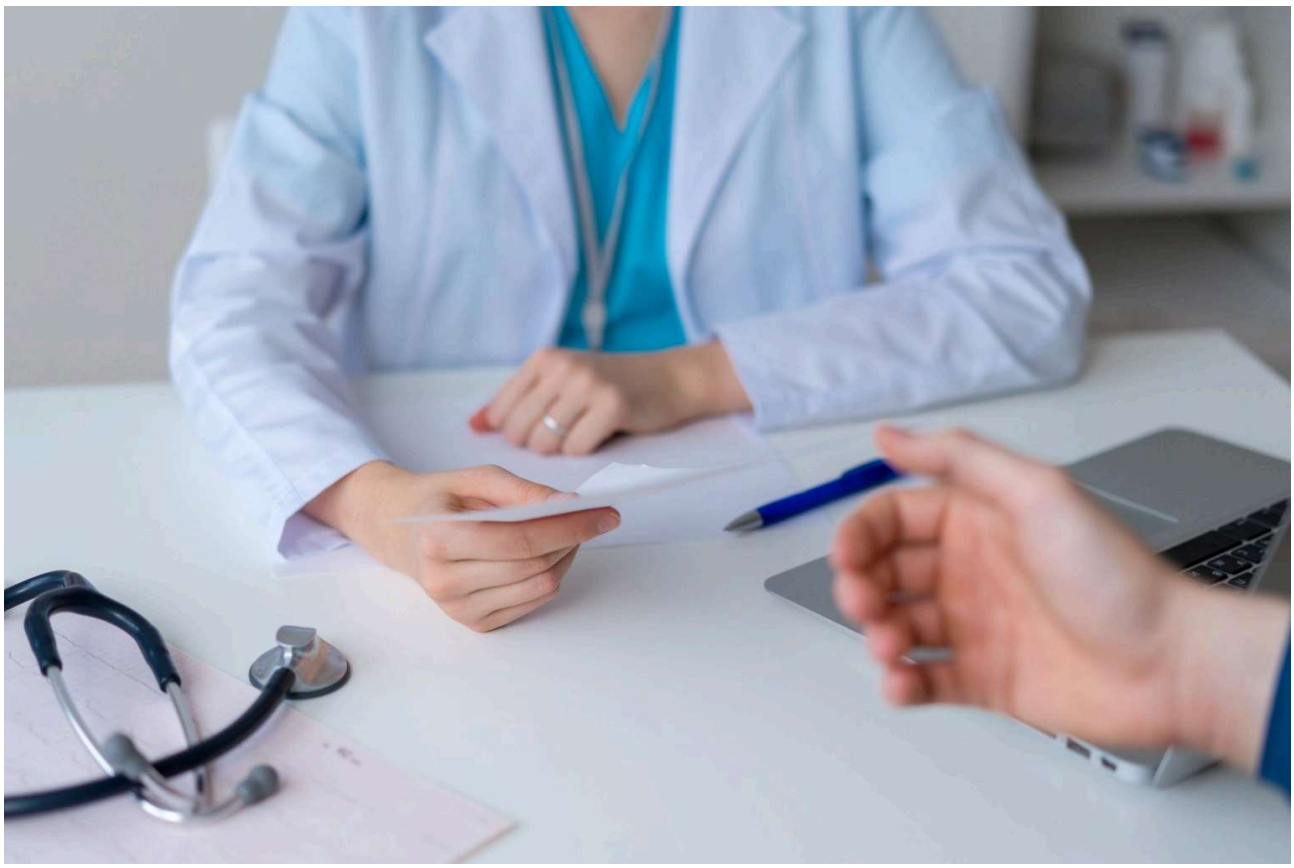
The diagnosis initially made her worry she might no longer be able to practise medicine. “I was like, ‘Can you be autistic and be a doctor?’ I was genuinely afraid for my career, because when I looked, there weren’t any other autistic doctors. It took me quite a while to find them.”

Over time, she realised there were plenty of doctors like her out there — they just weren’t making it known for fear of consequences to their career if they did.

In 2019, she set up Autistic Doctors International (ADI), which now has more than 1,000 members worldwide. The group supports autistic doctors, many of whom are keeping their diagnosis a secret. On the ADI website, 4 of the 17 doctors on its senior leadership team are anonymous.

It’s hard to imagine many other diagnoses that doctors would keep secret, but the impact of disclosure can be severe, according to Doherty. There are doctors in training who have contacted ADI in recent years after losing their place in medical school or on a training scheme after disclosing their condition, she says, with one member asking for help from the group when they received the following communication after a routine performance review:

“The panel regrets to learn of your recent diagnosis of ASD [autism spectrum disorder], but since this is a life-long developmental syndrome which causes permanent impairment of many of the competences required for independent practice as a GP, the panel cannot see how any workplace adaptations could now be put in place to successfully alter your outcome.”



“Some people report ‘masking’ or ‘camouflaging’ their autism, based on fear or embarrassment of exploring an autism diagnosis,” says Professor Sir Simon Baron-Cohen
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“The decision was overturned with the support of ADI,” Doherty says. “The autistic trainee was reinstated and received an apology.”

While no research exists to establish true numbers, Doherty estimates that autistic people are overrepresented in the medical profession compared with the general population (1 in 36 people are autistic in the UK, according to the most recent data), because medicine plays to autistic strengths.

So why do we think autistic people can’t or shouldn’t be doctors? “Because autism is very much conflated with intellectual disabilities, and because of the myth that autistic people can’t be empathetic. And if you don’t have empathy, you can’t possibly care for patients,” Doherty says.

This invisible minority of autistic doctors is not to be found in the fields of medicine you might expect either.

“People tend to assume that we are all pathologists, microbiologists and radiologists — people who spend their days looking down a microscope,” Doherty says. “But our biggest group are general practitioners, then it’s psychiatrists, then anaesthetists.

“The stereotypes are most challenging for our psychiatrists, because it is such a relational speciality. And the perceived lack of empathy is an absolute myth, but it is so pervasive. Psychiatrists in the UK tell me, ‘There are loads of us,’ but they can’t come out and be openly autistic.”

An autistic psychiatrist (who wants to remain anonymous) believes the situation has parallels with the treatment of gay health professionals who have not always felt able to be “out” at work for fear it would have an impact on how patients and colleagues view them.

• **‘Labs aren’t designed for people like me’**

“I’m a consultant and while there are a lot of relatively junior doctors coming out saying that they’re neurodivergent, there are very few senior doctors doing this,” the psychiatrist says.

“A particular worry is that because of misconceptions about autism and empathy, people would assume that I’m cold or that I would not be able to care properly,” the psychiatrist continues, “when the reality is, for some autistic people, me included, emotions can be an area of intense interest. Also if you have ADHD, people think that you will make mistakes.”

The psychiatrist adds that it’s possible that the older doctors don’t know they are autistic. Many of these professionals won’t appear autistic because they are so skilled at hiding it. One extra lesson autistic people will have learnt at school, both consciously and unconsciously, is to appear more neurotypical to protect themselves from bullying and rejection. “Learning neurotypical communication is like learning and speaking a different language,” Doherty says. “I have studied hard and speak ‘neurotypical’ pretty well at this stage, although I’ll never get to the fluency of a native.”

Professor Sir Simon Baron-Cohen, director of the Autism Research Centre at Cambridge University and a fellow at Trinity College, says that “destigmatising autism is essential”, although the condition is “less stigmatised than it used to be, in part because of the neurodiversity framework, which emphasises that autism is both a difference as well as a disability and that the differences include strengths and even talents”.

There is still evidence of continuing stigma, he adds, “because some people report ‘masking’ or ‘camouflaging’ their autism, based on fear or embarrassment of exploring an autism diagnosis. This can lead to later diagnosis, which itself has been found to be associated with worse mental health.”

The perception that autistic people lack empathy is one factor why more ASD doctors don’t “come out”, and it is Baron-Cohen’s research — which he argues has sometimes been misinterpreted — that is behind this stereotype.

“Autistic people are dying earlier from other conditions — cancer, heart disease, stroke,” Doherty says, “and that is purely an issue of access to healthcare”
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He showed there are two components to empathy: the ability to know what someone is thinking or feeling, for example being sad or distressed (“cognitive” empathy); and the drive to respond to another person’s thoughts and feelings with an appropriate emotion, for example by wanting to alleviate the person’s distress (“affective” empathy).

Baron-Cohen found that, compared with neurotypical people, autistic people often struggle to do the former but are no different in the latter. He has argued that autistic people are the mirror opposite to psychopaths, who can read someone’s thoughts and feelings to a high level but lack the “appropriate” emotional response to these — in short, that while autistic people care about others’ thoughts and feelings, psychopaths do not.

That autistic people lack empathy has taken hold in the public imagination. Many autistic adults report having developed cognitive empathy by working and studying very hard at it.

“I don’t think people realise that you may not be born intuitively able to read someone else, but you can learn and get incredibly good at it, as is demonstrated by the large numbers of psychiatrists and psychotherapists who are autistic,” Doherty says. “But it remains cognitive, so it’s harder work.”

As well as supporting colleagues, ADI is leading research looking at the terrible health outcomes for autistic people.

“There are health conditions that are associated with being autistic, such as epilepsy, that do increase mortality. But autistic people are dying earlier from other conditions — cancer, heart disease, stroke — and that is purely an issue of access to healthcare,” she says.

And then communication differences can mean autistic people’s description of pain is dismissed — as Doherty believes it was when she was young and trying to explain her abdominal pain to disbelieving GPs. Early research is showing that autistic people can find it harder to be aware of what is going on inside their bodies — that the internal sensory system that allows them to be aware of their physical and emotional states, both consciously and subconsciously, doesn’t work as it should — so may not realise they are unwell until things are at a more progressed stage.

Doherty's research highlights that autistic people often avoid doctors until it's an emergency — their first interaction with healthcare is more likely to be A&E. One autistic adult surveyed said they were hit by a car and not only didn't seek emergency help at hospital but didn't see a doctor at all. Does that surprise Doherty? "Not at all. Being in an environment where it's really noisy, with flashing lights and lots of people bumping into you, touching you, could almost be designed to stress autistic people out," she explains. "It's the equivalent of being in a nightclub when you're unwell. Even usually articulate autistic people can completely lose access to fluent speech under that pressure.

"For autistic doctors working in this environment, it's very stressful, but it's much easier now I can be openly autistic and say to colleagues, 'Tough day; necessary words only.' It cuts down the amount of masking that I have to do."

One of the most effective ways to tackle premature death, Doherty adds, is ultimately to tackle society's view of autism, reducing the need to mask as a coping strategy.

Autism needs to be framed as a valid way of being, rather than as a disorder or something that needs fixing. "The message that it's possible to be autistic and thrive is the message autistic people need to hear."

With the good fortune to have a caring and flexible GP, and to know now how to navigate the system, Doherty has come to an agreement with her local practice that allows her to email to make an appointment, with her doctor arranging the ones that have to be done on the phone.

This is not a luxury afforded to all, however, and Doherty is certain it would save lives if autistic people could book appointments without having to pick up the phone. While she waits for the healthcare system to change — as it inevitably must, with the help of her research — she is raising her children to work around it.

"My son is at school — I don't give a toss if he speaks to his peers in the playground. What matters is that he can speak to adults and advocate for his needs, including with doctors. I hope when he's an adult he won't have to book a biopsy by making a phone call."

**Jessie Hewitson is the author of *Autism: How to Raise a Happy Autistic Child* (Orion Spring, £16.99), recently reissued with a new chapter on healthcare. To order a copy go to timesbookshop.co.uk or call 020 3176 2935. Free UK standard P&P on online orders over £25. Special discount available for Times+ members**