

Silent Epidemic

SUICIDE AND ADDICTION AMONGST FIRST RESPONDERS

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PTSD

DanSun Photo Art

How Trauma Works in the Brain

- ▶ **According to the National Institute of Health: Post-traumatic stress disorder (PTSD)** may develop after exposure to an event that is beyond a typical stressor. Events that may lead to PTSD include, but are not limited to, violent personal assaults, natural or human-caused disasters, accidents, combat, and other forms of violence. Exposure to events like these is common. People who experience PTSD may have persistent, frightening thoughts and memories of the event(s), experience sleep problems, feel detached or numb, or may be easily startled. In severe forms, PTSD can significantly reduce a person's ability to function at work, at home, and socially.
- ▶ Dr. Gabor Mate feels that most substance use disorders are directly related to untreated or undertreated trauma.

PTSD Continued



- ▶ **Fight-or-flight** response Alarm.
- ▶ Stress hormone **cortisol**
- ▶ The prefrontal cortex acts as a **braking system**
- ▶ PTSD = amygdala becomes **hyperactive** while the medial prefrontal cortex becomes **hypoactive**.
- ▶ Fight-or-flight response responds **too strongly**, disproportionate to the danger

How One Develops a Substance Use Disorder

- ▶ For 1st responders, a Substance Use Disorder (SUD) usually begins as a way to **blow off steam**, build camaraderie and/or self-medicate painful feelings.
- ▶ As the SUD continues, the brain becomes used to and reliant upon large **releases of dopamine** – a feel good neurotransmitter.
- ▶ With continued drug use and withdrawal, the “**anti-reward**” system is enlisted to counterbalance excess Dopamine (with the stress hormone Corticotropin Releasing Factor)
- ▶ The brain is unable to maintain normal “**homeostasis**”
- ▶ So the brain reverts to “**allostasis**” – changes the hedonic “set point” under stress in a desperate attempt to maintain stability = tolerance and cravings.
- ▶ Dr. Kevin McCauley

Relapse in the 1st Responder

- ▶ 1. **Re-exposure to drug** (alcohol is a drug) itself (Dopamine release in Nucleus Accumbens) - drug-induced reinstatement
- ▶ 2. **Exposure to drug cues** (Glutamate release in Amygdala/Hippocampus) - cue-induced reinstatement
- ▶ 3. **Exposure to Environmental Stress** (Corticotropin Releasing Factor release in Amygdala)
- ▶ Dr. George Koob

Rate of Suicide/Addiction Amongst 1st Responders

Surveys by the Center for Fire Rescue and EMS Health Research (CFREHR) revealed that:

- **Eighty-five** percent of career fire fighters reported past-month drinking.
- Career fire fighters reported drinking **10-20 days a month**, or about half of their off-duty days.
- **Twice** as many firefighters in the U.S. die by suicide than in the line of duty.

“It's estimated that only half of all firefighters' suicides are actually reported, so the numbers could actually be much higher.” Reported by CBS News

Rate of Suicide/Addiction Amongst 1st Responders

According to SAMHSA

- 20-30% of police officers have **substance use disorders**. For the general population, the rate is 10%.
- Between 7% and 19% of police officers have diagnosed **Post-Traumatic Stress Disorder**.
- Police officers die from **suicide** at a higher rate than they do from homicide. The rate of death by suicide is 2.3 times that of line of duty death.

Rate of Suicide/Addiction Amongst 1st Responders

- ▶ The National Institute of Health study of 298 firefighter and 84 EMT suicides
- ▶ EMS/EMT = Depression, Sleep deprivation and PTSD
- ▶ Substance use is much higher among paramedics and EMTs compared to other emergency responder professions.

Commonly Used Substances of Abuse Among 1st Responders

- ▶ **Nicotine**
- ▶ **Alcohol**
- ▶ **Steroids**
- ▶ **Opioids**
- ▶ **Benzodiazepines**
- ▶ **ADD/ADHD Medications**
- ▶ **Cocaine**
- ▶ **Sleep Medications – Lunesta, Ambien**
- ▶ **Vistaril**
- ▶ **Methamphetamine**
- ▶ **Provigil**

Signs of a Mental Health or Substance Concern

- ✓ loss of interest in hobbies or passions
- ✓ memory loss
- ✓ increased anxiety
- ✓ depressive episodes
- ✓ fluctuating energy levels
- ✓ mood swings
- ✓ irritability or aggravation
- ✓ aggressive behavior
- ✓ inability to cope with stress
- ✓ confusion
- ✓ defensiveness
- ✓ financial problems
- ✓ withdrawal from friends, family, or social activities
- ✓ frequently lying
- ✓ changes in work performance
- ✓ missing important meetings, gatherings, or events
- ✓ legal issues
- ✓ “disappearing on duty”
- ✓ relationship conflicts
- ✓ excessive time off
- ✓ using/drinking on duty

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HARBOR OF HOPE

AT STARLITE RECOVERY CENTER

At Starlite Recovery Center, we offer services specifically for first responders who are struggling with behavioral health concerns. Through our Harbor of Hope program, we aim to help our patients who selflessly serve their communities lay a foundation for lasting healing.

Harbor of Hope

www.StarliteRecovery.com/programs/first-responders/

Please help us help those dedicated to helping others. Thank you for your attention!