

Dr. Robert Hedaya:

Hi, I'm Dr. Robert Hedaya and I'd like to talk with you about a very difficult topic, suicide. Statistics show a clear rise in suicide frequency with the highest risk being in White middle aged males, although it occurs in all age groups. In my nearly 40 year career, I've treated countless people who have felt suicidal to varying degrees. I've been able to prevent suicide in all cases, largely because I work hard to understand the nature of their depression and anxiety, I connect intensively to my patients. I remain in close contact, and I have a very high sensitivity to suicide risk factors. Also, I use Lithium or hospitalization whenever I'm uncomfortable with the risk. Lithium, aside from Clozaril, which is a complicated medicine to administer, is the only medication known to reduce the risk of suicide, while other medications may actually increase the risk of suicide.

Dr. Robert Hedaya:

Over the years, I've briefly known two people not under my care who committed suicide. Both were middle aged males, as the statistics would predict, and they were recently released from the psychiatric hospital. Both had lost their successful careers and one had divorced his wife as well. These rapid changes in social structure and economic turmoil were more than these previously stable men could bear. They became isolated and alone. Despite the efforts of others, I had the opportunity to speak with both of these men shortly before their suicide and I believe that I understand what their mindset was. So let me try to convey that to you.

Dr. Robert Hedaya:

First, you need to understand that the person who is contemplating suicide is in a completely different experience of reality than the average depressed person, whether the desire to die is triggered by actual loss or the threat of impending loss, complete helplessness and hopelessness follow, often along with intense fear, agitation, and or panic. Most importantly, the suicidal person sees absolutely no way out of their predicament. This perception appears so real and undeniable because of their cognitive and emotional capacities which are diminished that they have lost cognitive and emotional flexibility and the brain is not functioning in a robust, proper manner and the power of will to imagine a life beyond their predicament is absent.

Dr. Robert Hedaya:

Even their predictions are not based in fact, and I know that because I've seen countless lives turned around. They have lost all hope in any possibility to have a normal life. The crux of what I've learned is that the actively suicidal person experiences circumstances literally closing in on them, trapping them like a slowly closing noose around their neck and it results in a psychological tunnel vision leaving no possible hope of any way out, no hope at all, of any relief or recovery. The perceptions of the two men I mentioned also changed in another subtle way. They both began to look at the world in a different way, feeling literally separate from all the people around them. They began to disconnect, becoming observers of everything and participants in nothing.

Dr. Robert Hedaya:

What causes suicide? We know that a history of childhood abuse, substance abuse, current economic turmoil, recent, rapid changes in social structure, social isolation are the outward circumstances, but we also know that biological problems play a very prominent, but all too often ignored role. These biological causes make it hard for the person to cope with and resolve their very real circumstantial problems. But generally, these problems are never evaluated and treated, and because of these circumstances and

psychosocial issues are so prominent, the biology is ignored and this makes things worse. What are some of these biological changes? Under the stress of circumstances or in the presence of hidden infections, serotonin levels drop severely, causing depression.

Dr. Robert Hedaya:

The stress response mediated by cortisol and noradrenaline rises excessively, causing panic, agitation, insomnia. Infectious and inflammatory markers are elevated, contributing to the neurochemical imbalance. Markers of brain flexibility called neuro-plasticity show recoverable changes. Even brain trauma or undiscovered tumors can contribute to suicidal feelings. People who are suicidal are drowning in a sea of disturbed biology and disturbed life events. All of this is important because we must understand that the person who is planning suicide is living in a qualitatively different world than we are and we must all raise awareness that the suicide note bears an invisible but important biological signature.