

The most likely explanation for the alcohol induced rise in suicide in Ireland is due to a number of factors:

- Alcohol is a depressant. About 50% of problematic drinkers experience alcohol-induced depression at some time in their drinking life. Alcohol can make a good humoured person feel depressed; it can make a mildly flat person feel significantly depressed, and it can make a mildly depressed person feel profoundly depressed and suicidal.
- Alcohol also disinhibits the drinker, and it may allow a suicidal person to act on those suicidal ideas which they wouldn't do if "sober but depressed".
- Binge pattern drinking is much more associated with completed suicide than steady heavy drinking (the pattern of drinking in Southern Europe), and thus we have a much higher alcohol induced rate in Ireland than in many other countries in the world.

Treatment & Recovery in Addiction

Addiction is a treatable disease. Treatment is a combination of medication and behavioural therapy. Medication can be used to treat withdrawals, help a person stay in treatment and prevent relapse. Behavioural therapies help people to engage in treatment, modify their attitude and addictive behaviours and increase their life skills to handle stress and environmental cues that trigger intense craving.

Addiction can affect so many aspects of a person's life. Successful recovery treatment must address all the needs of the person. Treatment can be a comprehensive programme and may involve a number of rehabilitative strategies, settings, healthcare and other professionals.

References available on request:
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Summary: Key Facts and Figures

- Alcohol is a depressant. About 50% of problematic drinkers experience alcohol-induced depression at some stage in their drinking life
- Over half of all Irish drinkers have a harmful pattern of drinking, that's 4 in 10 women and 7 in 10 men who drink
- In 2010, the average Irish person aged 15+ drank 11.9 litres of pure alcohol, according to provisional data. That's the equivalent of about 44 bottles of vodka, 470 pints or 124 bottles of wine per person.
- A higher proportion of Irish women drink compared with women in other European countries (77% compared to 68%)
- In Ireland if you complete suicide and are under 30, you have a 93% chance of having alcohol in your bloodstream.
- Ireland continues to rank among the highest consumers of alcohol in the 26 countries in the enlarged EU. We drink about 20% more than the average European Country
- Alcohol was consumed in 4 out of ten of self harm episodes in Ireland in 2010
- Alcohol related illnesses cost the healthcare system €1.2 billion in 2007
- The figure for alcohol-induced cost to society is in the order of €2bn per annum. It consists of lost employment days, costs of insurance, costs of morbidity and mortality, indirect health costs, and direct costs of treatment of alcohol related disorders

In 2008 The College of Psychiatry of Ireland called for a ban on alcohol advertising and sports sponsorship in Ireland to protect children and adolescents.



A Relationship Gone Wrong- Alcohol & Your Mental Health.



The College of Psychiatry of Ireland
Caidéad Síciatrachais na hÉireann
www.irishpsychiatry.ie

A Relationship Gone Wrong- Alcohol & Your Mental Health

“While much debate has taken place recently about alcohol, we have failed to draw out the reasons why so many people have troubled relationships with it. The reasons we drink and the consequences of excessive drinking are intimately linked with our mental health, and this holds the key to dealing with growing worries about alcohol misuse.”¹

A better understanding of mental health is needed if we are to tackle some of the major health, economic and social burdens that face current generations and those ahead.

Use of alcohol is a key factor in the mental health of the general population.

The consequences of excessive drinking are intimately linked with our mental health.

Why We Use Alcohol

Alcohol is woven into many areas of our lives. It helps us to relax, feel brave, celebrate life events, drown our sorrows, remember, forget, welcome people, say goodbye to people, and get to know people.

We consume alcohol because we feel like it, because we need it, to numb ourselves, to feel grown up, to feel young, to belong, to distinguish ourselves. Sometimes, it is simply because we've forgotten how to do anything without alcohol.

At the simplest level, alcohol is often drunk to alter our mood and change our mental state.

Research shows that people who consume high amounts of alcohol are vulnerable to higher levels of mental ill health. According to the WHO *“Sufficient evidence now exists to*

Mood, Mental Health & Alcohol

Alcohol is essentially a toxic substance. It directly and indirectly affects the chemistry of the brain and the systems in our body. The initial impact of an alcoholic drink incurs immediate chemical changes, producing a “winding down” or relaxing feeling in the brain’s nerve cells (neurons). As more alcohol is consumed, increasingly sensitive parts of the brain become affected and behaviour changes accordingly.

The first drink for many people depresses the parts of the brain that are associated with inhibition. This increases talking, self-confidence and reduces social anxiety. As more alcohol enters the bloodstream, the areas of the brain associated with emotions and movement are affected, often resulting in exaggerated states of emotion (anger, withdrawal, depression or aggressiveness) and uncoordinated muscle movements.

People with severe and enduring mental illnesses such as schizophrenia are at least three times as likely to be alcohol dependent as the general population.

At first people may only notice the positive effects. Over time the positive effects become less and alcohol use is needed to feel “normal”.

No single factor determines whether a person will become addicted to alcohol. The risks for addiction are caused by the interaction between biology and genes of a person, the environment they are in, the stress they are under and how they use alcohol.

Problem drinking can cause a range of problems. Family conflict, job loss and financial problems are just some of the complications. These in turn are likely to result in increased levels of anxiety and depression.

What is Dual Diagnosis?

The co-existence of alcohol problems and mental ill-health is very common and often reported as “dual-diagnosis”—that is, people are unwell with both alcohol misuse and mental ill-health.

The relationship between the two is a complex one. Many will use alcohol for the same reasons as everyone else, some will “self-medicate” with alcohol and for others the presence of either a mental illness or alcohol problem makes them more vulnerable to develop the other.²

Suicide, Self harm & Alcohol

The reasons and factors for suicide are complex and multifaceted, but it is recognised that patterns of problem alcohol use contribute significantly to the high rate of suicide among young Irish men in particular.

The connection between alcohol use and suicide has been highlighted in numerous reports, both Irish and international.

In a study (Bedford, O’Farrell and Howell 2006) of people from three counties who died as a result of suicide, more than half had alcohol in their blood; those aged less than 30 were more likely to have had alcohol in their blood at the time of death.³

While rare as a method of self harm, alcohol was involved in 40% of cases. Alcohol was significantly more common in male deliberate self harm episodes (44%) than in female episodes (37%). Alcohol may be one of the factors underlying the pattern of presentations with deliberate self harm by time of day and day of week. Presentations peaked in the hours around midnight and almost one-third of all presentations occurred on Sundays and Mondays. In addition, the Registry identified an increased number of self harm presentations to hospital with some public holidays.⁴

² Mental Health and Addiction Services and the Management of Dual Diagnosis in Ireland” National Advisory Committee on Drugs (2004)

³ Blood alcohol levels in persons who died from accidents and suicide. Bedford D, O’Farrell A, Howell F. Ir Med J. 2006 Mar;99(3):80-3.

⁴ National Registry of Deliberate Self Harm Ireland Annual Report 2010 National Suicide Research Foundation (2010).

¹ “Understanding the Relationship between Alcohol & Mental Health”. Mental Health Foundation (2006)