Missing Link: “When We Talk About Depression, We Need to Talk about Addiction”

I tried suicide because I was depressed from the booze I guzzled. Why is substance use absent from the suicide & depression conversation?

June 22, 2018 By Jamie Brickhouse

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*Trigger warning: This story addresses suicide. If you or a loved one is struggling, call the National Suicide Prevention Lifeline at 1-800-273-TALK (8255).

Note: The article was originally published in The Daily Beast (June 16, 2018) but without the first paragraph--sentences I think are important, as they show that some addiction experts keep willing to defend the fantasy that people who ostensibly have it together can drink excessively with impunity.

In 2014, addiction expert Stanton Peele essentially gave Bourdain a free pass for drinking in a Psychology Today article titled “Anthony Bourdain’s Addiction Report Card.” In the piece he asserts that even though Bourdain still drank despite quitting hard drugs he “is not a 12-step, abstinence automaton-nut. He has a good life, and he knows how to keep it.”

A lot can change in a few years.

No one can say definitively why Kate Spade or Anthony Bourdain committed suicide. But I can tell you why I tried to kill myself. Twice.

Had either attempt been successful, they’d have called it an overdose, maybe not even mentioning how my depression had been brought on by alcoholism. What shocks me about the deaths of Spade and Bourdain is the near-total silence about the symbiosis of depression and substance use. Experts forget to point out that alcohol is a depressant, and when the high of drugs evaporates the lows sink you faster than walking into a river with rocks in your pocket. The U.S. National Library of Medicine National Institute of Health reports that heavy alcohol consumers had a five-fold higher risk of suicide more than social drinkers, and mood and substance use disorders, particularly alcoholism, are the most prevalent disorders in suicides.

And guess what? Most of the people who died by their own hands had alcohol or some sort of drug in their blood, according to a CDC report released last week about the 25 percent rise in suicide

rates from 1996 to 2016. They go hand-in-hand—the suicidal tend to be depressed.

One summer afternoon in 1995—I was 27—with my office door closed and speaking sotto voce, I called the Employee Assistance Program. I didn't call because I was suicidal or thought I was an alcoholic; I called because I couldn't shake the "mean reds," the name I borrowed from what Truman Capote's Holly Golightly called "undefined malaise" in Breakfast at Tiffany's. Some might call that depression. I now know I was already alcoholic (drinking every day, binge drinking on the weekends, with a scintilla of recreational drugs like cocaine).

So EAP found me a therapist. The therapist didn't get my jokes (probably chose not to indulge my using humor to deflect), and I didn't like his office décor. I stopped going after session two. He never asked about my alcohol and drug use.

The following fall I came home sloshed after a glamorous book party that I'd organized as the publicist. But rather than celebrating my success, I felt like I'd never obtain the artistic achievements of the writers there. I didn't know I was an alcoholic or that alcohol was a depressant. I saw alcohol instead as a mood lifter, a boost. I viewed the world through the distorted lens of melting ice. I forgot my fancy job and the man who loved me. Instead I impulsively took some leftover pain killers and crawled into bed next to that man.

Luckily, I woke up. And I never told him—or anybody else.

Eleven years later, having failed to sober up, I declared myself a "high-functioning" alcoholic. My scintillas of cocaine had become tablespoons. I'd been fired from one job and was close to losing the replacement. Those were the external reasons for wanting to die.

The real reason: depression brought on by ingesting a silo of booze around the clock that left me paralyzed in the bed and wishing I were dead. This kind of behavior and thinking is common in late-stage alcoholism.

But what made this progressively worse was the fact that for months, I'd been fantasizing about suicide. One morning, after about four drinks (I was probably still drunk from the night before), I grabbed a fistful of sleeping pills. My common-law husband found me.

I went to rehab and started getting sober. That was in 2006. It took till 2008 to get me off the stuff that looked like a helping hand to my awful life but which was, in fact, killing me. Therapy and the help of other drunks and addicts saved me. I've never taken antidepressants, because (it turned out) I don't actually suffer from clinical depression. I do suffer from the disease of alcoholism. Booze-causing depression led me to try suicide. Alcohol and drugs allow many suicidal folks to pull the trigger, swallow the pills, take the leap, tie the knot.

Shortly after the twin tragedies of Spade and Bourdain, the New York Times published lengthy advice from experts about what to do when someone is severely depressed. Not one them mentioned the role alcohol and drugs can play. I find that irresponsible, negligent at best.

The suggestion was that perhaps those who died by their own hands had not been watched closely enough for those telltale signs. If you're looking for warnings, excessive drinking and drugging is a sign larger than the old Canadian Club Whiskey billboard in Times Square. The last stage of alcoholism before the alcoholic either dies or gets sober is a sense of hopelessness. Isn't hopelessness a synonym for depression?

No one can completely parse out the complex factors that led to the deaths of Spade and Bourdain. We know from her family that Spade suffered from depression and anxiety, and there are conflicting reports that she drank excessively. We don't know that Bourdain ever suffered from clinical depression, but we do know directly from him that he had been an abuser of cocaine and heroin. We also know from watching his TV show that he drank excessively. Why does no one mention this?

I am an abstinence automaton-nut. Alcohol and drugs are so ingrained in our culture we still have a hard time admitting their often fatal effects. Mental illness is slightly less stigmatized now—especially depression—but addiction is still weighed down by the antique perception that it's a moral failing and with will power, the strong person can hold his liquor. So rather than consider Bourdain's bad boy drinking as a possible factor in his death, we'd rather toast it as joie de vivre.

In 12-step meetings a constant refrain I hear from other addicts s that at the end of their using most wanted to die, many considered suicide, and some—like me—even tried it. Even if they weren't drunk or high when they attempted suicide, they had alcohol and drugs in their system, the residual effects being acute depression.

My friend—and full disclosure, literary agency client—the writer Mary Karr, has been sober for nearly 30 years. She classifies her suicidal depression this way: "I speak as a drunk drug addict myself, and suspect I am more like Bourdain than not, for I had twenty-plus years of suicidal ideation and impulsive/self-destructive acts till I got help from other junkies and drunks. Therapy and anti-depressants helped some, but 90 percent of my improved happiness quotient came when I quit ingesting depressants like booze and benzos." Just as we call someone cross-addicted when s/he has more than one addiction, i.e. both drinking and gambling destructively, I think we can call Karr cross-depressed when she has clinical depression from multiple sources such as a history of trauma plus anxiety plus alcoholism.

At some suicide conferences where I have spoken as a SAS (suicide attempt survivor), the rooms brim over with data on mental illness and clinical depression. Suicide is given its statistical due but there is little to no discussion about suicidal depression caused by substance abuse. That's a problem.

It's time to broaden and enrich the definition of depression to include depression caused by alcoholism and drug addiction. The dawn after the black night of the deaths of Kate Spade and Anthony Bourdain is the explosion of the suicide dialogue. I don't think that the conversation about mental illness and clinical depression and suicide should be minimized or diminished. It must continue with loud frequency. However, when we talk about depression—when we talk about

depression, period—it’s imperative that we talk about addiction.

Jamie Brickhouse is a speaker about suicide and alcoholic depression, and is currently touring his award-winning solo show based on his memoir, Dangerous When Wet: Booze, Sex, and My Mother.

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