



Cause and Effect

Studies indicate that the use and abuse of drugs and/or alcohol are often a contributing factor in accidents that lead to brain injury.

When substance abuse continues after a traumatic brain injury, the negative effects multiply and can cause slower recovery. Further problems include difficulty with balance, walking, talking, concentration, memory and an increase in aggression and antisocial behaviors.

Substance abuse makes depression worse and can actually increase the risk of having seizures. Abusing drugs and alcohol also raises the likelihood of sustaining another traumatic brain injury.

Help and Resources

The first step is for the person with either depression or substance abuse to acknowledge that there is a problem.

If you or a loved one is exhibiting signs of depression or if drinking or using other drugs is creating financial, legal, medical, or other problems, it's time to seek assistance.

The Brain Injury Association of Massachusetts (BIA-MA) can provide information and resources regarding psychiatrists, psychotherapists, rehabilitation centers, programs for substance abuse, and more. For more information call the BIA-MA Traumatic Brain Injury Information & Resource Line for Elders (844) 839-7154 or elders@biama.org.



The Massachusetts Rehabilitation Commission (MRC), through its Statewide Head Injury Program (SHIP), proposed the "Improving the MA Systems of Care for Elders Sustaining a Traumatic Brain Injury" project.

This project was designed to fulfill the goals of the Traumatic Brain Injury State Implementation Partnership Program of the Health Resources Services Administration. MRC serves as the lead agency for the administration of this grant project.



BIA-MA is a private, nonprofit organization that provides: **Support** to brain injury survivors and their families; **Prevention Programs** for the public; **Education** for professionals and all affected by brain injury; and **Legislative Advocacy** for safety laws and improved community services for survivors.

BIA-MA collaborates with the Massachusetts Rehabilitation Commission (MRC), Department of Public Health (DPH), Registry of Motor Vehicles (RMV), Executive Office of Elder Affairs (EOEA) and other associations to prevent brain injuries and provide services to survivors.

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Substance Abuse & Depression - English - May 2016

Substance Abuse & Depression In Elders



**Traumatic Brain Injury
Information & Resource Line for Elders**

844-839-7154 | www.biama.org/elders



Recuperating from and living with the effects of a traumatic brain injury can be tremendously challenging. A traumatic brain injury can change a person's life forever. People with traumatic brain injury often suffer from depression or struggle with substance abuse, either of which may have been a problem prior to the brain injury.

Depression

Depression is a common, often debilitating, and sometimes fatal condition. For people with traumatic brain injury, depression is even more common than it is in the general population. Research shows that a brain injury greatly increases the chance that a person will develop depression. For those who have sustained a traumatic brain injury, life's usual challenges are compounded by depression.

Traumatic brain injury survivors may be at increased risk for suicide. Individuals that suffer from depression are also at a greater risk for suicide, with the suicide rate highest in elder populations.

*-The American Foundation
for Suicide Prevention*

Signs & Symptoms

Different people experience depression in different ways. Some feel overwhelmingly tired or lose their appetite, while others become angry. Depression can also worsen cognitive symptom presentation. Symptoms of depression include:

Physical symptoms:

- Changes in sleep patterns
- Changes in appetite
- Fatigue

Emotional symptoms:

- Extreme sadness
- Feelings of helplessness
- Irritability

Behavioral changes:

- Inability to enjoy pleasurable activities
- Withdrawal from others
- Poor self-care or attention to appearance

Substance Abuse

Substance abuse has a major impact on an individual's life. Research shows that when a traumatic brain injury and substance abuse are combined, they have a greater negative effect on the brain than either one has alone.

Based on information about how alcohol and traumatic brain injury combine to affect the brain, the Brain Injury Association of America has concluded that **there is no safe amount for a person with brain injury to drink.**

Aside from legal considerations, drugs and alcohol may interact with prescribed medications and cause additional problems. Taking prescription drugs in greater quantities than prescribed is another form of drug abuse and is not advisable.

Treatment & Recovery

Family members and friends play a very important part in helping an individual with depression or one who is misusing substances. They should support, not criticize, an individual. For example, they can help obtain information about resources in the community, encourage the individual to set up that first appointment or attend a first meeting, and offer transportation.

Survivors have found that after a traumatic brain injury, exercise such as walking makes them feel better. Other helpful actions to reduce depression include non-medical, therapeutic approaches such as biofeedback, hypnosis, massage, yoga, Tai Chi, volunteering, or other structured activities such as taking a class or attending spiritual services.

Most clinicians believe that techniques that are effective for treating substance abuse in the general population can also work for people with traumatic brain injury. However, special considerations or accommodations may be necessary to address the needs of people with traumatic brain injury. Common treatment approaches include motivational interventions, cognitive-behavioral therapy, addiction support groups, or prescription medications.

