

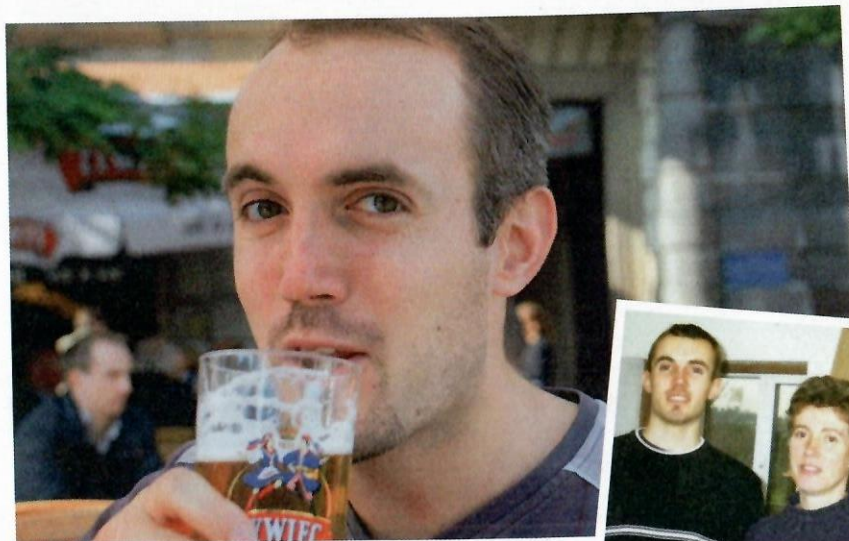


Suicide is the biggest killer of men under 45 in the UK. To mark Mental Health Awareness Week, one brave mother opens up about her own ordeal—and how she's bringing awareness to a hidden condition

My Son's Suicide

BY JOANNA LANE

Our son Chris lay dead on the mortuary slab. Suicide. He was 31. I couldn't believe it—I'd phoned him only two nights ago and everything had seemed normal. And now, his cold face, his dear familiar mouth that would never say anything again. Only his eyebrows felt alive, and I stroked them. It was the start of unending grief for us all. ➤➤



Chris was Joanna's only son;
(right) mother and son together

I tried to get my head round this dreadful thing that had robbed us of him.

The Office of National Statistics states that the most likely cause of death for a man under 45 in the UK is suicide. The number of women who end their own lives is growing, but still in 2014, 76 per cent of the suicides were male. There were over 6,000 suicides that year, and over a third of them were young men like Chris. I was staggered. I'd never imagined such numbers.

Patti Boyle, a solicitor from Coulsdon, Surrey, who lost her 26-year-old son Kevin in 2012, says, "Nothing in life prepares you for the

devastating impact an event like this has on family and friends—and there's very little help.

"That terrible time is indelibly engraved in our minds. Kevin was one of Jamie Oliver's trainee chefs and he was doing well, but he was inconsolable after being diagnosed with diabetes and believed his career would be over. He told me he was going back to work and went off clutching a brown envelope that had been delivered to our house the afternoon before. But he never came back.

"We were frantic with worry and went searching everywhere he could possibly have gone. Goodbye letters

arrived through the post to his friends and to us so we knew he was dead. A hundred and one days after his disappearance, his remains were found in shrubbery near The Downs. The brown envelope had contained a helium death mask ordered from a suicide website. His farewell letters said he'd been abused when he was tiny by our childminder's son and this had preyed upon him."

Patti at least had a reason, but we

head injuries could damage the pituitary gland—causing erectile dysfunction—and that this could be seriously under-diagnosed.

To salvage some good from his death I sorely needed a mission to channel my self-destructive grief into, and now I had one. If I could only warn people.

I read everything I could about the pituitary and emailed every head-injury charity, every suicide group.



HEAD INJURY TRIPLES SUICIDE RISK—CHRIS HAD BEEN IN SPECIAL DANGER

had none. Chris hadn't sent us any message. The only clue came when we found letters between him and his ex-girlfriend, which pointed to sexual difficulties.

I rang her. Yes, she said. He'd never managed full sex in all their four years together. He wouldn't go to see a doctor.

I couldn't bear to think of him failing, being humiliated and miserable for all that time, and I hadn't guessed. My sister was convinced that a serious head injury he'd had aged seven might be the cause. She looked it up and sent me a life-changing email saying yes, research showed that childhood

I learned a lot. My bitterest discovery was when a suicide specialist sent me a Danish population study by Teasdale and Engberg, which showed that head injury tripled suicide risk. Chris had been in special danger, and we hadn't known.

SLOWLY I PIECED together information about the pituitary gland—this tiny blob of flesh, as much a part of Chris as his face and hands—which had apparently been so badly hurt. Dr Mark Porter, BBC's *Inside Health* presenter, describes it as, "a small, vulnerable structure, critical for our well-being. It sits at the base of the brain where it

regulates the actions of eight different hormones, controlling everything from immunity and the thyroid gland, to normal growth, sex drive and fertility. It's the conductor of the hormone orchestra—ensuring the right amount of the right hormones are released at the right time. Without it, chaos ensues.”

As Mr Antonio Belli, consultant neurosurgeon at Queen Elizabeth Hospital, puts it, “People would

head injuries—have some form of pituitary damage.”

According to him, there are about 10,000 head injuries a year needing intensive care, but close to a million head injuries overall. He points out that even a mild football concussion can cause it too, “possibly with similar rates to those seen in severe head injuries.”

Professor Thompson confirmed that hormone replacement can



HE'D SOUGHT HELP FOR HIS DEPRESSION, BUT THE HELP HADN'T BEEN THERE

notice lethargy, for example, feeling fatigued; muscle weakness; loss of libido; infertility and erectile dysfunction are common problems and heat or cold intolerance; in women, periods can stop. So it's very small but it controls a wide range of processes in the body.”

Professor Chris Thompson from Beaumont Hospital Dublin, a world authority on pituitary damage, has published a series of studies showing that people with severe or moderate traumatic brain injury suffer “a one-in-four hit rate.”

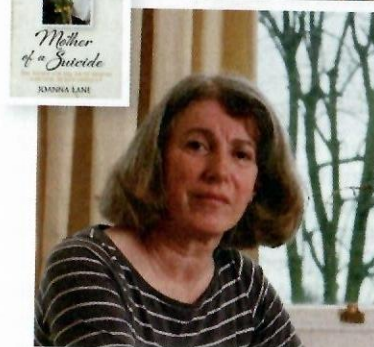
Mr Belli confirms this ratio: “We think probably about a quarter of all severe head injuries—but some people even say half of all severe

improve quality of life dramatically. If only Chris could have had that! I was frantic to reach all those people who might be suicidal and tell them.

Although I knew now that women were as vulnerable as men, I still visualised a young man in despair, whom I could save if I just reached him in time.

How many of them were out there? Mr Belli says, “Some studies suggest a million, some half a million. We're talking very large numbers.” Yet NICE and the Royal Colleges of Medicine would not warn the medical fraternity, no matter how many emails I sent.

From Chris's medical notes we found that although he'd never



talked to a medic about his impotence, he had sought help for his depression, more than once. He'd done his bit. The trouble was, the help hadn't been there.

I traced his story in his notes, wishing I could rewind time. When he first sought help, his clinic at university should have noticed his past head injury and asked about his sex drive and other pituitary symptoms. Later a psychiatrist who

Chris didn't discuss his struggles with his family—and they weren't detected by professionals; (below) Joanna is determined to raise awareness of pituitary damage



saw him should have been alerted—but wasn't, even though psychiatrists are told to check for possible physical causes and their checklist includes head injury. Even his GP had noted “not currently sexually active” without probing further. Nobody picked it up; nobody knew.

I WAS DETERMINED to lift this blanket of ignorance and get the life-saving information onto the internet. I suggested using Chris's story to a scriptwriter and amazingly, *Holby City* featured it. I urged medical websites and head-injury charities to post information, and gradually people with hypopituitarism started to write to me. They'd often tell me that they'd been misdiagnosed with fatigue illnesses, and had to persist, paying for private testing (the short test used by the NHS is unreliable).

One person who wrote was James Smith from Portsmouth. He says, "I was assaulted by a gang in 2007. I was unconscious for four days and

LOOKING OUT FOR YOUR LOVED ONES

BE AWARE of the triggers for suicide: relationship break-ups; bereavement; money worries; job or study stress; depression. Suicide in the family or a history of self-harm can be warning signs.

WATCH OUT for lethargy, tearfulness, abnormal sleeping or eating patterns, self-neglect, alcohol abuse, a tendency to withdraw from favourite activities or family and friends. Statements such as "I'm a waste of space" or "Nobody loves me" should ring alarm bells.

ENCOURAGE him or her to confide their feelings by choosing a good place and time, asking open-ended questions, setting out options without pressure and showing that you care.

REMEMBER depression and a lost sex drive can have a physical cause, especially after a head injury, and if hypopituitarism seems a possibility, get a referral to an endocrinologist. Read up on it beforehand so that you can argue your case. See headinjuryhypo.org.uk for details.

VISIT samaritans.org for more advice.

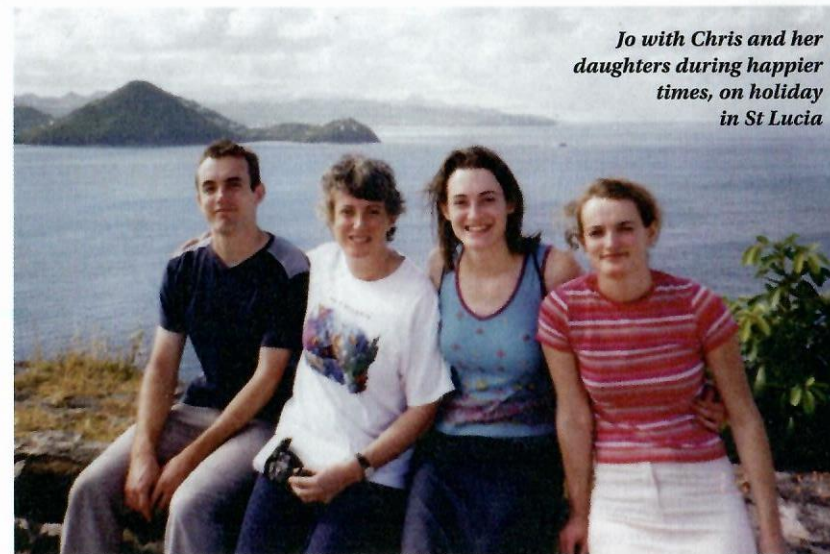
afterwards my body healed quickly, but I was left unable to get up, sleep or speak coherently. I stopped working. My wife and I separated.

"This misery went on for five years—I tried to kill myself three times—and then, by chance, I consulted an endocrinologist about another issue. He took one look at me and said, "I know what's wrong with you," and diagnosed hypopituitarism. Testosterone helped greatly, but what really restored me was growth hormone replacement." Now he's back with his wife, they have a child, and he has a partnership in four businesses.

"If I hadn't had help I'd be no further forward and probably—I hate to say it—dead."

James tells me that during that suicidal time his mother sensed from phone calls that he wasn't "right" and flew over from Australia to look after him. It's probably thanks to her that he's still here, because she saved him from that lethal pressure that contributes to so many male suicides—the imperative to be macho and sort out your own problems. That embargo we place on showing too much emotion.

We tend to reproach men for being like this, yet the fault lies with women too, for not giving them the space to open up. I didn't give Chris enough chances to talk about his misery, even after his suicide attempt, and that haunts me always.



Jo with Chris and her daughters during happier times, on holiday in St Lucia

BUT THERE'S NO undoing the past, we have to go on. It's eight years since Chris died and as a family I think we've weathered the pain and shock as best we can. We've none of us collapsed. My husband is still sought out for international projects, my younger daughter is a senior associate at London law firm, and my older daughter and her husband now have three lovely little girls, who delight and unite us.

I have written a book that exposes the reluctance of the medical establishment to engage with the catastrophe of pituitary damage, and it is a consolation to feel that my husband and I have used what we went through to save other people, so that Chris's death isn't all in vain.

I recently did a sum multiplying the number of head injuries a year by the rate of suicides among them, and those "extra" suicides came to between 60 and 90. If GPs kept a vigilant eye on these people, if pituitary damage was diagnosed properly—and if we all encouraged open communication with our loved ones—perhaps some of those suicides would be prevented. That would be a real legacy for Chris. ■

Mother of a Suicide: The Battle for the Truth Behind a Mental Health Cover-Up by Joanna Lane (Accent Press, £9.95) is out now.

Mental Health Awareness Week runs from May 8–14. Visit mentalhealth.org.uk for details on how to get involved.