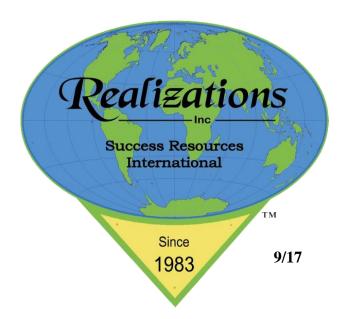
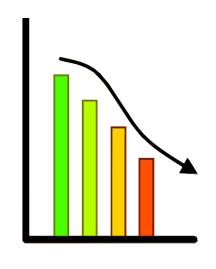


Loss, Grief, & Suicidal Brains

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Every human experiences loss—
it is part and parcel of life—
unfortunately it is often defined
rather narrowly in many cultures,
typically applied primarily to the
death of a family member or pet

Learning how to recover from loss and move on successfully is a required course in the school of life but many never graduate, because the homework is challenging and the exams are usually tough to pass...

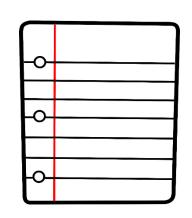
Loss: the state of being deprived of something that you once had, or thought you had, or greatly desired

- Physical you could touch it
- Abstract cognitive, belief, philosophical, behavioral...

Sometimes it can be repaired, sometimes it cannot—in order for the brain to deal with loss effectively, you need to be able to identify, label, and describe the loss.

- A sense of not meeting expectations
- Major change in a familiar state of
- Loss of a body part, chronic disease
- Failing sensory perception
- A hoped-for event does not materialize
- Diminished perceived options
- Being laid off or fired, bankruptcy
- Cannot get pregnant, miscarriage, fetal demise
- 'Left at the altar,' divorce, abusive situation
- Death . . .

Creating a loss line helps you picture your losses over your lifetime, some may have been prior to your birth



Write date and the loss in center of page

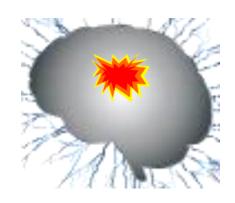
- **✓** Below note the negative results
- ✓ Above note positive outcomes (gift)

Did you grieve the loss effectively?

Follow every negative thought with a positive grateful thought - immediately

Bad news: Losses (large or small) athat have not been identified, labeled, and grieved effectively can accumulate to form a slush-fund of unresolved emotional pain that can trigger an over-reaction to a small subsequent loss

Good news: You can learn to move through the recovery process successfully



Society has taught us how to acquire but not lose, emphasizing *instant* everything—and recovery take time

Many lack skills for dealing with lossrelated stress effectively or learned unhelpful coping styles—so they fall apart quickly creating drama and messes to clean up that were unnecessary

Many don't know how to manage emotions or feelings or have low levels of emotional intelligence

Some 'rush to replace' the loss to 'fill the void,' minimize discomfort, or try to pretend it never happened

Others don't know what to say and and blunder by saying nothing or by spouting unhelpful euphemisms

Still others become involved in unhelpful and unhealthy behaviors in an attempt to stifle the pain—and a few kill themselves because their brains are in an altered state

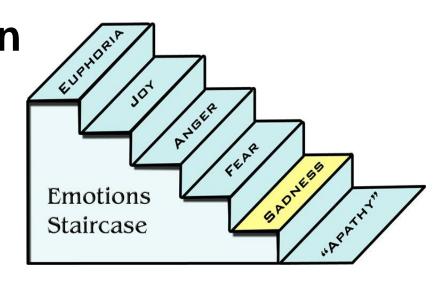
Myths about loss abound and some even conflict with each other

- Don't feel sad you'll get depressed and make others depressed, too
- Stop the pain by replacing the loss
- Don't cry or you must cry
- Stay strong be a good example
- Give it time the pain will resolve on its own

- Get over it think about something else
- Don't trust in the future there is only now so live for today
- Grieve alone
- Avoid upsetting others
- Recall only good times avoid being disloyal
- Get on with it let sleeping dogs lie
- You name it _____

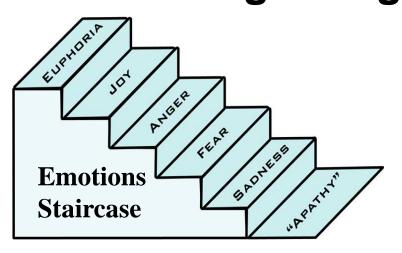
Grief: natural response to an experience of loss that can trigger intense suffering and sadness related to loss; may involve conflicting feelings felt following any event that the brain perceives has a negative impact on your life

Involves core emotion of sadness - signals a loss and provides energy to grieve and recover successfully



Male brain wants to 'fix' things and when some losses cannot be fixed—he may stop at anger and distance himself from reminders of his inability to 'fix' the loss

Female brain tends to go to sadness and can get stuck in a cycle of grieving and rehearsal—ignoring family and friends,



and failing to take constructive action to move on with life

When M and F understand these typical differences, they can help each other move through the grief recovery process and avoid discord, separation, and divorce — Rather than getting stuck in the cycle of 'loss' they can work together to create something that will honor their memory

- Purim (Esther 9:28) annual day of remembrance and celebration
- A memorial (MADD)

Recovery: Learning to feel better after following a loss; achieving a state of balance and soundness; able to recall the loss without the terrible pain

Building requisite skills and raising your Emotional Quotient or EQ can help you deal with losses more effectively, including minimizing JOT behaviors

- Jumping to conclusions
- Overreacting
- Taking things personally



Candace B. Pert PhD was very clear that when in the grip of a strong emotion, the brain is in an *altered state*, especially when the protective emotions of anger, fear, and sadness are involved

Suicide likely occurs only in a brain that is in an altered state—six examples follow of altered brain function linked with suicide

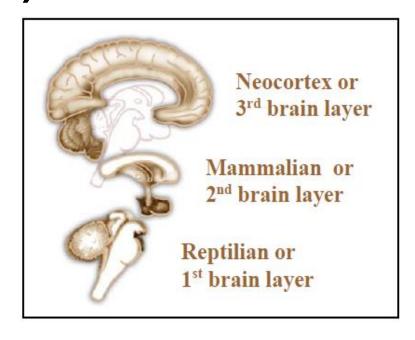
Studies by Cornelius van Heeringen MD PhD of The Netherlands have pointed out that suicide may be a unique entity, reflecting the culmination of several complex processes including:

- ✓ Depression
- **✓ Impulsivity**
- ✓ Disinhibition
- ✓ Anxiety
- ✓ Executive function dysregulation



Corticotropin Releasing Factor (CRF) both a hormone and neurotransmitter is released when a brain perceives a stressor (depression is a stressor)

High levels were found in cerebrospinal fluid of those with major depression and those who committed suicide (likely related to underlying major depression)



CRF is Powerful:

- Can suppress appetite
- Can increase subjective anxiety
- Is linked with euphoric feelings that accompany alcoholism



- Triggers inflammation (being investigated in Multiple Sclerosis research)
- High levels were found in cerebrospinal fluid of those with major depression and in those who committed suicide

Cortisol, a stress chemical, has many important functions including working with the thyroid gland and assisting with the fight-flight stress response

Elevated 24-hour urinary cortisol production was found in patients who recently attempted suicide compared with patients who did not have a history of suicidal behavior

Serotonin, a neurotransmitter, regulates mood, sleep, intestinal movements, and etc.



Neurons in the 1st brain layer produce serotonin that is carried to the 3rd brain layer by long projections (90% in gut)

Abnormal levels (up or down) are associated with depression, anxiety, OCD, alcoholism, and suicidal tendency (too little reaches the brain)

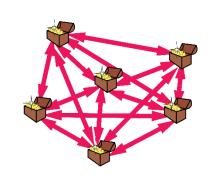
Cholesterol, a waxy, fat-like substance found in all cells of the body is made by cells in the liver. It can also be ingested in foods from animals. It is the precursor for the synthesis of cortisol, estrogen, progesterone, testosterone, and vitamin D; and impacts memory

Low levels of cholesterol can create an altered brain state and have been linked with increased suicide risk—whether due to drugs, diet, or occurred spontaneously

Norepinephrine, both a neurotransmitter and a hormone, mobilizes the body for action (e.g., fight-flight), and increases restlessness and anxiety

Elevated levels of norepinephrine inhibit activity in the prefrontal cortex—the part of the brain that helps regulate conscience, willpower, decision-making, and behavior—and have been linked with increased risk for suicidal behavior

Kubler-Ross model - designed to help individuals prepare for their own death process



A vast difference between the grieving process that is useful in preparation for one's own death, and the recovery process that is effective for survivors

The Grief Recovery Pyramid is a model to help *survivors*—you may move back and forth or around the pyramid stages several times

Grief Recovery Resources

www.ArleneTaylor.org

Every brain is unique as are its loss-grief-

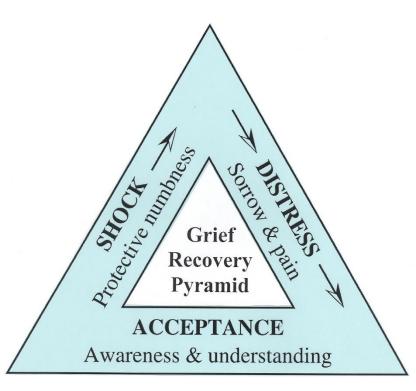
recovery experiences

Article:

Grief Recovery
Pyramid

Mini-monograph

Loss, Grief, and Recovery



When a loved one dies, survivors (even as some struggle with survivor guilt) often tend to think of that person primarily in terms of absence

No longer tangibly present, yet you carry them with you as long as you live through memories that are likely housed on protein strands in the nucleus of all cells that posses a nucleus

Give thanks in all circumstances — Apostle Paul - 1 Thess 5:18

Waste no time in mindless grieving because it is over, be happy and give thanks that it happened at all—that your paths even crossed and you were able to spend some time together . . .

—Arlene R. Taylor PhD