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ANIMAL AND HUMAN HEALTH PREVENTION OPPORTUNITIES

Prevalence of Risk Factors for Suicide Among Veterinarians

On September 28, 2014, Sophia Yin, DVM, a highly respected veterinarian and veterinary behaviorist died from suicide. Unfortunately, Dr. Yin's death adds to the growing list of veterinarian deaths caused by suicide. A study of U.S. veterinarian mortality during 1947–1977 estimated the suicide rate among white males was 1.7 times higher than the general population; of those, a higher proportion of deaths occurred from self-poisonings compared with suicides among the general population. A review of the causes of death among California veterinarians during 1960–1992 determined of the 450 deaths detected, 42 (9%) were caused by suicide. Two separate studies estimated the suicide rates among United Kingdom veterinarians and Australian veterinarians from two states were 4 times that of the general population.

Limited data suggest veterinarians frequently experience mental illness. A recent survey of licensed veterinarians in Alabama revealed 66% of respondents had been depressed; of these, 68% had not received mental health treatment. Disturbingly, approximately 25% of respondents had considered suicide since entering veterinary school. In the United States, a scarcity of data exists regarding the prevalence of serious mental illness (SMI) among practicing veterinarians, and their perceived stigma associated with mental health treatment and access to mental health treatment. Timely data regarding SMI among veterinarians are important as 21 (96%) of 22 surveyed executive directors of state veterinary medical associations believed that veterinarians are subject to more stress in the last 10 years than in the preceding decades and that burnout is a serious issue. Despite this concern, only 10 (44%) surveyed executive directors reported their state had an active veterinary wellness program. Montana does not have an active veterinary wellness program.

During July 1–October 20, 2014, the Centers for Disease Control and Prevention (CDC), Auburn University, and other agricultural (including Montana Department of Livestock [DOL]) and public health partners collaborated to administer surveys to U.S. veterinarians that assessed the prevalence of SMI and stressors related to veterinary practice. This issue of *Montana One Health* summarizes the responses to surveys completed only by Montana veterinarians.

If you are suffering from depression, you are not alone. See the back page for helpful resources.

Survey Methods and Results

Beginning July 1, 2014, a web-link to an anonymous internet survey was posted on the Veterinary Information Network (VIN) and within a JAVMA News article describing the survey, and a link to the survey was distributed by state health departments, state agricultural departments, or state veterinary medical associations in 49 states and Puerto Rico via e-mail to veterinarians in their jurisdictions. Montana DOL distributed a link to the survey via monthly e-mail communications to Montana veterinarians July–October 2014. A report of U.S. survey results, including a discussion of the study limitations, is expected to be published elsewhere during 2015.

Of the 12,707 survey respondents, 85 (1%) reported their primary practice location was Montana. Of these, the majority were female and the most commonly reported age category in years was 50–59 (25%) followed by 30–39 (20%), 20–29 (17%), 60–69 (17%), 40–49 (15%), and \geq 70 (6%) (**Table 1**). Respondents most commonly reported having practiced veterinary medicine for \geq 30 years (27%), followed by 10–19 (22%), 20–29 (19%), 1–4 (18%), and 5–9 (14%). Fifty-nine (69%) respondents somewhat or strongly agreed they were happy being a veterinarian. The most commonly reported veterinary

Table 1. Select characteristics among survey respondents (n=85), Montana, 2014

Characteristic	n (%)
Male	34 (40)
Married or in committed relationship	70 (83)
Separated/Divorced	3 (4)
Have children	52 (61)
Currently employed as veterinarian	85 (100)
Employment status among practicing veterinarians (n=80)	
Practice owner	47 (59)
Associate	27 (34)
Relief	4 (5)
Other	2 (3)
Practice specialty	
Mixed	41 (48)
Small animal	28 (33)
Large animal	4 (5)
Equine	4 (5)
Other	8 (9)

practice-related stressor was the demands of practice. (**Figure**). Only 12 (14%) somewhat or strongly agreed they were planning to leave veterinary medicine; of these, the most commonly cited reason for wanting to leave veterinary practice was practice demands (n=8 [67%]). Twenty-two percent of respondents reported a history of depression since leaving veterinary school and 11% had current serious psychological distress[†] (**Table 2**). Almost 65% of respondents somewhat or strongly agreed that mental health treatment was accessible; however, 41% somewhat or strongly disagreed that people are caring and sympathetic to persons with mental illness.

Discussion

It is unclear why veterinarians seem to be at higher risk for suicide. Reasons cited as potential contributors to a high suicide rate include frequency of certain personality traits such as perfectionism, work-related stressors, ready access to drugs and knowledge of euthanasia procedures, stigma associated with mental illness, professional and social isolation, and substance misuse. Implementing measures to help veterinarians cope more effectively with practice-related stressors and reducing barriers veterinarians face in seeking mental health treatment might help reduce the risk for suicide among Montana veterinarians.

Figure. Five most common stressors* associated with veterinary practice among survey respondents (n=85), Montana, 2014

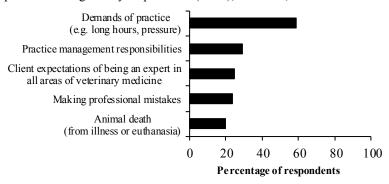


Table 2. Percentage of survey respondents (n=85) with specified mental health characteristics, Montana, 2014

Characteristic	n (%)
Current serious psychological distress [†]	9 (11)
Current mental health treatment	14 (17)
Previous history of depression§	19 (22)
Previous treatment for depression§	15 (18)
Previous suicidal ideation§	9 (11)
Previous suicide attempt§	0 (0)

Respondents were asked to choose the 3 most substantial stressors of veterinary practice.

[†]Respondents scoring ≥13 on the Kessler-6 psychological distress scale.

§Since leaving veterinary school.

Key Points and Support Services for Montana Veterinarians

- One in 9 surveyed Montana veterinarians had current serious psychological distress and 18% have been treated for depression.
- Reducing barriers veterinarians encounter in seeking mental health treatment might help reduce the risk for veterinarian suicides.
- Consideration should be given to developing and implementing a wellness program for Montana veterinarians.

Mental Health and Support Services

- If you are in crisis, call the National Suicide Prevention Lifeline, 24/7, at 1-800-273-TALK (1-800-273-8255).
- If you are not in crisis but would like to speak with a mental health professional, please visit http://findtreatment.samhsa.gov/.
- Veterinary Information Network (VIN) members can join the group VETS4VETS for support in dealing with life and veterinary practice-related issues. Members should login to VIN and search for contact information for Bree Montana, DVM.

References

- 1. Bartram DJ, Baldwin DS. Veterinary surgeons and suicide: a structured review of possible influences on increased risk. Vet Rec. 2010;166:388-97.
- 2. Larkin M. Finding the calm amid the chaos. When it's not the patient who needs a wellness check, but the veterinarian. JAVMA News. 2013;243(10):1368–75.
- 3. Blair A, Hayes HM Jr. Mortality patterns among US veterinarians, 1947-1977: an expanded study. Int J Epidemiol. 1982;11(4):391-7.
- 4. Miller JM, Beaumont JJ. Suicide, cancer, and other causes of death among California veterinarians, 1960–1992. Am J Ind Med. 1995;27(1):37–49.
- 5. Skipper GE, Williams JB. Failure to acknowledge high suicide risk among veterinarians. J Vet Med Educ. 2012;39(1):79-82.
- 6. Kessler RC, Barker PR, Colpe LJ, et al. Screening for serious mental illness in the general population. Arch Gen Psychiatry. 2003;60(2):184-9.
- 7. Kessler KC, Andrews G, Colpe LJ, et al. Short screening scales to monitor population prevalences and trends in non-specific psychological distress. Psychol Med. 2002;32:959–76
- 8. Centers for Disease Control and Prevention (CDC). Behavioral Risk Factor Surveillance System Survey Questionnaire. Atlanta, Georgia: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, 2012.

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