

EDITOR'S NOTE: Senator Cardin writes periodic columns for Maryland publications. The following column is about the alarming rise in suicides among combat troops and the need to study the increased use of antidepressants among our soldiers. Please contact Susan Sullam at susan_sullam@cardin.senate.gov if you have any questions.

PRECEDE: Senator Cardin is a member of five Senate committees: Foreign Relations, Judiciary, Environment and Public Works, Budget, and Small Business and Entrepreneurship. His web site is: cardin.senate.gov. He also can be found at YouTube.com/SenatorCardin

WE NEED TO STUDY THE USE OF ANTI-DEPRESSANTS AMONG COMBAT TROOPS

By U.S. Senator Benjamin L. Cardin

There has been an alarming increase in suicides and attempted suicides among our combat troops in recent years. There is no denying that soldiers in the field are under great stress, and one of the ways the U.S. Department of Defense (DoD) has dealt with that stress is to dispense strong anti-depressant medications to soldiers in Iraq and Afghanistan.

I want a close examination of how these anti-depressants are prescribed and managed in-theater and what impact they may be having on our soldiers. A particular concern involves the latency period for the effectiveness of such drugs. In an ideal situation, patients are closely monitored for two to six weeks. However, the demands of combat are not conducive to such close monitoring.

To that end, I am pleased that the Senate has adopted my amendment to the *National Defense Authorization Act*, which would mandate a study of the increased use of anti-depressants among combat troops and the impact of these drugs on the mental health of our soldiers. All information collected by the study will be confidential and the information will be tabulated in aggregate to help understand the full dimensions of the use or misuse of anti-depressants during deployments.

The Food and Drug Administration (FDA) has expressed concern about many of the same anti-depressants that are routinely given to our troops. Because of the FDA's concerns, drug manufacturers have revised their warning labels to state that young adults – 18-24 years old – may be at an elevated risk of suicidal thought and behavior while using these medications. Approximately 41 percent of our military forces serving on the front lines in Afghanistan and Iraq are within this same age range. In addition, 40 percent of Army suicide victims in 2006 and 2007 are believed to have taken some type of anti-depressant medication.

A 2007 report by the Army's Fifth Mental Health Advisory Team indicated that about 12 percent of combat troops in Iraq and 17 percent of troops in Afghanistan are taking anti-

depressants or sleeping pills to help them cope with stress. This comes to approximately 20,000 troops in combat that are on these powerful medications.

However, the Pentagon has yet to establish an official clearinghouse to accurately track this type of data. That needs to change. We need to know that the DoD is properly prescribing, dispensing and administering these drugs to our troops. We need to know that the appropriate controls and patient practices are in place.

My amendment also would require the DoD, beginning in 2010 and then annually thereafter through 2015, to report to Congress on the number of troops who have served in Iraq or Afghanistan since 2005 and who have been prescribed these medications.

The men and women serving in our military – and their families – deserve our assurance that we are doing everything in our power to make sure our nation’s soldiers are receiving the best medical care available. A part of that commitment must be to ensure that these same men and women are not exposed to what may potentially harm them when they seek medical care for stress or other related problems.

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