EMS and EDP: Handling Emotionally Disturbed Persons

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What is an emotionally disturbed person (EDP)?

EDP: Anyone whose emotional state is either the **primary reason** for the call, **contributes** to the clinical picture, or **affects the scene**.

Not the same as mental illness.

So how bad is it out there?

Emotional distress as the primary reason

Mental Illness

Mental Illness

- At any given time: ≈20% of the population

- ≈50% are not receiving adequate treatment
  - ≈60% any mental illness
  - ≈40% serious mental illness

It gets worse…

Emotional distress contributes to the clinical picture?

Emergency = emotional distress

Bystanders also?

Assumption: EVERY scene will have at LEAST one EDP.

But...

You can learn to **work with, handle, and relieve** emotional distress.

You don't have to do therapy to be therapeutic.

What I'm going to Cover Today

I. Articulate helpful mindsets for dealing with EDP.

II. Describe effective techniques for handling EDP.

III. Understand how common psychiatric illnesses present in the prehospital environment.

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A couple of caveats…

NOT Excited Delirium

Medical intervention

"The race is not always to the swift, nor the battle to the strong...
but that's the way to bet."

- Damon Runyon

I. Helpful Mindsets for dealing with EDP

Mindsets?

Helpful Mindsets for dealing with EDP

1. It's not personal.
2. You're a problem-solver.
3. Care.

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1. It's not personal.

Sometimes you're just incidental.

But what if it **seems** personal?

Even when it's personal
it's not personal.

Why?

Distance and perspective

2. You're a problem-solver

Emotional distress is related to a **problem (or problems)**.

Figure out the underlying problem.

And fix it if possible.

Don't forget- you can ask.

What if you **can't** solve their problem?

Admit it and tell them what you can do.

Why?

It puts you on their side.

3. Care

You have to actually care about people.

You probably do, but…

EMS has a way of sucking the empathy out of us.

You can't fake caring.

What if I **can't** care?

If you can't care, take a break.

Why?

Patients know. And they respond to it.

II. Techniques for handling EDP

Techniques for handling EDP

1. Remember mindsets
2. Techniques from Psychological First Aid (PFA)
   1. Breathing
   2. Grounding

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But first, one big don't…

"Just calm down!"

1. Remember mindsets

2. Techniques from Psychological First Aid (PFA)

Calming strategies

1. Breathing

2. Grounding

So we're most of the
way through.

I have a favor…

If you have questions:

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III. How common psychiatric illnesses present in the prehospital environment.

NOT diagnoses

Themes & Symptoms

1. Threat

Fear and anxiety

SNS arousal

Solution?

Reduce the perceived threat

2. Hopelessness, helplessness, loss

Depression & suicidality

Solution?

Light at the end of the tunnel

3. Rule violations

Anger

Solution?

Acknowledge the perceived violation.

To wrap up...

Assume every scene has at least one EDP.

1. Remember the helpful mindsets.

Take time to "put them on" & let them drive your behavior.

2. Have a couple of techniques handy

Breathing & grounding

3. "Reverse engineer" common themes in psychopathology

You don't have to do therapy to be therapeutic.

So be therapeutic.

Thank you.