

## *Helping Families Struggling with Addiction* Bildners' generous gift will launch new program

**I**t was a parent's worst nightmare. In 2002, Jim Bildner and his wife, Nancy, discovered that their bright, sensitive son, Peter, was a heroin addict. Three years later, despite their desperate attempts to find him effective treatment, Peter died of a drug overdose at the age of 21.

Tragically, this story is not unique. An estimated three million Americans

– people young and old; of all income levels; in urban, rural and suburban communities – have drug problems, many of which begin in adolescence. Each year, illicit drugs (including abuse of prescription medications) kill nearly 20,000 in the United States. When deaths due to alcohol, the most commonly used drug, are factored in, the figure jumps to about 100,000.

Many parents deny for months, even years, that their child has a drug problem until the evidence becomes obvious – a stash of liquor bottles, unidentifiable pills or powder-filled packets. In a crisis like this, few know where to turn. How does one find the best treatment? What will it involve? How much will it cost?

“We learned first-hand from our experience how fragmented the system is and how difficult it is to find reliable information,” says Mr. Bildner, a Massachusetts businessman and philanthropist. Being forced to choose from a confusing array of options increases anxiety for families already in a stressful situation, and can lead to tragic results.

### **GUIDING YOUNG PEOPLE AND FAMILIES**

After losing their son, Mr. Bildner says he and his wife “couldn’t bear the thought of families going through what we did.” So they made a generous donation to the Massachusetts General Hospital Department of Psychiatry to establish the Addiction

Recovery Management Service (ARMS). This new program, launched in early October, is designed to help young people who are misusing or addicted to alcohol or other drugs receive the support and care they so urgently need.

The service guides families to effective treatment programs, coordinates the transition from one program to the next (for example, from inpatient or residential to outpatient settings), and provides relapse prevention and intervention. In addition to regular daytime hours, ARMS offers some evening hours and rapid access for families and young people needing information and advice. As part of MGH’s new Center for Addiction Medicine, ARMS focuses on 15- to 25-year-olds.

“This age group is at the highest risk for the onset of substance use disorders, which have both acute and long-term repercussions,” says John



Jennifer Lehman Weng

Through their recent gift to the Department of Psychiatry, Jim and Nancy Bildner are helping other families struggling with addiction.

F. Kelly, PhD, program director. "We want to intervene as early as possible, because the young brain is still developing and substance misuse can produce enduring structural and functional changes that can cause all kinds of problems, including addiction."

The first step is for the young person and his or her family to meet with a clinical team specializing in addiction medicine for a comprehensive assessment of their needs. Based on the extent and severity of substance use as well as related psychological problems, the team, which includes a psychologist, clinical social worker and resource specialist, recommends appropriate care. Referrals are made to high-quality treatment programs that have been carefully screened by ARMS staff.

### PREVENTING RELAPSES

"Addiction is a chronic illness that needs to be addressed over the long term," says Dr. Kelly. "We hope to engage patients and families for at least a year to establish a strong foundation for recovery."

During this critical stabilization period, ARMS ensures that patients receive continuing care. "Our clinicians will stay involved with the family throughout the course of treatment as the patient makes the transition from one program to the next," says Joy Rosen, executive director of the MGH Department of Psychiatry.

Because relapse is an all-too-common problem, a primary goal of ARMS is to prevent or limit the duration and intensity of relapses. "We often find that people start well, but the gravity of addiction tends to pull them back if they're not careful and if other people aren't on the lookout for warning signals that precede alcohol or drug use," says Dr. Kelly.

To counter this, ARMS actively reaches out to youths, making home visits,

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whenever necessary and feasible, within the Greater Boston area. The service also provides relapse-prevention training to families so they are aware of patients' warning signals, such as isolation, hanging out with high-risk friends, or failing to take medications or attend counseling appointments.

In addition, therapists work with young patients and families to develop a "fire drill," or practice plan, for what to do should a relapse occur. "When the patient is doing well," says Dr. Kelly, "we figure out what to do if a fire, so to speak, does start. By having a plan in place, we hope to alleviate stress for the family and the patient."

"Better outcomes for young people and less stress for their families are the goals of ARMS," says Dr. Kelly. "We take responsibility for making sure no one falls through the cracks."

*In the next issue:*



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