Suicide 16 Prevention

An educational service of NetCE

Ask Your Patients...

"Do you feel unhappy and helpless?"

If Your Patient Asks...

"Will I ever feel happy again?"

UNDERSTAND the problem

Every year, nearly 800,000 people around the world commit suicide. In the United States, there is one suicide death every 12 minutes, and it is the tenth leading cause of death. This suicide rate has increased by 60% since 1955, with suicide rates among young people increasing at alarming rates in both developed and developing countries.

Suicide is now understood to be a multidimensional disorder stemming from a complex interaction of biological, genetic, psychological, sociological, and environmental factors. While risk factors for suicide represent broader, durable, and ongoing factors, a suicide crisis is a time-limited event that signals an immediate danger of suicide. Understanding the interactive relationship between risk and protective factors in suicidal behavior and how this interaction can be modified forms the basis of suicide prevention.^{2;3}

WHAT are the warning signs

Most people who are suicidal exhibit warning signs, whether or not they are in an acute suicide crisis. These warning signs should be taken seriously and include observable signs of serious depression, such as unrelenting low mood, pessimism, hopelessness, desperation, anxiety, psychic pain, and inner tension; withdrawal from friends and/or social activities; sleep problems; and loss of interest in personal appearance, hobbies, work, and/or school. 4:6 Other signs include:

- · Increased alcohol and/or other drug use
- Recent impulsiveness and taking unnecessary risks
- Talk about suicide, death, and/or no reason to live
- Making a plan (e.g., giving away prized possessions, sudden or impulsive purchase of a firearm, or obtaining other means of killing oneself, such as poisons or medications)
- Unexpected rage, anger, or other drastic behavior change
- Recent humiliation, failure, or severe loss (especially a relationship)
- Unwillingness to "connect" with potential helpers

WHO is at risk for suicide

There are many general risk factors for suicide common among most populations. General biopsychosocial risk factors include:^{2, 4, 5}

- Psychiatric disorders
- Alcohol and other substance use disorders
- Hopelessness
- Impulsive and/or aggressive tendencies
- History of physical or sexual trauma or abuse, especially in childhood
- Medical illness involving the brain or central nervous system
- Family history of suicide
- Suicidal ideas, plans, or attempts (current or previous)
- Lethality of suicidal plans or attempts

Environmental factors can also impact an individual's suicide risk. Attention to the presence of job or financial loss, relationship or social loss, easy access to lethal means, and local clusters of suicide (due to contagious influence) is necessary. Lack of social support and sense of isolation are risk factors for suicide, along with cultural factors. Certain cultural practices and/or beliefs can predispose an individual to suicide, such as stigma associated with help-seeking behavior; barriers to accessing mental health care; and belief that suicide is an honorable act. 2: 4: 5

HOW can you prevent patient suicide

Many persons who commit suicide have contact with healthcare providers in the time preceding their deaths. This suggests a widespread inadequacy in identifying and assessing at-risk persons by healthcare professionals, and numerous studies have concluded that health professionals often lack sufficient training in the proper assessment, treatment, management, or referral of suicidal patients.²

Although some healthcare professionals are uncomfortable with suicidal patients, it is essential not to ignore or deny the suspicion of suicide risk. The first and most immediate step is to allocate adequate time to the patient, even though many others may be scheduled. Showing a willingness to help begins the process of establishing a positive rapport with the patient. After the patient confirms an initial suspicion of suicidal ideation, the next step is to assess the frequency and severity of the ideation and the possibility of suicide. Based on this information, the patient may be referred to a psychiatrist or hospitalized.

WHERE to find resources

National Suicide Prevention Lifeline

https://suicidepreventionlifeline.org 1-800-273-8255

National Institute of Mental Health

https://www.nimh.nih.gov (866) 615-6464

American Foundation for Suicide Prevention

https://www.afsp.org

American Association of Suicidology

https://www.suicidology.org

Suicide Awareness Voices of Education (SAVE)

https://save.org

Centers for Disease Control and Prevention

Strategic Direction for the Prevention of Suicidal Behavior https://www.cdc.gov/ViolencePrevention/pdf/Suicide_Strategic_Direction_Full_Version-a.pdf

- 1 World Health Organization. Suicide Data. Available at https://www.who.int/mental_health/prevention/suicide/suicideprevent/en. Last accessed December 20, 2018.
- 2 U.S. Department of Health and Human Services. 2012 National Strategy for Suicide Prevention: Goals and Objectives for Action. Rockville, MD: U.S. Department of Health and Human Services; 2012.
- 3 U.S. Department of Veterans Affairs, VA/DoD Clinical Practice Guideline for Assessment and Management of Patients at Risk for Suicide. Available at https://www.healthquality.va.gov/guidelines/MH/srb. Last accessed December 20, 2018.
- 4 American Foundation for Suicide Prevention. Risk Factors and Warning Signs. Available at https://www.afsp.org/about-suicide/risk-factors-and-warning-signs. Last accessed December 20, 2018.
- 5 American Psychiatric Association. *Practice Guideline for the Assessment and Treatment of Patients with Suicidal Behaviors.* Washington, DC: American Psychiatric Association; 2003.
- 6 American Association of Suicidology. Warning Signs and Risk Factors. Available at http://www.suicidology.org/ncpys/warning-signs-risk-factors. Last accessed December 20, 2018.
- 7 Suicide Awareness Voices of Education. Suicide Facts. Available at https://save.org/about-suicide/suicide-facts. Last accessed December 20, 2018.

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