RISK FACTORS ASSOCIATED WITH SUICIDE
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Introduction

Facts
• > 800,000 deaths worldwide per year
• 2nd leading cause of death in 15-29 year olds globally in 2012.
• There is 1 suicide for every 25 attempted suicides.
• An estimated 1 million adults in U.S. reported making a suicide attempt in the past year.

Objectives
• Identify common risk factors among patients who have committed suicide.
• Create alerts to be used in the evaluation of patients at risk of suicide.

Methods

• Selection of Cases
Hospital’s psychiatric database of patients who had committed suicide in the past fifteen years. A total of twelve cases were selected for this study.

• Analysis of Cases
Using Excel several different categories were created. Categories were created based on the CSSRS, the MMPI, the IPDE, and the patient’s history.

• Minnesota Multiphasic Personality Inventory (MMPI)
567 questions divided into ten different clinical scales: Hypochondriasis, Depression, Conversion Hysteria, Psychopathic Deviate, Masculinity-Femininity, Paranoia, Psychasthenia, - Somatization, Hypomania, Social Introversive

• International Personality Disorder Examination (IPDE)
Provides a uniform approach for assessing personality disorders

• Columbia Suicide Severity Rating Scale (CSSRS)
Instrument used in the evaluation of suicidal thoughts and suicidal behavior

• Creation of Alerts/Risk Factors
Using all of the information found in the study a new scale was created as a supplement to other suicidal evaluations

Results

Strategies

5 males and 7 females
2 cases married (cases 7 & 11)
1 case separated
9 single

Intelligence Quotient
The mean was 95.8 IQ. All presented average to above average intelligence in one of the cases.

Most common diagnoses were Mood Disorders (60%). Personality disorders were seen many times as co-morbidities. There was 1 somatoform disorder and 1 patient with a co-morbid eating disorder. Many consumed drugs but in the histories only 1 had a diagnosed substance abuse problem.

58% stable in last visit:
• Occultation?
• Need to evaluate more?
• Missing information?

83%: past autolithic ideation
67%: previous suicide attempts

Important to keep in mind past thoughts and behaviors in all future evaluations.

Conclusions

Family History
Drug use
Marital Status: Single
Psychiatric Diagnosis: especially Mood Disorders, and Comorbidities with Personality Disorders

Certain Personality Traits:
Impulsive
Emotionally dependent
Difficulty understanding social interactions
Low distress tolerance
Difficultly confronting and resolving problems
Somatization
Hypersensitivity
Hypersensitivity in relationships

Drug use was found in 50% of the cases. When divided by sexes drug use was found more in men (60%) than women (43%). The drugs used were mostly marihuana, alcohol, cocaine, and self-medication of psychiatric medicines.

67% of cases presented family psychiatric history, not necessarily of suicide. Family members presented depression, anxiety, drug abuse and 1 presented schizophrenia.

Majority began treatment between the ages of 10 and 25 (58%). The mean age of starting treatment was 24.6.
The average age at time of suicide was 37.6 years.
Mean years of treatment were 13.4 years.

Age at Time of Suicide
Starting Age of Psychiatric Treatment
Evaluation of Treatment

90%: somatization, insecurity, hypersensitivity in relationships, stress factors
82%: emotional dependence, impulsive, low self-esteem, hopelessness, emptiness
73%: misinterpretation of social stimuli, low distress tolerance, difficulty adapting socially, guilt, difficulty confronting/resolving everyday problems
55%: unsatisfied, need approval of others
45%: avoids getting close to others
36%: looks for affection and acceptance, difficulty concentrating, irritable
27%: passive
18%: try to appear favorably or in control

83%: past autolithic ideation
67%: previous suicide attempts

Important to keep in mind past thoughts and behaviors in all future evaluations.

References


• Thomas Jans, Yesim Tanelk & Andreas Warnke. (2012) International Association for Child and Adolescent Psychiatry and Allied Professions. Textbook of Child and Adolescent Mental Health Suicide and Self Harm Behaviour