





Adolescents and suicide/self-harm: from piercing to Blue Whale

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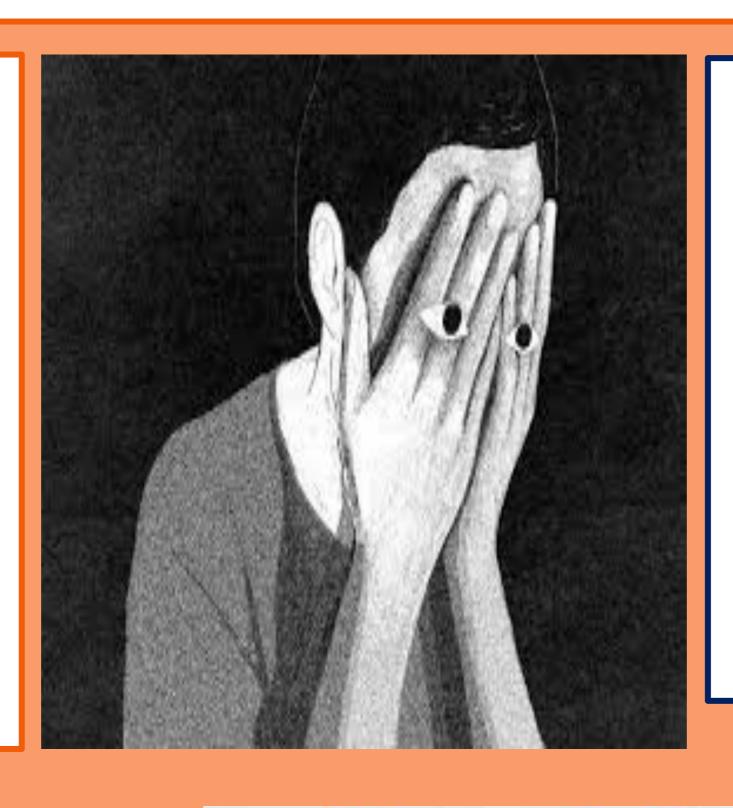
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- According to the *World Health Organization* (1), it has been reported a 60% global increase in recorded suicide mortality, over the last 45 years. The *Royal College of Paediatrics* includes suicide and substance use disorders (SUD) amongst the major <u>leading causes of death amongst children and adolescents worldwide</u>.
- Non-suicidal self-harm is a common widespread mental health threat amongst adolescents, with a lifetime prevalence around 17%-60%, according to the different epidemiological studies (2). Deliberate self-harm may represent an important <u>risk factor for subsequent suicide</u> (3).
- Furthermore, clinicians are recently collecting several examples of <u>nonconventional suicide behaviours and non-suicidal self-harm attempts amongst youngsters</u>, like **tattooing**, **piercing** and the tragic 'Blue Whale Suicide Game' phenomenon in which participants are purportedly assigned a curator who provides various acts of self-harm to be committed over the course of 50 days until participant was asked to win the game by committing suicide during the final day.



- evaluating which are the most documented risk factors (both genetic and environmental)
- how they may interact each other in determining the occurrence of suicide and/or non-suicidal self-injury behaviours amongst youngsters.
- A specific section will deal with the 'Blue Whale' phenomenon.



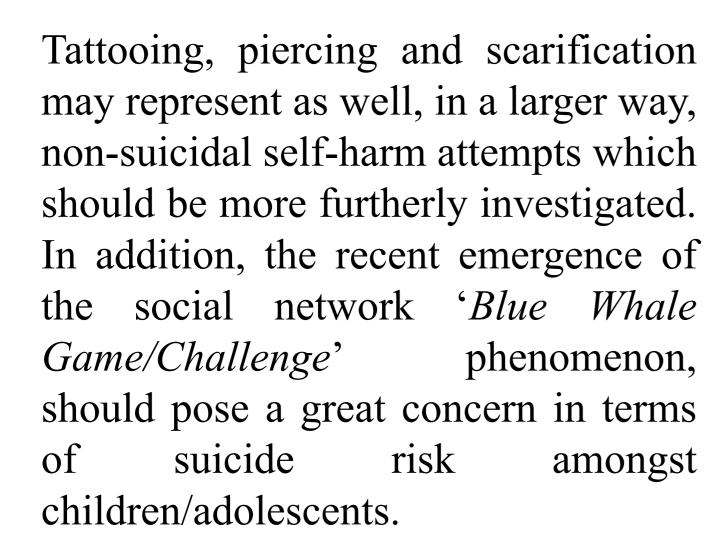
Method(s)

- A comprehensive review was here carried out by searching the following keywords (((suicide[Title/Abstract]) OR (self-harm [Title/Abstract])) AND
 - (adolescence[Title/Abstract]))
 for the topics 'Adolescence'
 and 'Suicide'/'Non-suicidal
 self-injury/self-harm', by
 using MESH terms.



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Overall, despite the occurrence of suicide amongst children/adolescents appears to be strongly influenced by cultural/social/economic variables worldwide, it has been hypothesized a plethora of risk factors (both genetic and environmental), including SUD. Suicide and non-suicidal self-injury behaviours represent a dramatic challenge for clinicians, particularly in vulnerable most the age adolescence.







References

- (1). WHO. Mental Health Atlas 2017. Geneva: World Health Organization; 2018. Available at: https://apps.who.int/iris/bitstream/handle/10665/272735/9789241514019-eng.pdf?ua=1. Accessed June 10, 2019.
- (2) Kapur N, Cooper J, O'Connor RC, Hawton K (2013) Nonsuicidal self-injury v. attempted suicide: new diagnosis or false dichotomy? Br J Psychiatry 202(5):326–328.
- (3) Giletta M, Scholte R, Rutger CME, Ciarano S, Prinstein MJ (2012) Adolescent NSSI: a cross national study of community samples from Italy, the Netherlands, and the United States. Psychiatr Res 197:66–72.

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