



SUICIDAL RISK AMONG WOMEN UNDERGOING IN-VITRO FERTILIZATION TECHNIQUE (FIVET) FOR INFERTILITY: IS THERE AN ASSOCIATION?

Rioli G.^{1,2}, Disavoia A.³, Lezza A.³, Pattacini F.³, Ferrari S.^{1,4}, Galeazzi G.M. ^{1,4}

¹Department of Biomedical, Metabolic and Neural Sciences, University of Modena and Reggio Emilia, Modena, Italy

² PhD Program in Clinical and Experimental Medicine, University of Modena and Reggio Emilia, Modena, Italy

³ Department of Mental Health and Drug Abuse, Scandiano Mental Health Center (Reggio Emilia), AUSL Reggio Emilia, Italy

⁴ Department of Mental Health and Drug Abuse, Az. USL Modena, Modena, Italy.

INTRODUCTION

Depression and other emotional distress are well documented in infertile women, but little is known about the relationship between infertility and suicidal risk. The aim of this study was to review published papers on the association between suicidal risk (SR) and in-vitro fertilization technique (IVF) in infertile women.

METHODS

The PubMed electronic database was searched with the following Mesh terms:

"Reproductive Techniques, Assisted" and "Suicide" on 10th May, 2019.

No filters were used to restrict the search, neither on time and language of publication, nor on age of patients.

RESULTS

The search provided 39 results. 36 papers were off-topics, the remaining 3 papers were selected for the full-text reading and 2 papers were finally included in the review.

•According to a cross-sectional study among **106** infertile women referring to a IVF hospital unit (Chen et al., 2016), the incidence of suicide risk, assessed by means of the Suicidal Behaviours Questionnaire — Revised (cut-off score: 7), was **9.4%**. Women at SR were more likely to be childless or had fewer children and experienced higher levels of depressive symptoms; moreover, they reported more frequently denial, social withdrawal and self-blame coping strategies. At the multiple logistic regression analysis, being childless, using non-positive reappraisal and exhibiting depressive symptoms were significant predictors of SR in the future.

•According to a nationwide case-control study (Vikström et al., 2017), comparing women who received vs. do not received IVF, no woman in either group committed suicide during the first year after childbirth. The risk of **post-natal depression** was increased among mothers with a **history of mental illness**.

CONCLUSION

Available studies are very few and results inconclusive. Further studies are needed, in order to clarify a possible association between undergoing IVF and suicidal risk, which could inform assessment policies.

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