

FACTORS ASSOCIATED WITH THE TRANSITION FROM SUICIDAL IDEATION TO SUICIDAL ATTEMPT IN PATIENTS WITH NON-PSYCHOTIC MENTAL DISORDERS

Mikhail Zinchuk¹, Massimiliano Beghi², Ettore Beghi³, Elisa Bianchi³, Alla Avedisova^{1,4}, Alla Guekht^{1,5}

1 Moscow Research and Clinical Center for Neuropsychiatry, Russian Federation; 2 Department of Mental Health, AUSL Romagna, Ravenna, Italy; 3 Mario Negri Institute for Pharmacological Research, Milan, Italy; 4 Serbsky National Research Centre for Social and Forensic Psychiatry, Russian Federation; 5 Department of Neurology, Neurosurgery and Medical Genetics, Pirogov Russian National Research Medical University, Russian Federation



Introduction

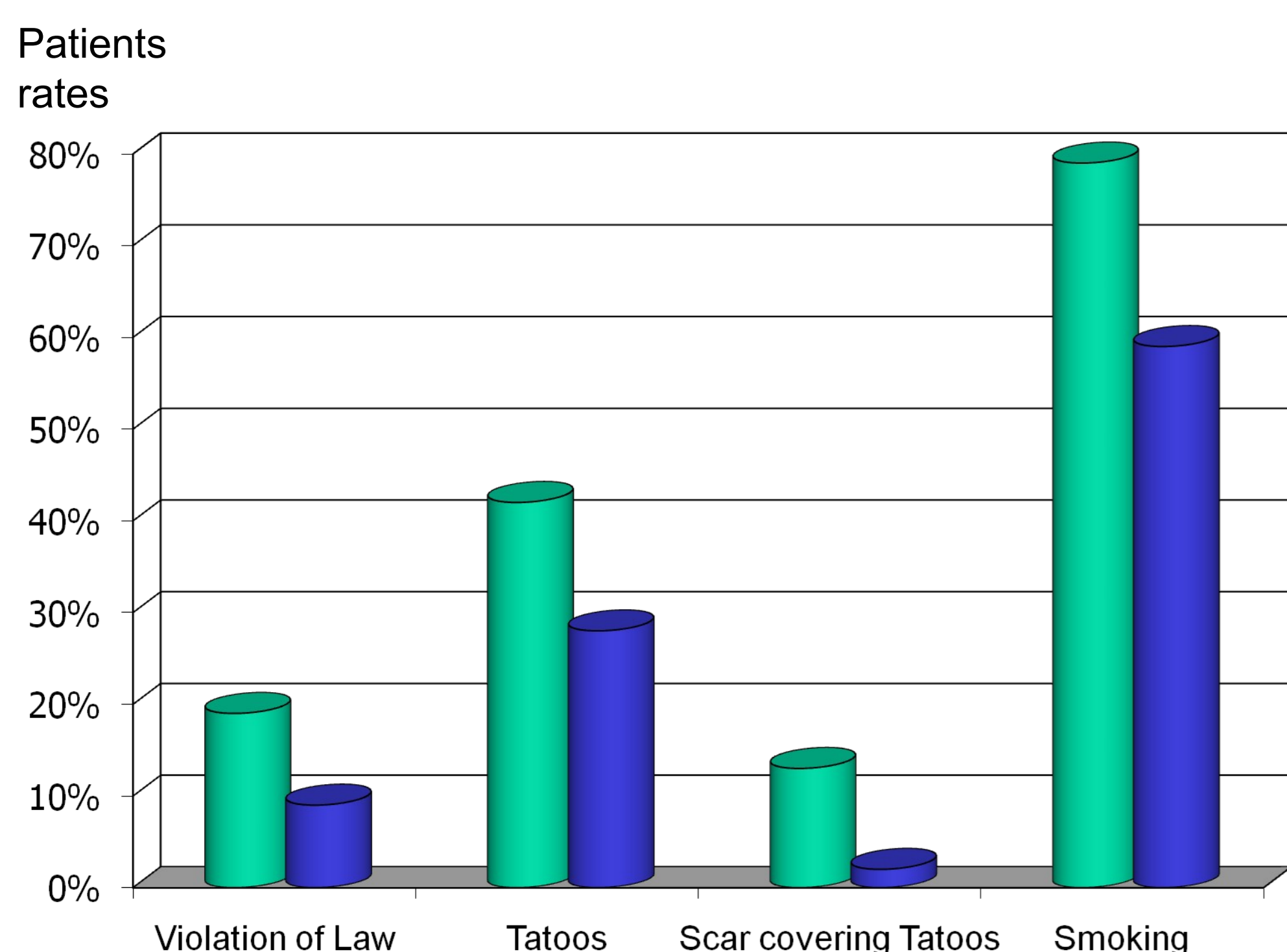
Suicide accounts for about 1.4% of all deaths and is the thirteenth cause of death in the world [1]. The ratios between attempts, plans, and thoughts of suicide differed substantially across the countries. According to the Global Burden of Disease Collaborators, in Russia the annual suicide rate in 2017 was over 15 per 100,000 and was among the highest in the world (GBD 2017 Causes of Death Collaborators, 2018). Suicide attempt (SA) is one of the most important risk factors for a further attempt and for a completed suicide [2].

Methods

Among 6204 consecutive adult patients with non-psychotic mental disorders (NPMD) 361 (226 female) aged 18 to 77 years (median 24 years) were enrolled in the study following a screening for lifetime suicidal ideation (SI). The study was approved by local ethics committee.

Results

Among 361 patients (87.3% females) with SI 166 reported lifetime SA. Patients with history of SA more frequently had relatives with SA ($p=0.001$) and non-suicidal self-injury (NSSI), ($p=0.014$), associated with traumatic experience like corporal punishment ($p=0.013$), domestic violence witnessing ($p=0.04$), sexual abuse ($p<0.000$). SA was associated with a number of behavioral changes (tattoos ($p=0.004$), scars covering tattoos ($p<0.000$), violation of law ($p=0.004$)), addictions (smoking ($p<0.000$), illegal drugs use ($p=0.009$)) and clinical characteristics like NSSI ($p=0.004$) and eating disorders ($p=0.007$). Suicidal plan was a highly significant predictor of suicidal attempt ($p<0.000$). Only scars covering tattoos, smoking and a suicidal plan retained significance in multivariate analysis models.



Multivariate analysis of risk factors for suicidal attempt

Effect on SA	Odds Ratio Estimates			Pr > ChiSq
	Point Estimate	95% Wald Confidence Limits		
Scar covering Tatoo	5.847	1.747	19.574	0.0042
Smoking	1.920	1.102	3.345	0.0213
Suicide Plan	3.230	1.963	5.314	<.0001

Conclusion

Selected behavioral variables and presence of suicidal plan are involved in the transition from suicidal ideation to suicidal attempt in Russian patients with NPMD.

Objectives

Aim of the study is to identify factors related to suicidal attempt among non-psychotic patients with suicidal ideation.

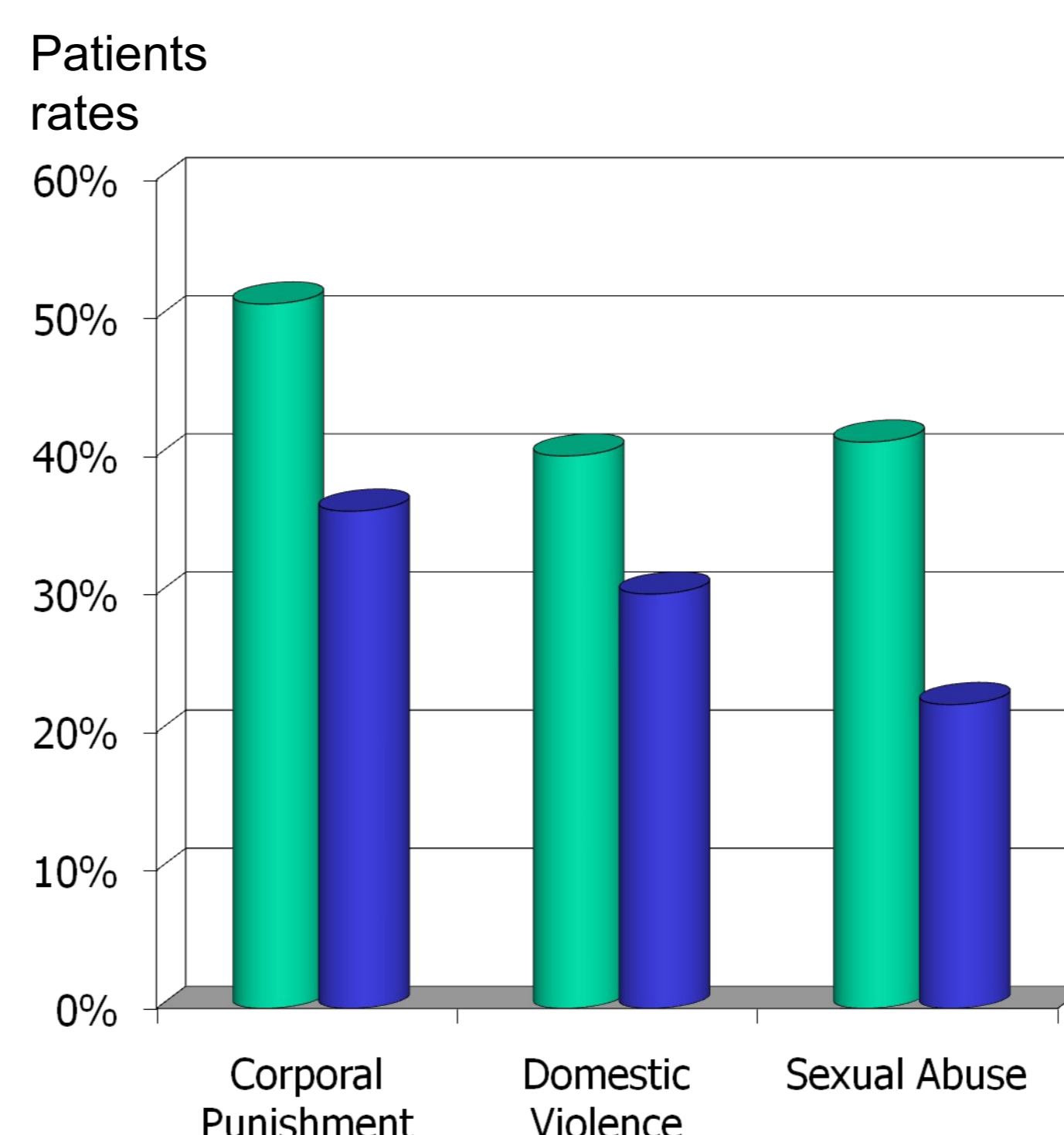
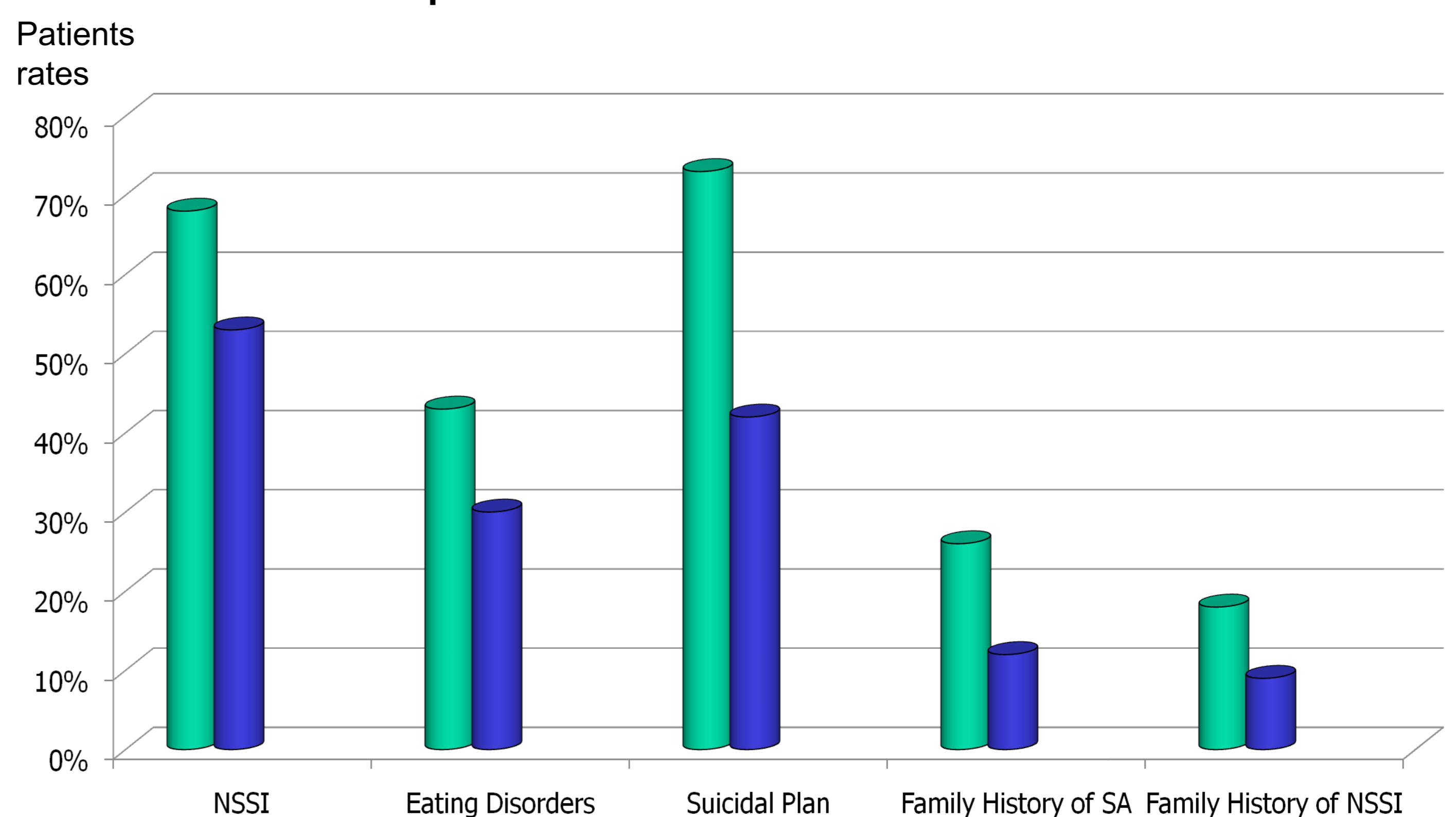
Inclusion criteria

- Permanent resident of Moscow
- Age 18+ years
- Non-psychotic mental disorder
- Answering "yes" to the question

"Have you ever had thoughts of killing yourself?" in the Self-injurious thoughts and behavior interview (SITBI) [3].

- Suicidal attempt
- Without Suicidal Attempt

All patients were investigated for the main sociodemographic variables, any psychiatric diagnosis and treatment, family history of mental disorders, history of physical or sexual abuse, recent traumatic events, ad-hoc psychiatric treatments and sexual behavior. The SITBI was completed to assess the presence, frequency, and characteristics of a self-injurious thoughts and behaviors, including suicidal ideation, suicide plans, suicide gestures, suicide attempts, and NSSI.



REFERENCES

1. Roth GA, Abate D, Abate KH, et al. Global, regional, and national age-sex-specific mortality for 282 causes of death in 195 countries and territories, 1980–2017: a systematic analysis for the Global Burden of Disease Study 2017. *The Lancet*. Elsevier BV; 2018; 392(10159):1736–88.
2. Beghi M, Rosenbaum JF, Cerri CG, Cornaglia CM. Risk factors for fatal and nonfatal repetition of suicide attempts: a literature review. *Neuropsychiatric Disease and Treatment*. Ltd.; 2013 Nov;1725.
3. Nock MK, Holmberg EB, Photos VI, Michel BD. Self-Injurious Thoughts and Behaviors Interview: Development, reliability, and validity in an adolescent sample. *Psychological Assessment*; 2007;19(3):309–17.