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SLEEP DISORDERS AND SUICIDAL BEHAVIOR IN PATIENTS ADMITTED TO THE EMERGENCY DEPARTMENT

A. Forte¹, M. Innamorati¹, L. Longo¹, C. Mazzetta¹, G. Serafini¹, P. Girardi¹, M. Pompili^{1,2}

Introduction: Patients with sleep disorders have a significant increase in suicidal ideation and suicide attempts, at the assessment and lifetime (Goodwin et al, 2008; Chellappa et al, 2007; Wojnar et al, 2009; Li et al, 2010).

Objectives: To evaluate the relationship between sleep disorders and suicidal behavior.

Aims: To study factors associated with a diagnosis of insomnia in patients admitted to the Emergency Department. **Methods:** Participants were 843 patients consecutively admitted to the Emergency Department of the Sant'Andrea University Hospital in Rome, Italy, between January and December 2010. All patients admitted were referred to a psychiatrist. A clinical interview based on the MINI and a semi structured interview were performed. Patients were asked about "ongoing" suicidal ideation or plans for suicide. Clinical diagnoses were assigned according to ICD-10 criteria.

Results: 48% received a diagnosis of a mood disorders (BD and MDD) or anxiety disorders, 17.1% Schizophrenia or other non-affective psychosis. Patients with insomnia had more frequently a diagnosis of BD (23.9% vs. 12.4%) or MDD (13.3% vs. 9.5%; P< 0.001). Patients with insomnia less frequently had attempted suicide in the past 24 hours (5.3% vs. 9.5%; P< 0.05) than other patients, but suicide attempters with insomnia more frequently used violent methods (64.3% vs. 23.6%; P< 0.01) than suicide attempters without insomnia.

Conclusions: Our results support a relationship between sleep disorders and suicidal behavior. Clinicians should pay attention to sleep disorders when assessing suicide attempters; in fact, such conditions may have important clinical implications.

¹Mental Health and Sensory Functions, Suicide Prevention Center, Sant'Andrea Hospital, Sapienza Università di Roma, Rome, Italy, ²McLean Hospital, Harvard Medical School, Boston, MA, USA