

Course ID: CMEC02

Suicide prevention in psychiatric practice

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Educational Objectives: Recognition of risk groups and risk situations for suicide and knowledge of suicide-risk assessment and pharmacological and psychological treatment options for suicidal patients.

- Risk groups for suicide: patients with psychiatric, personality and somatic disorders.
- Risk situations for suicide: adverse life events, previous suicide attempts, etc.
- Suicide-risk assessment and the patient-doctor relationship.
- Pharmacological treatment of underlying psychiatric disorders in suicidal patients.
- Psychological treatment of suicidal patients.

Course description: Suicide is a public-health problem. Around the world, approximately 1.5 million people take their own lives every year. The recent increase in suicide rates among the young and middle-aged is particularly worrying. Another major concern is the prevalence of other forms of suicidal behaviour, such as attempted suicide. These represent a major burden on the healthcare system, particularly in emergency departments.

A high proportion of suicidal behaviour can be prevented, and this applies particularly to cases associated with mental disorders. We now have evidence that treatment of affective and anxiety disorders, alcoholism and misuse of psychoactive substances, schizophrenia and other psychotic states can prevent suicide. There is also evidence that both pharmacological and psychological methods in the treatment of psychiatric and personality disorders are effective means of preventing suicide. However, before adequate treatment can be given, a careful diagnostic procedure and evaluation of suicide risk are essential.

Systematic clinical assessment of suicide risk is among the most difficult tasks in psychiatric practice. It includes assessment of suicidal intent, previous suicide attempts, the presence of psychiatric disorders, the patient's personality and social network, suicide in the family or among acquaintances (suicide models), and the patient's suicidal communication.

Suicide-risk assessment should take place on several levels. It should relate not only to the patient and his or her family and social network, but also to the availability of treatment, rehabilitation and prevention resources in the community.

Once a suicide-risk assessment has been completed, it is vital to take active steps to transfer the patient to the relevant facilities to be given the care that is deemed appropriate.

Pharmacological treatment of underlying psychiatric disorders in suicidal patients, especially those with depression (unipolar and bipolar) and schizophrenia, and also the psychological treatment of suicidal patients with personality disorders, will be elucidated.

The psychiatrists' task in the follow-up, entailing a combination of psychiatric and psychosocial measures, and the role of relatives in suicidal patients' treatment will be described.

Target audience: Clinical psychiatrists

Course level: Experience of clinical work and treatment methods in psychiatry