## PARASUICIDALIS BEHAVIOUR: VIOLENT AND NONVIOLENT

M.P. Novakovic<sup>1</sup>, J. Marić<sup>2</sup>, V. Despotović<sup>3</sup>, Z. Maksimovic<sup>3</sup>, O. Stevanović<sup>4</sup>, R. Novaković<sup>3</sup>

<sup>1</sup>Department of Psychiatry, Faculty of Medicine, University of Medicin, BiH, University of East Sarajevo, Foca, <sup>2</sup>Centre of Mental Health, <sup>3</sup>Nova-Medic, Private Ginecologic-Opstretric Clinic, <sup>4</sup>University Sinergijamaster of Matematics and Computer Sciencs, Bijeljina, Bosnia-Herzegovina

**Introduction:** Parasuicidals behaviour is an urgent state in psychiatry and it occurs in different forms as the first or recidival attempt.

**Aim:** The aim is to prove the difference in frequency in presuicidal conditions together with sociodemographical and psychopathological predictors during the period from January 1st 2001 to December 31st 2010.

**Method:** Subjects have been divided into two groups depending of the way they Parasuicidals behaviour: violent (N=75) and nonviolent (N=75) in multicentric prospective observation in Bosnia and Herzegovina (B&H). The following instruments have been premortally used: list of general data (ICD-10 criteria); personal features test (EPQ-Eysenck HJ); test of depressiveness (HDRS-Hamilton M); emotional index test (P.I.E. Plutchik R) and postmor-tally: SSIPA interview. Results were analysed using descriptive and multivariant analyses.

**Results:** Multivariant analysis has showed the highest difference between groups in a violent group comparing to a nonviolent one (P=0.001) in a treatment length [OR= 0.950 (95%), Cl 0.710 -970], compliance [OR= 0.810(95%), Cl 0.780 - 1.050], severity of depression [OR=0. 825 (95%), Cl 0.650 -1.340] and motivation [OR = 0.750 (95%), Cl = 0.835-1.150].

**Conclusion:** Parasuicidals behaviour performance have not shown statistically significant difference. This study has shown the difference in the length of treatment (duration of disease), cooperation with therapeutic team, depression worsening regardless its origin and motivations for social adaptations and participation. Patients with more expressed mentioned predictors, were attempting suicide faster, regardless therapeutical treatment.