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Suicide and Suicidal Behavior Overview

Suicide is the act of deliberately taking one's own life. Suicidal behavior is any deliberate action with potentially life-threatening consequences, such as taking a drug overdose or deliberately crashing a car.

Reference from A.D.A.M.

CAUSES

Suicidal behaviors can accompany many emotional disturbances, including depression, bipolar disorder, and schizophrenia. More than 90% of all suicides are related to a mood disorder or other mental illness.

Suicidal behaviors often occur in response to a situation that the person views as overwhelming, such as:

- Aging
- Death of a loved one
- Dependence on alcohol or other drug
- Emotional trauma
- Guilty feelings
- Serious physical illness
- Social isolation
- Unemployment or financial problems

The elderly have the highest rate of suicide, but there has been a steady increase among adolescents. Risk factors for suicide in adolescents include:

- Access to firearms
- Family member who committed suicide (almost always someone who shared a common mood disorder)
- History of deliberate self-harm
- History of neglect or abuse
- Living in communities where there have been recent outbreaks of suicide in young people
- Romantic breakup

Suicide attempts that do not result in death far outnumber completed suicides. Many unsuccessful suicide attempts are carried out in a manner that makes rescue possible. These attempts often represent a desperate cry for help.

The method of suicide can be relatively nonviolent (such as poisoning or overdose) or violent (such as shooting oneself). Males are more likely to choose violent methods, which probably accounts for the fact that suicide attempts by males are more likely to be completed. Many suicides involve a firearm, especially in elderly men.

Relatives of people who seriously attempt or complete suicide often blame themselves or become extremely angry, seeing the attempt or act as selfish. However, when people are suicidal, they often mistakenly believe that they are doing their friends and relatives a favor by taking themselves out of the world. These irrational beliefs often drive their behavior.

SYMPTOMS

Early signs:

- [Depression](#)
- Impulsiveness
- Nervousness
- Statements or expressions of guilt feelings
- Tension or [anxiety](#)

Critical signs:

- Direct attempts to commit suicide
- Direct or indirect threats to commit suicide
- Giving away belongings, attempts to "get one's affairs in order"
- Sudden change in behavior, especially calmness after a period of anxiety

Danger signs in young people:

- Loss of interest in activities that were previously enjoyable
- Sudden decrease in school performance
- Unusual changes in sleep or eating habits
- Unusual irritability
- Withdrawal from friends

TREATMENT

Adolescents may fail to seek help for suicidal thoughts, for all of the following reasons:

- They believe nothing will help
- They are reluctant to tell anyone they have problems
- They think it is a sign of weakness to seek help
- They do not know where to go for help

Emergency measures may be necessary after a person has attempted suicide. First aid, CPR, or mouth-to-mouth resuscitation may be required.

Hospitalization is often needed to treat a suicide attempt and to prevent future attempts. Mental health intervention is one of the most important aspects of treatment.

OUTLOOK (PROGNOSIS)

Suicide attempts and threats should always be taken seriously. About one-third of people who attempt suicide will repeat the attempt within 1 year, and about 10% of those who threaten or attempt suicide eventually do kill themselves.

Mental health care should be sought immediately. Dismissing the person's behavior as attention-seeking can have devastating consequences.

POSSIBLE COMPLICATIONS

Complications vary depending on the type of suicide attempt.

WHEN TO CONTACT A MEDICAL PROFESSIONAL

A person who threatens or attempts suicide **MUST** be evaluated immediately by a mental health professional. **NEVER IGNORE A SUICIDE THREAT OR ATTEMPT!**

PREVENTION

Many people who attempt suicide talk about it before making the attempt. Sometimes, simply talking to a sympathetic, nonjudgmental listener is enough to prevent the person from attempting suicide. For this reason suicide prevention centers have telephone "hotline" services. Again, do not ignore a suicide threat or attempted suicide.

As with any other type of emergency, it is best to immediately call the local emergency number (such as 911). Do not leave the person alone even after phone contact with an appropriate professional has been made.

REFERENCES

Zuckerbrot RA, Cheung AH, Jensen PS, Stein RE, Laraque D. GLAD-PC Steering Group. Guidelines for Adolescent Depression in Primary Care (GLAD-PC):I. Identification, assessment, and initial management. *Pediatrics*. 2007;120:e1299-e1312.

Institute for Clinical Systems Improvement. *Health Care Guidelines: Major Depression in Adults in Primary Care*. 10th edition. May 2007.

Bridge JA, Iyengar S, Salary CB, et al. Clinical response and risk for reported suicidal ideation and suicide attempts in pediatric antidepressant treatment: a meta-analysis of randomized controlled trials. *JAMA*. 2007;297:1683-1696.

Cheung AH, Zuckerbrot RA, Jensen PS, Ghalib K, Laraque D, Stein RE. GLAD-PC Steering Group. Guidelines for Adolescent Depression in Primary Care (GLAD-PC):II. Treatment and ongoing management. *Pediatrics*. 2007;120:e1313-e1326.

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