CLINICAL CHARACTERISTICS OF MEDICALLY SERIOUS SUICIDE ATTEMPTS ASSESSED BY A CONSULTATION-LIAISON PSYCHIATRY SERVICE

R. Sánchez-González ^{1,2,3}, E. Monteagudo-Gimeno ⁴, L. Pintor-Pérez ⁵

¹ Department of Psychiatry. Institut de Neuropsiquiatria i Addiccions, Centre Emili Mira, Parc de Salut Mar. Barcelona. Spain.

² IMIM (Hospital del Mar Medical Research Institute). Barcelona. Spain.

³ Centro de Investigación Biomédica En Red de Salud Mental (CIBERSAM). Barcelona. Spain.

⁴ Acute and Dual Pathology Mental Health Unit. Germanes Hospitalàries Benito Menni CASM. Sant Boi de Llobregat. Barcelona. Spain.

5 Consultation-Liaison Service. Department of Psychiatry. Institut de Neurociències. Hospital Clínic i Provincial de Barcelona. Institut d'Investigacions Biomèdiques August Pi i Sunyer (IDIBAPS)

– Universitat de Barcelona. CERCA Programme/Generalitat de Catalunya. Barcelona. Spain.

E-mail address: rsanchezgonzalez@psmar.cat

Aim

To assess the clinical characteristics of medically serious suicide attempts (MSSA) and compare them with those patients referred from medical or surgical units to a consultation-liaison psychiatry service (CLP) due any other reason.

Methods

Longitudinal observational case-control study including adult impatiens who were consecutively referred to the CLP service of the University Clinical Hospital of Barcelona between 2007 and 2014. The patients were assessed with a structured psychiatric interview for DSM-IV (SCID-CV). We excluded the patients admitted to psychiatric inpatient unit or discharged from the emergency department.

Results

- Our study included 223 of consultations concerning patients with MSSA (4.1%) and 5205 general consultations due to other reasons (95.9%). The sociodemographic and clinical characteristics of the two subgroups are shown in Figure.
- Patients with MSSA were younger compared to control group (47.3 vs 55.3 years; p<0.001). They also had a higher prevalence of psychosocial stressors (54.3% vs 24%; p<0.001), history of previous suicide attempts (54.3% vs 3.1%; p<0.001) and psychiatric disorders (78.9% vs 54.5%; p<0.001), mainly mood and personality disorders.
- 10% of MSSA required intensive care assistance versus only a 0.9% in control group (p>0.001). The mean length of the hospital stay was significantly shorter for the group of patients with MSSA (18.4 vs 25.3 days; p<0.003). Nevertheless, a 24.3% of MSSA were finally transferred to the psychiatric inpatient unit after discharge from medical/surgical services.

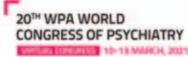
Conclusions

Our results confirm that patients with MSSA referred to CLP have particular epidemiologic and clinical features, being possible to identify some risk factors. It is also a highly complex subgroup that requires specific psychosocial interventions.

Table 1. Sociodemographic and clinical differences between patients with and without MSSA.

	Control group (n = 5205)		Suicide attempters (n = 223)		5
	n	%	n	%	p value
Gender					0.167
Male	2930	56.3	115	51.6	
Female	2275	43.7	108	48.4	
Previous suicide attempts					< 0.001
No	5046	96.9	102	45.7	
Yes	159	3.1	121	54.3	
Psychiatric history					< 0.001
No	2368	45.5	47	21.1	
Yes	2837	54.5	176	78.9	
Physical disability		- 0.0	400		0.585
No	3847	73.9	169	75.8	
Yes	1358	26.1	54	24.2	
Psychosocial stressors	0050	70.0	400	45.7	< 0.001
None	3956	76.0	102	45.7	
Economic	307	5.9 12.8	17	7.6 32.3	
Interpersonal problems	668 33	0.6	72 7		
Legal circumstances Problems related to employment	33 81	1.6	8	3.1 3.6	
Multiple	160	3.1	17	7.6	
Current psychiatric diagnosis	100	3.1	<u> </u>	1.0	< 0.001
Schizophrenia and other psychotic disorders	198	3.8	28	12.5	< 0.001
Mood disorders	421	8.1	64	28.6	
Adjustment disorders	1166	22.4	35	15.7	
Personality disorders	146	2.8	42	18.9	
Substance-related disorders	1254	24.1	14	6.4	
Delirium, dementia, and cognitive disorders	1192	22.9	25	11.1	
Other diagnosis	328	6.3	10	4.5	
No diagnosis	500	9.6	5	2.3	













2416