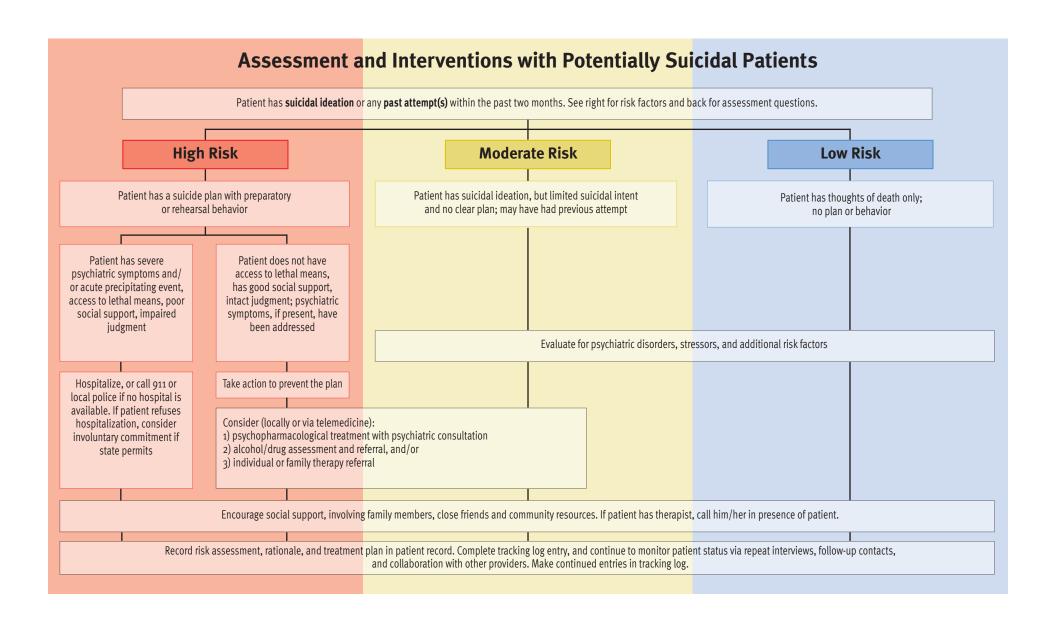
Assessment and Interventions with Potentially Suicidal Patients

A Guide for Primary Care Professionals







Suicide Risk and Protective Factors¹

RISK FACTORS

- Suicidal behavior: history of prior suicide attempts, aborted suicide attempts or self-injurious behavior.
- ► Family history: of suicide, attempts, or psychiatric diagnoses, especially those requiring hospitalization.
- Current/past psychiatric disorders: especially mood disorders (e.g., depression, Bipolar disorder), psychotic disorders, alcohol/substance abuse, TBI, PTSD, personality disorders (e.g., Borderline PD).

Co-morbidity with other psychiatric and/or substance abuse disorders and recent onset of illness increase risk.

- Key symptoms: anhedonia, impulsivity, hopelessness, anxiety/panic, insomnia, command hallucinations, intoxication. For children and adolescents: oppositionality and conduct problems.
- Precipitants/stressors: triggering events leading to humiliation, shame or despair (i.e., loss of relationship, financial, or health status – real or anticipated).
- ► Chronic medical illness (esp. CNS disorders, pain).
- History of or current abuse or neglect.

PROTECTIVE FACTORS

Protective factors, even if present, may not counteract significant acute risk.

- Internal: ability to cope with stress, religious beliefs, frustration tolerance.
- **External:** responsibility to children or pets, positive therapeutic relationships, social supports.

Screening: uncovering suicidality²

- Other people with similar problems sometimes lose hope; have you?
- With this much stress, have you thought [are you thinking] of hurting yourself?
- Have you ever thought [are you thinking] about killing yourself?
- Have you ever tried to kill yourself or attempted suicide?

Assess suicide ideation and plans³

- Assess suicidal ideation frequency, duration, and intensity
 - When did you begin having suicidal thoughts?
 - Did any event (stressor) precipitate the suicidal thoughts?
 - How often do you have thoughts of suicide? How long do they last?
 - How strong are the thoughts of suicide?
 - What is the worst they have ever been?
 - What do you do when you have suicidal thoughts?
 - What did you do when they were the strongest ever?
- Assess suicide plans
 - Do you have a plan or have you been planning to end your life? If so, how would you do it? Where would you do it?
 - Do you have the (drugs, gun, rope) that you would use? Where is it right now?
 - Do you have a timeline in mind for ending your life? Is there something (an event) that would trigger the plan?

Assess suicide intent

- ▶ What would it accomplish if you were to end your life?
- Do you feel as if you're a burden to others?
- How confident are you that your plan would actually end your life?
- What have you done to begin to carry out the plan? For instance, have you rehearsed what you would do (e.g., held pills or gun, tied the rope)?
- ► Have you made other preparations (e.g., updated life insurance, made arrangements for pets)?
- What makes you feel better (e.g., contact with family, use of substances)?
- What makes you feel worse (e.g., being alone, thinking about a situation)?
- ► How likely do you think you are to carry out your plan?
- What stops you from killing yourself?

Endnotes:

¹ SAFE-T pocket card. Suicide Prevention Resource Center & Mental Health Screening. (n/d).

² Stovall, J., & Domino, F.J. Approaching the suicidal patient. *American Family Physician*. 68 (2003), 1814-1818.

³ Gliatto, M.F., & Rai, K.A. Evaluation and treatment of patients with suicidal ideation. *American Family Physician*, 59 (1999), 1500-1506.

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