PATIENT EDUCATION

Suicide

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patienteducation@aub.edu.lb

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What is suicide?

Suicide is the act of ending one's life intentionally. It is a serious and tragic problem that can affect anyone of us. Suicide is more common than people assume. The World Health Organization (WHO) estimates that one million people die from suicide every year. In Lebanon, it is estimated that at least every 2.5 days, someone dies from suicide. Suicide is preventable; the more we know about it, the better we are at preventing it.

What should I know about suicide?

There are many common misconceptions about suicide. It is not true that:

1. People who commit suicide really wish to die. However they simply want to end the pain they are experiencing.
2. People who attempt suicide are weak, selfish or are just seeking attention. In fact nine out of 10 suicide cases result from some form of mental illness.
3. Inquiring or talking about suicide can cause someone to attempt suicide. On the contrary, discussing the subject and asking questions that reflect your concern can minimize the anxiety and help prevent suicidal behavior.
4. Suicide occurs only among people of certain socio-economic status. Everyone is at risk.
5. Feeling suicidal is inherited. But a previous suicide in a family may increase its likelihood especially if a person is affected by a severe mental illness.
6. A person experiencing death wishes or considering suicide will continue to have similar thoughts all the time.
7. People who talk about suicide won't really do it. However most people who attempt or commit suicide give a previous verbal or non-verbal clue to their intentions.

Never ignore suicide threats. Take any suicidal talk or behavior seriously. Keep in mind that talking about suicide is not just a warning sign showing that the person is thinking about it, but it is a cry for help as well.

What are the warning signs of suicide?

Although the suicidal person might not show any sign, most people show clues that they are thinking of suicide. Half of these people might have seen a healthcare provider in the past month. People who may attempt, or commit suicide often experience severe levels of distress and may show significant changes in their lifestyle. Some warning signs include the following:

- Feeling hopeless
- Expressing death wishes such as saying that there is no reason to live
- Feeling trapped
- Suffering from unbearable and inexplicable pain
- Feeling that they are a burden to others
- Increasing use of alcohol and drugs
- Behaving recklessly
- Withdrawing from daily activities
- Experiencing very extreme mood swings
- Having a sudden interest in death
- Losing interest in most activities
- Giving away possessions that used to be important
- Writing a will

What are the risk factors for suicide?

People of all ages, races, ethnicities, and socio-economic status are at risk for suicide. The most important risk factor is the **history of suicidal behaviors or attempts**. The majority of people who attempt or commit suicide suffer from one or more treatable mental disorders. The most common disorders are:

- Depression
- Drug or alcohol dependence
- Schizophrenia

Other common risk factors include:

- Family history of suicide
- Terminal illness or chronic pain
- Recent loss or stressful life event
- Social isolation and loneliness
- History of trauma or abuse

Women are more likely to attempt suicide, but men have a higher rate of succeeding in their attempts. People over the age of 65 are at the greatest risk of death by suicide.

What are the effects of suicide?

On the individual:
Attempted suicides that do not lead to death may leave the person feeling more depressed, guilty, and ashamed, either because he/she failed to continue with the plan, or because he/she has disappointed their loved ones.

On the family:
Family members and friends of individuals who have attempted suicide may have higher levels of anxiety. They become more protective of their loved one, and fearful of losing him/her.

Families and friends of individuals who have died of suicide (suicide survivors) often continue to be affected by the death of their loved one for the rest of their lives. This extremely stressful experience leaves them with a mixture of loss, guilt, and self-blaming. Some develop depression or post-traumatic stress disorder.

The death anniversary of someone who died of suicide or major life events can be a risk factor for suicide survivors and can lead them to suicidal thoughts. It is important that suicide survivors receive support and seek treatment to help adjust to the loss of their loved one and to cope with their death.

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What can I do to prevent suicide?

Seek help immediately if you or someone you know is struggling with suicidal thoughts.

It is very important to identify suicidal thoughts to take the appropriate measures and decrease the likelihood of a suicidal attempt. The emotional pain driving these thoughts can be treated.

- **Speak up**
  If you feel a friend or a family member is suicidal, find out by talking to the person directly. Talking to a friend or family member about their suicidal thoughts and feelings can be very difficult. You can bring up the subject by using the below tips.
  - I have noticed that you're different lately and wondered how you are doing.
  - You haven't seemed yourself lately, that's why I wanted to check on you.
  - When did these feelings begin?
  - How can I support you right now? How can I be of any help?
  - Have you thought about getting help?
  - These feelings will change even though you may not believe it now.
  - I care about you and want to help you, even though I may not be able to know how you feel.
  - When you feel you want to give up, tell yourself you will hold on for just one more day, or hour, or minute, whatever you can manage.

  Remember the following:
  - Acknowledge that the problem cannot be solved on its own.
  - Never engage in self-blame.
  - Share the suicidal thoughts.
  - Take the thoughts seriously.

- **Respond quickly**
  Evaluate how serious the situation is. Keep in mind that people who are at the highest risk for committing suicide have a specific **suicide plan**. This plan includes the way to commit suicide, a time frame, and an intention for doing it.
  - Do everything you can to help/support the suicidal person. Be proactive. Don't wait for the suicidal person to contact you, contact them frequently instead.
  - Get professional help either through an inpatient admission or by following up with a psychiatrist and/or psychologist on a regular basis.
  - If you think the suicide attempt is forthcoming, call the doctor and/or psychologist to get further instructions or take the person to an emergency room. **Never, under any circumstances, leave a suicidal person alone. Remove any potentially lethal object** (such as guns, drugs, knives, etc.) from the person's reach.

- **Follow-up on treatment**
  Make sure the person is taking the medications exactly as prescribed by the doctor. Understand the possible side effects of these medications. Inform the doctor if you think the person is getting worse.

- **Make a safety plan**
  Help the person put a plan that he/she will follow during a suicidal crisis. The plan should identify any triggers that may lead to a suicidal crisis, such as an anniversary of a loss, alcohol, or stress from relationships. It should also include contact numbers of the person's doctor or therapist, as well as friends and family members who will help in an emergency.

What is the treatment for suicidal thoughts and behaviors?

a. **Talk therapy (psychotherapy):**
Psychotherapy helps the person understand how his/her thoughts and behaviors can affect one other. It helps the person feel understood and cared for, and it can provide relief from painful emotions and distress. It is effective for many people struggling with thoughts of hurting themselves.

b. **Medications:**
There are many medications available to effectively treat the underlying mental illness. Lithium and clozapine are two drugs known to be protective against suicide.

c. **Hospitalization:**
Hospitalization is required for people who are at high risk of suicidal behaviors including those who:
- Have attempted a failed suicide
- Have shown intention to end their lives
- Have been suffering from severe depression or any other mental illness

Hospitalization can be a good option if individuals can't control their impulses or are not ready to commit to therapy. During hospitalization, the person gets efficient treatment to decrease short and long-term risks associated with suicide.

An open discussion about suicide intentions in a supportive and knowledgeable environment helps to assess the risks and most importantly decreases the probability of suicide completion.

This educational material provides general information only.
It does not constitute medical advice. Consult your health care provider to determine whether the information applies to you.

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