

Suicide: Risk Stratification

Dr. Rob Orman lecture, 2011



Assessment of suicidal patient:

- Primarily based on clinician judgment while weighing risk and protective factors
- 3 red flags (rational thinking loss, ideation, organized/serious plan)

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| Increased risk | T | Trigger | Acute stressor? <i>Loss of job, support, loved one; annivers of loss; recent psych admission or suicide attempt. Teens: disappointment, embarrassment, suicide by peer</i> |
| | R | Rational thinking loss | Red flag risk: <i>Psychosis, agitation, debilitating anxiety</i> |
| | A | Age | Age doesn't protect from suicide, but higher risk if age 15-24 and >65 years. 3 rd cause of death in age 15-24. Older pts use more violent/lethal methods & give less warning. |
| | A | Access to means | Are there accessible firearms or weapons? In the US, firearms contribute to 60% of all suicide deaths and are the most common method across all age groups and gender. |
| | P | Previous attempts | 38x increased risk for suicide. Higher risk if previous attempt <1 yr ago or more lethal mechanism. |
| | P | Previous psychiatric care | Higher risk with higher level of prior psychiatric care (i.e. inpatient) |
| | E | Excessive EtOH / drugs | 50% of deaths involve EtOH intoxication. Increases impulsivity. If d/c patient (no longer suicidal when sober), need outpt substance abuse counseling plan. |
| | D | Depression, hopeless | Major depression increases risk of suicide 20-fold. Hopelessness is red flag and indicator of depression severity. |
| | S | Sickness | Medical illness may cause functional limitations, depression, or hopelessness. High risk dz: <i>Epilepsy, malignancy, CNS disorders (MS)</i> |
| | I | Ideation | Red flag risk: Suicidal ideation (SI) is major precursor to attempted/completed suicide BUT SI denial ≠ zero risk. Study: 78% psych inpts who committed suicide in hosp or shortly after d/c denied SI in last psych eval. |
| Decreased risk | L | Lack of social support | Lack of PERCEIVED social support. Collaborative history from friends/family helpful. |
| | O | Organized or serious plan | Red flag risk: More detailed & lethal the plan --> greater the risk. Intent to die is more important than lethality of method. If didn't attempt, why not? (protective factors). |
| | S | Social support | Good support with family, friends, church. <i>Married with children in home</i> is a protective factor. |
| | A | Awareness | Good insight and coping skills |
| | F | Future oriented | Thinking about and looking forward to future events. |
| | E | Engaged | Engaged in therapeutic process. Open to participation in evaluation and therapeutic relationship. Does not withhold information. |