Suicide and Schizophrenia

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Abstract

Introduction: It is generally acknowledged that over 90% of those who commit suicide have a psychiatric diagnosis at the time of death. The presence of psychiatric illness is an important risk factor for suicide, and different risk profiles may emerge for different diagnoses. Among the various psychiatric illnesses, schizophrenia (19–46%) and mood disorders (28–62.4%) account for a high proportion of suicide attempters/victims, and are known to be the most frequent risk factors for suicide. Patients with schizophrenia experience personal distress, socio-occupational dysfunction and reduced expectancy.

Objective: The aim of this study is to review scientific literature regarding suicide ideation among schizophrenic patients.

Methods: A non-systematic review of English scientific literature was conducted through research in the PubMed search engine, using the keywords “Suicide” and “schizophrenia”.

Results: The risk factors with a strong association with later suicide include: being young, male, and with a high level of education. Illness-related risk factors are important predictors, along with number of prior suicide attempts, depressive symptoms, active hallucinations and delusions, and the presence of insight all having a strong evidential basis. A family history of suicide and comorbid substance misuse is also positively associated with later suicide. The only consistent protective factor for suicide was delivery of and adherence to effective treatment.

Discussion and Conclusion: Prevention of suicide in schizophrenia relies on identifying those individuals at risk, and treating comorbid depression and substance misuse, as well as providing the best available treatment for psychotic symptoms.

Supplementary material: Complete presentation available at http://ijcnmh.arc-publishing.org

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