

Suicide Caution

by

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Radio 11/27/08

- Introduction
 - Psalms 18:16
 - Suicide is a leading cause of death (12th) in the United States—30,000 per year. In Johnson v. United States and Paradies v. Benedictine Hospital the court said that “accurate prediction of dangerous and particularly of suicide and homicide, are almost never possible.”
- Those at risk for suicide include:
 - Bipolar disorder = 20%
 - MDD (major depressive disorder) = 15%
 - Schizophrenia = 10%
 - Alcoholic = 10%

- Suicide and cholesterol

The risk of suicide may be as much as six times higher in those whose cholesterol is controlled with medication (the statins). The statins cross the blood-brain barrier. A low serum cholesterol may be associated with a decrease in fatty acids. Since fatty acids and tryptophane (a precursor of serotonin) compete for a binding site on albumin, lower fatty acids would result in more tryptophane bound to albumin producing a compound that is not easily transported into the brain, causing less free tryptophane in the CNS for the synthesis of

serotonin that plays a role in mood. Also, cholesterol is necessary in the formation of brain cell membranes and the formation of synapses; thus, decreased cholesterol might decrease synaptic plasticity resulting in neurobehavioral consequences. Regardless of the theory, lower cholesterol is associated with higher suicide.

- Considerations
 - Although only the person knows if he is suicidal considerations include:
 - Depression
 - alcohol intake
 - schizophrenia
 - insomnia
 - loss
 - victimization
 - relationship conflict
 - suicide notes
 - family history of suicide
 - previous suicide attempts
 - previous self-harm
 - single
 - gun ownership
 - male gender
 - caucasian race
 - old age
 - widowed or other recent bereavement
 - separated
 - imprisoned

- living alone
 - no children in home
 - medical illness
 - pain
- Suicide and psychopharmacology
 - Medications often used today are less likely to result in suicide than medications often used in the past. SSRIs are less dangerous than TCAs; benzodiazepines are less dangerous than barbiturates. This does not mean the medications that can be more dangerous in overdose should never be used. Clozaril carries antisuicide effects in schizophrenics. Lithium also has antisuicide effects. Since the recent black box warning regarding increased suicide ideations (4% on antidepressants versus 2% on placebo) in children and adolescents on antidepressants, the use of antidepressants has decreased in children and adolescents and the incidence of suicide has increased.
- Suicide and bipolar disorder

In bipolar disorder:

 - the suicide rate is 60 times higher than in the general population
 - 25 to 60 percent will attempt suicide at least once
 - 20 percent will die of suicide
 - substance use ↑ the suicide risk (40 percent of bipolars with substance use attempt suicide)
 - substance abuse is higher in bipolar disorder and schizophrenia (56%)

The above is significant because of the high prevalence rate of bipolar disorder:

- 3.5 percent (schizophrenia is only 1 percent)
- Suicide and MDD
 - They see no hope
- Suicide and schizophrenia
 - Dangerous voices
 - Caution with insights
- Suicide and alcoholism
 - Altered thinking
- Medical condition, depression, and suicide
 - Those with MDD are at increased risk for suicide
 - Those with a medical illness are at increased risk for suicide
 - Those with both are at increased risk
 - CNS conditions
 - MS
 - Migraine
 - Epilepsy
 - Cancer
 - Head trauma
 - CUA's
 - Brain abscess
 - AIDS
 - Endocrine conditions
 - ↓thyroid
 - ↑thyroid
 - pheochromocytoma

- diabetes mellitus
- Infections
 - Mono
 - Bacterial infections
 - Viral infections
 - Lyme's disease
- Auto-immune conditions
 - SLE (systemic lupus erytheatosis)
- Pregnancy
- Metabolic conditions
 - Hypoxemia (pulmonary diseases such as COPD)
 - Hepatic encephalopathy
 - Wilson's disease (hepatolenticular deguneralation)
- Alcohol and drug abuse
- Environmental toxins
- Actions for family and friends
 - Education
 - Medication
 - Protection – hospitalization
 - Prevention – residential care
- Antidepressant effects of various medications
 - MAOIs – Ensam
 - TCAs
 - SSRIs
 - SNRIs
 - SNDRIIs
 - NDRIIs

- Alpha2 blockers
- Circuitry procedures – ECT, VNS, TNS
- SDRIs
- DPAs
- Thyroid
- Lithium
- Deplin and B₆
- Omega-3 fatty acids
- Conclusion
 - Psalms 119:24