



Understanding Depression & Suicide

Dr. Lau Kim Kah

Consultant Psychiatrist

Department of Psychiatry and Mental Health

Hospital Pulau Pinang



This Talk

- What is suicide
- Data on suicide
- Is suicide an indication of underlying illness
- Depression & Suicide
- Cry for help



World Mental Health Day Theme

- Building Awareness -
Reducing Risk: Mental Illness And Suicide



What is Suicide

- Suicide is neither an illness nor a condition
- Culmination of a complex set of thoughts and behavior
- Not a random or pointless act
 - seen as a way out of a crisis that is causing intense suffering
- Ultimate act of despair
- *Death* must be the central component and only *intention* of the act



Perspective of Health Profession

- Suicidal acts are not rare
 - 10% of deaths among psychiatric patients
 - Attempts much more common
- Suicide is a major public health challenge
 - 3rd leading cause of death among adolescents and young adults
 - 8th for all ages
- Impact on survivors



Data on Suicide

- Data are notoriously suspect
- Underestimate at least 1/3, from underreporting
 - Some deaths labeled accidental
 - May hide suicides due to shame
 - To limit psychological burdens on survivors
 - To avoid loss of life-insurance payments
 - Deaths occurring well after a suicide attempt are attributed to the final cause

Top 10 Causes of YLL Among Males (2000)

	Disease Category	YLL	%
1	Ischaemic Heart Disease	154,651	14.5
2	RTA	120,133	11.3
3	Cerebrovascular Disease	74,867	7.0
4	Septicaemia	70,091	6.6
5	Lower Resp tract Infection	44,264	4.2
6	Cirrhosis	33,364	3.1
7	COPD	28,766	2.7
8	Nephritis & Nephrosis	24,005	2.3
9	Self Inflicted injuries	23,581	2.2
10	Other unintentional injuries	23,478	2.2



Completed Suicides In KL

	Methodology	No	Ethnicity (%)	Population (%)	Method (%)
Teoh ('74)	Coroner's file (1965-1970)	264	Indian (57.6) Chinese (35.6) Malay (5.3) Others (1.5)	Not given	Hanging (50) Poisoning (22) Jumping (11.4)
Ong & Yeoh ('92)	KKM Suicide Statistics (1985-1986)	77	Indian (29.9) Chinese (57.1) Malay (3.9) Others (9.1)	Indian (10.0) Chinese (32.6) Malays (56.8) Others (0.6)	Hanging (49.3) Jumping (19.5) Poisoning (18.2)
Hayati et al ('04) 7.4 per 100,000	Postmortem HKL (1999)	76	Indian (52) Chinese (29) Malay (12)	21.1/100,000 8.6/100,000 2.3/100,000 (elderly) 2.6 /100,000	Poisoning (39) Hanging (34) Jumping (22)

Is Suicide Always an
Outcome of Illness?





Is Suicide Always an Outcome of Illness?

- Widely held view - being suicidal is itself a strong indication of mental illness
- Psychopathology in as many as 90% of completed suicides
- Can be a response to a precipitating experience in the absence of a history of psychiatric disturbance



Preexisting Illness & Suicide

<u>CONDITION</u>	<u>SMR</u>	<u>CONDITION</u>	<u>SMR</u>
Prior Suicide Attempt	38.4	AIDS	6.58
Eating Disorders	23.1	Alcohol Abuse	5.86
Major Depression	20.4	Epilepsy	5.11
Sedative Abuse	20.3	Child Psychiatric	4.73
Mixed Drug Abuse	19.2	Cannabis Abuse	3.85
Bipolar Disorder	15.0	Spinal Cord Injury	3.82
Opioid Abuse	14.0	Neuroses	3.72
OCD	11.5	Brain Injury	3.50
Panic Disorder	10.0	Huntington's Chorea	2.90
Schizophrenia	8.45	Cancer	1.80
Personality Disorders	7.08	Mental Retardation	0.88

SMR = Standard Mortality Ratio

Harris and Barraclough (1997)

A glowing green cactus flower, possibly a cholla, is shown against a black background. The flower is in bloom, with many layers of petals that appear to be emitting a bright green light. The stem of the flower is also green and has small spines. The overall effect is ethereal and somewhat mysterious.

Depression & Suicide



Depression - Suicide is the Major Life Threatening Complication

- Depression is the most common psychiatric diagnosis associated with suicide
- Lifetime risk of suicide in untreated depression is nearly 20%
- 2/3 of completed suicide are depressed at time of death
- 7% man & 1% women with depression at some time in their life will die by suicide



Depression and Suicide

- 9 to 15% of previously hospitalised depressed people will die by suicide
- Depression is often accompanied by co-occurring mental disorders (e.g. substance abuse/anxiety disorders)
- Substance & alcohol use disorders are Implicated in 25% of suicides
- Anxiety disorders seen in 15%-20% suicides



What Do We Understand About Depression

- Very common, life time risk up to 20%
- Biological illnesses where chemicals in the brain become unbalanced
- Involuntary (like hypertension or diabetes), but is treatable
- Stress doesn't necessarily have to be present, but can trigger or exacerbate a depression
- Can appear out of nowhere



Some Symptoms of Depression

- Unable to think like a healthy person
 - lost ability to imagine a happy future or remember a happy past
 - don't realize they're suffering from a treatable illness
 - Prevent person from understanding the options available to help relieve suffering
- Emotions and physical pain can become unbearable

How Does a Depressed Person Feel

- I can't make the sadness go away
 - I can't see any way out – I'm trapped
 - I can't see a future without pain – it is hopeless
 - I can't see myself as worthwhile – I'm not likeable
 - I can't get someone's attention – I'm lonely
 - I can't see possibility of change
 - I can't seem to get control – I'm going mad
 - I can't think clearly
 - I can't make decisions
 - I can't sleep, eat or work
 - I can't stop the pain – I'm desperate



Other Symptoms of Depression

- Lack of interest in previously enjoyable activities
- Fatigue or loss of energy
- Agitation, restlessness, irritability
- Feeling of guilt
- Recurrent thoughts of death, suicidal ideation and or plan for completing suicide



A Cry for Help

- A suicide attempt
 - one way depressed people choose to express these feelings
 - want their suffering to end
 - is a cry for help



A Cry for Help

- 66 had seen a doctor within one month of their suicide
- 40 had seen a doctor within one week
- 55 had told their intention to someone
- 33 had made an obvious suicide threat
- 80 were receiving psychotropic drugs
- only 33 received antidepressants (in inadequate doses)

Thank You

To learn more about how to help
people with mental distress, contact:

d'h♥me



04-2291111

