Suicide Attempts and Depression in Primary Care Patients

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Although ten percent of adults with depressive disorders attempted suicide over the course of a five-year study, the patients’ primary care providers were usually unaware of these attempts. The authors of this study concluded that “there is an urgent need not only to improve treatment of depression but also recognition of patients’ suicidal thoughts and attempts, and awareness for suicide risk” in primary care settings.

The study revealed that 10 percent of primary care patients diagnosed with depressive disorders attempted suicide over the study period. Ninety-five percent of these attempts took place while patients were experiencing major depressive episodes. The remaining five percent took place during partial remissions.

There were no suicide attempts by patients diagnosed with minor depressive disorders. Among patients with major depressive disorders, those who also had a substance abuse disorder were approximately 20 times more likely to attempt suicide. All of the patients who made attempts during full or partial remission from their depression had concurrent substance abuse. Substance abuse, in the absence of a major depressive episode, was not a significant risk factor for suicide attempts.

Although suicidal ideation had a strong association with the severity of a patient’s depression and few of the patients without major depression experienced ideation, a significant minority of the most depressed patients exhibited no suicidal ideation prior to attempting suicide.

Despite the fact that all of the patients who attempted suicide during the study period were diagnosed with major depressive disorder, almost 60 percent were not being treated for depression at the time of their attempts.

Forty-one percent of attempters received psychiatric care for depression after the attempt. Primary care providers rarely learned about their patients’ suicide attempts, although these attempts were documented by the psychiatric care providers and by emergency departments in which the patients were treated. Only one of the 22 patients who attempted suicide during the study period revealed the attempt to her primary care provider, and this conversation took place long after the attempt.

This study was conducted in Finland. No suicide deaths occurred in the study group of 134 patients during the five-year study period.


SPRC Commentary

The conclusion of the authors that “Primary care physicians or other attending professionals are usually unaware of the suicidal ideation or attempts of their patients” speaks to the need for better suicide awareness and prevention tools in primary care settings. This list of Resources for Primary Care [1] includes trainings, toolkits, and other materials that can help primary care providers better serve patients at risk for suicide.
Links within this resource