Suicide

Suicide is the third most common cause of death of adolescents and young adults. Teen suicide rates have increased dramatically over the years. If your teen has attempted or talked about suicide, it is very important to take the situation seriously. Evaluation and treatment by a mental health professional are needed to assess your child's risk of attempting suicide.

Adolescent suicide—what do we know about it?

Suicide and suicide attempts are relatively common among teenagers and young adults. Many thousands of young people in the United States attempt suicide each year, and about 2000 succeed. Certain factors increase the risk of teen suicide, especially previous suicide attempts, depression, and drug and alcohol abuse.

By far most adolescents survive the suicide attempt. Although most teens who make one suicide attempt don't try again, they are at increased risk of future attempts. Professional mental health evaluation and treatment are the best ways to reduce this risk.

What increases your child's risk of suicide?

The three main risk factors for adolescent suicide are:

- Previous suicide attempts.
- Depression and other mood disorders.
- Drug or alcohol abuse (especially alcohol).

If any of these three risk factors are present—especially in combination—contact our office. All are serious problems that should be evaluated by a mental health professional.

Certain other factors are related to higher suicide risk in teens:

- Suicide attempts occur in all races and social classes. Native-American boys seem to have the highest risk. Suicide rates among African-American boys are increasing.
- Girls carry out more suicide attempts, but boys are more likely to actually kill themselves. This may be because boys are more likely to use violent methods, especially guns. Taking a lot of pills is the most common form of attempted suicide—fortunately, it is also one of the least likely to succeed.
- Gay or bisexual teens have a higher suicide rate than straight teens.

- Having a gun at home is a major risk factor for successful suicide. This is so even if the guns are unloaded and locked up. We recommend removing all guns from the home, especially if your child has risk factors for suicide.
- Past mental health or behavioral problems, such as foster home or group home placement, physical or sexual abuse, or psychiatric illnesses put a child at increased risk.
- Genetic factors may play a role.

What leads to adolescent suicide attempts?

It can be difficult for adults, especially parents, to understand why a teenager would attempt to commit suicide. Suicide attempts by teenagers are influenced by cultural factors, mental health disorders, stressful life events, or personal problems, such as:

- Fights with parents, or parents' marital problems.
- Trouble at school—discipline problems or flunking.
- Breaking up with a boyfriend or girlfriend.
- Feeling isolated from peers.
- "Cluster suicides" may occur; news reports about teen suicides sometimes seem to prompt other suicide attempts.

How can doctors help after adolescent suicide attempts?

- When a teen (or an adult) attempts or talks about suicide, it may be viewed as a "cry for help." People only attempt suicide when they are feeling desperate. It is important for your child to understand that the "cry for help" has been heard and that he or she will be helped.
- If your child has made a suicide attempt, has talked seriously about suicide, or seems to be at high risk of suicide:
 - We will recommend that your child see a psychiatrist or other mental health professional as soon as possible. This expert will perform a thorough evaluation of your child's suicide risk and recommend further action.
- To be on the safe side, psychiatric hospitalization is sometimes recommended after suicide attempts. It allows time for the situation to calm down and permits a full medical and mental health evaluation.
- In other situations, management outside the hospital may be the best option. Even if your child seems to be at relatively "low risk" for a successful suicide attempt, the situation should be treated seriously. Seeing a crisis counselor may help your family to deal with the situation and to figure out what the next step should be.

• It is very important to get follow-up care for your child and family. Follow-up sessions should include education about adolescent suicide and its treatment and the warning signs of repeat suicide attempts.

What are the warning signs of adolescent suicide?

Although each case is different, certain warning signs should raise concern about possible suicide attempts.

• Any time your child talks about committing suicide, wishing he or she was dead, etc., seek help immediately. Statements about killing oneself should always be taken seriously.

Other possible warning signs include:

- Sudden behavior changes. Even suddenly acting cheerful after a long period of depression may be a warning sign of a suicide attempt.
- Statements of hopelessness ("Nothing matters anyway").
- Talking a lot about death and dying.

- Obtaining a gun.
- Giving away or throwing away possessions.
- Serious trouble with parents or at school.

It's important for parents to keep a dialog open with children and teens. Make it easy for them to talk about problems. If your child seems to have emotional problems, such as anxiety or depression, be sure to mention it to the doctor. On a broad scale, it would be helpful for schools to encourage teens to recognize suicide risk.

When should I call your office?

Call our office if:

- Your child talks about committing suicide, or any of the warning signs occur. Seek help as soon as possible. Contact your mental health provider, or call our office.
- *Your child has made or is planning a suicide attempt. Get help immediately!* Our office can provide you with a local suicide hotline number, or call the National Hopeline Network at 1-800-SUICIDE (1-800-784-2433).