



Schizophrenia, Bipolar Disorder and Suicide

SUMMARY

The Centers for Disease Control reported in 2016 that suicide rates rose significantly from 2009 to 2014 and that the rise in suicide rates accelerated beginning in 2006. In 2014, 42,773 people in the United States died by suicide, making it the 10th leading cause of death in the nation and the 2nd leading cause of death for 15-24 year olds. More than 100 Americans die by suicide every day, and more than 1 million US residents are estimated to attempt suicide annually. Suicide is a significant contributor to the early mortality of individuals with schizophrenia and bipolar disorder, whose life expectancy in the United States is approximately 25 years shorter on average than the general public.

Substance Abuse and Mental Health Services Administration (2016, June 16). State estimates of past year serious thoughts of suicide among young adults: 2013 and 2014.

SUICIDE PREVALENCE

- The *lifetime risk* of suicide among individuals with schizophrenia is currently believed to be about 5%. Previous studies reporting rates of 10% have been discounted because they included data only for younger individuals with schizophrenia, among whom the suicide rate is higher. Most individuals with schizophrenia who commit suicide do so early in the course of the disease; as the remaining individuals get older, suicide is much less common, raising the overall rate.

Support for a lower suicide rate in psychotic disorders also comes from a 38-year study of all individuals with schizophrenia and related conditions in Sweden. At the end of five years following their first diagnosis, 2.3% of the men and 1.5% of the women had killed themselves.

Palmer, B.A., Pankratz, S., Bostwick, J.M. (2005). The lifetime risk of suicide in schizophrenia. *Archives of General Psychiatry*, 62, 247–253.

Fazel S., Wolf, A., Palm, C., Lichtenstein, P. (2014). Violent crime, suicide, and premature mortality in patients with schizophrenia and related disorders: a 38 –year total population study in Sweden. *Lancet Psychiatry*, 1, 44–54.

- The lifetime risk of suicide among individuals with bipolar disorder is higher than for schizophrenia: an estimated 10-15%.

Goodwin, F.K., Jamison, K.R. (1990). Manic-Depressive Illness. *New York: Oxford University Press*, 230.



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Karch, D.L., Dahlberg, L.L., Patel, N., Davis, T.W., Logan, J.E., Hill, H.A., Ortega, L. (2009, March 20). Surveillance for violent deaths—National Violent Death Reporting System, 16 states, 2006. *Morbidity and Mortality Weekly Report*, 58(SS01), 1—44.

- The rate of attempted suicide in individuals with schizophrenia and bipolar disorder is much higher than the completion rate, with some studies reporting that half the people with the conditions attempt to kill themselves at some point in their lives. In 2016, one study reported that 27.7% of persons with bipolar disorder have made two or more attempts. This number jumped to 74.7% for individuals with a history of psychiatric hospitalization.

Roy, A., Mazonson, A., Pickar, D. (1984). Attempted suicide in chronic schizophrenia. *British Journal of Psychiatry*, 144, 303—306.

Aaltonen, K., Naatanen, P., Koivisto, M., Baryshnikov, I., Karpov, B., Isometsa, E. (2016). Differences and similarities of risk factors for suicidal ideation and attempts among patients with depressive or bipolar disorders. *Journal of Affective Disorders*, 193, 318—330.

RISK FACTORS FOR SUICIDE

- Known risk factors for suicide among individuals with serious mental illness include depressive symptoms; substance abuse; awareness of illness (i.e., absence of anosognosia); a history of violent behavior; and poor adherence to medication. For example, a study in Kentucky found only 2 of 28 individuals with schizophrenia who killed themselves had evidence in their blood of having taken antipsychotic medication, indicating 93% were untreated at the time of their deaths.

Shields, L.B.E., Hunsaker, D.M., Hunsaker, J.C. (2007). Schizophrenia and suicide: a 10-year review of Kentucky Medical Examiner cases. *Journal of Forensic Sciences*, 52, 930—937.

- Suicide is the leading cause of death in jails and prisons, where 20% of the inmates are estimated to be mentally ill. Thus incarceration is a significant risk factor for suicide.

Bureau of Justice Statistics (2013). *Mortality in Local Jails and State Prisons, 2000—2013*.

- A study of 187 individuals with schizophrenia who attempted or committed suicide found that “two positive symptoms (suspiciousness and delusions) were more severe among successful suicides,” implicating inadequate treatment as a risk factor.

Fenton, W., McGlashan, T.H., Victor, B.J., Blyler, C. (1997). Symptoms, subtype, and suicidality in patients with schizophrenia spectrum disorders. *American Journal of Psychiatry*, 154, 199—204.

- A study of suicide in the United States in 2013 reported that less than half of adults with suicide ideation were using mental health services at the time, and only 31% of suicide decedents were in treatment at the time of their deaths.

Stanley, I.H., Hom, M.A., Joiner, T.E. (2015). Mental health service use among adults with suicide ideation, plans, or attempts: Results from a National Survey. *Psychiatric Services*, 66(12), 1296—1302.



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- Multiple European studies report a correlation between the failure to adequately treat individuals with serious mental illness and suicide risk.

Angst, F., Stassen, H.H., Clayton, P.J., Angst, J. (2002). Mortality of patients with mood disorders: follow-up over 34-38 years. *Journal of Affective Disorders*, 68, 167–181.

Appleby, L., Dennehy, J.A., Thomas, C.S., Faragher, E.B., Lewis, G. (1999). Aftercare and clinical characteristics of people with mental illness who commit suicide: a case-control study. *The Lancet*, 353, 1397–1400.

De Hert, M., McKenzie, K., Peuskens, J. (2001). Risk factors for suicide in young people suffering from schizophrenia: a long-term follow-up study. *Schizophrenia Research*, 47, 127–134.

Gaertner, I., Gilot, C., Heidrich, P. (2002). A case control study on psychopharmacotherapy before suicide committed by 61 psychiatric inpatients. *Pharmacopsychiatry*, 35, 37–43.

Heilä, H., Isometsä, E.T., Henriksson, M.M. (1997). Suicide and schizophrenia: a nationwide psychological autopsy study on age- and sex-specific clinical characteristics of 92 suicide victims with schizophrenia. *American Journal of Psychiatry*, 154, 1235–1242.

Nieto, E., Vieta, E., Gastó, C., Vallejo, J., Cierera, E. (1992). Suicide attempts of high medical seriousness in schizophrenic patients. *Comprehensive Psychiatry*, 33, 384–387.

- A Swedish study in 2014 reported that 25% of those that had committed suicide had seen a health provider within the two weeks prior.

Crump, C., Sunquist, K., Sundquist, J., Winkleby, M.A. (2014). Sociodemographic, psychiatric and somatic risk factors for suicide: A Swedish national cohort study. *Psychological Medicine*, 44(2), 279–289.