



Guest Editorial

Suicide prevention: part of the way there?

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I have just returned from the *European Symposium on Suicide and Suicidal Behaviour*. It was held in Copenhagen. The weather was beautiful and the sparkling lights of the Tivoli Gardens provided a lovely setting for such a gathering. But the mood of the symposium was I thought, rather serious. This was the 10th Symposium. Since the first symposium there is now cause for suicide researchers and clinicians to feel a reasonable degree of confidence in their work. Suicide rates have levelled out in many European countries and in some have dropped substantially, at least among younger age groups.

The falls in rates or the arrest of the rising rates can reasonably be attributed to the immense efforts that have gone into prevention in many countries, and this must be a cause for congratulations to those involved. But the serious mood of the symposium seems likely to be due to the recognition that there is still a long way to go. Overall, the mortality rates from suicidal behaviours are still a lot higher than they were before the 1980's. Also, Keith Hawton's opening address reported an 11 year follow-up of over 10,000 cases of attempted suicide where the mortality rate from unexpected deaths was 10%, 2.6% of these being suicide. This is still an unacceptable level of mortality for what may be preventable.

There are several areas of continuing mystery about suicide that researchers and clinicians are now aiming to understand. One of these is why

suicide seems to run in some families. This is an old clinical observation that was given force by Kety's studies of Amish families where, among the families carrying depression across generations, suicide was limited to only a few. This suggested a genetic basis for suicide independent of depression. J John Mann from the USA reviewed the latest genetic studies. He emphasised the possible role of genetically induced enzymes that are related to aggression or impulsivity, such as tryptophane hydroxylase 2 (TPH2 gene), which may be defective in people who suicide. Genetic studies were also presented by German groups led by Ina Giegling and Dan Rujescu and by Swedish researchers led by Birgitta Ehnstrom. The neurobiology of suicide was reviewed by Kees van Heering of Belgium, in particular the monoamine transmitters, the serotonergic system and the opioid receptor sites in the brains of suicides.

There were three keynote speeches on these basic biological subjects, with follow-ups in smaller symposia, so you can see that a steady research effort is being made into the neurobiological basis of suicide, looking for vulnerabilities that may be correctable. In addition to these direct biological studies, work was reported on the relationship of suicide to schizophrenia in an attempt to understand whether or not there may be a neurobiological underlay for the heightened risk. Suicide behaviour among first episode psychosis patients

was a particular focus for a group from Denmark led by Merete Nordentoft and this could provide interesting links with the EPPIC project in Melbourne.

Preben Bo Mortenson reviewed social risk factors and found that they were only weak predictors of suicide. Yet cultural factors continue to be of great interest to researchers. They seem to play a part at least at the level of the vulnerable individual, possibly due to levels of learned cultural taboos or permissiveness or as a consequence of difficulties experienced in social integration due to contemporaneous migration patterns. Both aspects were reported on in cross-cultural studies from Norway and Denmark. Also the means of suicide remains a target for prevention. Reports from various countries showed the beneficial effects of restricting analgesic pack sizes (United Kingdom), properly disposing of unused medication (the DUMP project from Ireland) and installing safety nets at high-risk sites (Berne Muenster Terrace in Switzerland).

The case for establishing agreements with the media concerning the portrayal of suicide was discussed with responsible cooperation reported in Belgium and unsuccessful efforts in Lithuania.

The heightened risk of suicide among psychiatric inpatients was a topic of considerable concern to researchers, clinicians and policy makers and various models were presented about how best to address this issue. Also, Rik van de Kerchove presented a particularly interesting paper on gay, lesbian and bisexual adolescents in Belgium. Among out-GLB youth the rate of attempted suicide was about 20%. This rate seems surprisingly high because these young people appeared to be otherwise well integrated into a GLB life. A deeper investigation seems to be urgently called for by this finding.

Perhaps one of the most fascinating aspects of the symposium was the renewed interest in the intrapsychic dynamics of suicidal people. Mark Williams of the UK gave an impressive overview of psychological treatments and showed that recent studies, such as reported by authorities like Peter Fonagy, may be indicating an important role for psychodynamic

psychotherapy. This has become more significant in the light of the current controversial issues surrounding the use of antidepressant medication for depressed adolescents (well described by Ulrich Hergerl of Germany who suggested that there was not compelling evidence for concern). An interesting session was devoted to a case presentation by Stephen Briggs from the Tavistock Clinic with incisive and clinically relevant commentaries by two psychoanalysts, John Malts Berger and Mark Goldblatt from the USA.

Rory O'Connor from Scotland described aspects of cognitions in suicidal people, in particular the role of hopelessness and perfectionism. The important potential roles of problem solving skills, decision making, and protective beliefs in mediating between depression and suicide and serious risk taking in young people was the subject of our book *Out of Options: A Cognitive Model of Adolescent Suicide and Risk Taking*, launched at the symposium by Cambridge University Press (Sofranoff, Dalgleish & Kosky, 2004).

Obviously there was much else. In particular, there were interesting service models, various prevention models and a number of different forms of awareness and education models described, although few had as yet been evaluated. There were also sessions on high-risk groups, the young and the elderly, that warranted consideration, but one is limited by the concurrent sessions arrangement from attending more than a relatively small fraction of the total sessions. Among the other Australian and New Zealand researchers who attended were Bob Goldney, Graham Martin, Diego De Leo, Tony Davis and Annette Beautrais.

This was a rich symposium and one not without its interesting little controversies as should be the case in discourse on an area of knowledge where much still remains unknown.

Reference

Sofranoff, K., Dalgleish, L. & Kosky, R. (2004). *Out of Options: A Cognitive Model of Adolescent Suicide and Risk Taking*. Cambridge: Cambridge University Press.