

SAD PERSONS

Suicide Risk Factors in Elderly

S

SEX

Suicide rate is 3 – 4 x higher in men than women

A

AGE

Suicide rates increase steadily with age, reaching a peak at 75 years plus

D

DEPRESSION

Risk increases with presence of clinical or major depression

P

PREVIOUS ATTEMPT

Any previous attempt, even if long ago, increases risk X 10

E

ETHANOL

Use of alcohol a common contributor to suicide; either chronic alcoholism or a return to alcoholism is a very serious risk factor

R

RATIONAL LOSSES:

- death of friend or family member
- usefulness/role
- vigor, health
- self-esteem

OR LOSS OF RATIONALITY:

- poor judgement due to dementia, especially frontal lobe dementia
-

S

SOCIAL DEPRIVATION, SOLITUDE

Absence of family or community support/connections; living alone; solitude

O

ORGANIZED PLAN

A precise and organized plan, dates, methods

N

NO SPOUSE

Absence of spouse or loved one a risk factor separate from Solitude

S

SICKNESS

Co-existence of physical illness, in particular chronic physical illness, and even more important, chronic physical illness with pain

Danger Zones:

1. THREE MONTH LAW:

- Danger of recurrence 3 months after an attempt, once initial flurry of care provider attention settles down.

2. ONE MONTH RULE:

- An Absolute Rule: when an elderly person commits suicide, the risk for suicide is immense for ANYONE (staff, family, other residents, all caregivers) who knew and had been in contact with the person who committed suicide

3. ANNIVERSARIES LAW:

- Birthdays, wedding anniversaries, special holidays are at-risk times for survivors

4. THE POST SURGERY LAW:

- In the elderly, the risk of suicide increases during after any surgical intervention (even minor ones) and clinical illnesses (infections) that take a long time to heal

B Groulx. 2001. Depression and dementia: what clinicians need to know (part 2). The Canadian Alzheimer Disease Review. 18 – 20.