

Psychiatric units safer as in-patient suicide falls

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Suicides by psychiatric in-patients have fallen to a patient admission." new low, research published today has found.

The study by the University of Manchester's National Confidential Inquiry into Suicide and Homicide by People with Mental Illness, one of very few to look at trends over time, shows the rate Appleby, is published in *Psychological Medicine*. of suicide among psychiatric in-patients fell by between 29% and 31% between 1997 and 2008 with nearly 100 fewer deaths per year.

The falls were seen across most groups of patients with the biggest falls in young patients and those with schizophrenia. On wards, deaths by hanging fell by nearly 60%.

But the research, published in the journal Psychological Medicine, also revealed that the risk of suicide for those recently discharged from hospital may have increased over the same time period. The number of suicide deaths in people under the care of specialist services such as crisis resolution teams also increased. However, the research team suggested that these increases in suicide did not explain the fall in in-patient suicide.

Lead author Nav Kapur, Professor of Psychiatry and Population Health at The University of Manchester, said: "The fall in suicide rates among psychiatric in-patients since the late 90s has been a major success for suicide prevention in hospital services. Suicide rates have fallen faster than in the general population and against a backdrop where in-patients have had more complex needs. Increased awareness of risk, a safer ward environment and improved professional practice could be key factors in these positive trends.

"But, as in-patient services are now dealing with patients who may be more unwell than in the past, swift and effective support for people following discharge has become even more important. We also need to keep a careful watch on suicide in services and settings which are alternatives to in-

More information: 'Psychiatric in-patient care and suicide in England, 1997 to 2008: a longitudinal study,' by N. Kapur, I. M. Hunt, K. Windfuhr, C. Rodway, R. Webb, M. S. Rahman, J. Shaw and L.

Provided by University of Manchester



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