

# No benefit from screening all patients for suicide risk, report says

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Task force stresses that finding does not apply to those with current or past mental health problems.

(HealthDay)—After completing a review of existing research, an expert panel has determined that there is not enough evidence to recommend that all teens and adults be screened for suicide risk factors.

This finding applies to those without a current [mental health disorder](#) or a history of mental illness, according to the draft recommendation statement posted Tuesday by the U.S. [Preventive Services](#) Task Force (USPSTF). The USPSTF is an independent medical panel with federal government support.

The authors of the guidelines pointed out, however, that it is important to find ways to prevent suffering among those who would attempt suicide, and among the families and communities of those who attempt or die by suicide.

"Unfortunately, at this time we don't know if asking everyone who visits their doctor or nurse about their risk factors for suicide leads to fewer suicides and [suicide attempts](#)," task force member Dr. David Grossman said in a news release from the USPSTF.

The task force continues to recommend that teens and adults be screened for depression. Research

shows that screening for depression coupled with treatment is effective in helping people.

Grossman said it is important to screen for suicide risk in people with [symptoms of depression](#) or certain other [mental health conditions](#). "For these individuals, having clinicians ask about suicidal thoughts should be part of managing their disease," he said.

Suicide is a major public health issue in the United States. Each year, more than 37,000 people in the country die by suicide. Those at greatest risk include men and [older adults](#) in most ethnic groups. Among teens, the risk is highest for Hispanic girls and American Indian/Alaskan Natives.

"The task force calls on the research community to prioritize studies to develop screening tools that can better identify people without symptoms who are at risk for suicide and to create effective support and treatment programs for people with risk factors for suicide," Grossman said. "We know that many people who attempt [suicide](#) have visited a health care professional within a month before their attempt. This means that we have a real opportunity to help if we find better tools."

The draft recommendation statement is posted on the task force website and will be open for public comment until May 20.

**More information:** The U.S. Centers for Disease Control and Prevention has more about [suicide prevention](#).

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