

Early intervention service cuts suicide rate in schizophrenia

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(HealthDay)—Early intervention (EI) services seem to improve the

suicide rate for patients with first-episode schizophrenia-spectrum (FES) disorders, according to a study published online April 4 in *JAMA Psychiatry*.

Sherry Kit Wa Chan, M.R.C.Psych., from the University of Hong Kong, and colleagues examined the correlation of a two-year EI service with [suicide](#) reduction in patients with FES disorders. A total of 617 consecutive patients with FES who received the two-year EI service between July 1, 2001, and June 30, 2003, were compared with 617 patients with FES who received standard care (SC) between July 1, 1998, and June 30, 2001. The details of death were obtained for up to 12 years from presentation.

The researchers found that the [suicide rates](#) were 7.5 and 4.4 percent in the SC and EI groups, respectively. Significantly better survival was seen for [patients](#) in the EI group (propensity score-adjusted hazard ratio, 0.57), with the maximum correlation seen in the first three years. The number of [suicide attempts](#) was indicative of early suicide (one to three years). Indicators of late suicide (four to 12 years) included premorbid occupational impairment, number of relapses, and poor adherence during the initial three years.

"This study suggests that the EI service may be associated with reductions in the long-term suicide rate," the authors write. "Suicide at different stages of schizophrenia was associated with unique risk factors, highlighting the importance of a phase-specific service."

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