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Suicide

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Suicide is a major public health problem. It is usually viewed as a multidetermined act. Risk factors for suicide include psychiatric disorder, social factors, psychological factors, biological factors, genetic factors and physical disorder. Depressive disorder, alcohol dependence or substance use disorder and comorbidity of other mental and physical illness are commonly found in suicide victims. Serotonin function has been shown to be lower in suicide attempters. In addition, molecular genetic studies have been reported polymorphism in the tryptophan hydroxylase gene that is involved in the synthesis of serotonin. The genetic susceptibility to suicide, however, tends to affect individuals only in association with stress or psychiatric illness.

The evaluation for suicide potential involves a complete psychiatric history, examination of the mental state and inquiry about depressive symptoms, suicidal thoughts, intents, plans and attempts, coping ability and availability of social support. Risk factors are useful in assessing the short-term risk of suicide. Reason for living should be assessed because it may contribute to protective factors against suicide act. Biopsychosocial management and suicidal precaution through multidisciplinary team approach are principle, and brief crisis-oriented treatment approach is also important. For suicide prevention in major depressive disorder, great improvement in treatment and follow-up are required, particularly for male patient with depression.