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Suicidality Among Various Diagnostic Groups

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Introduction: The presence of mental illness has been found to be one of the major predictors of suicidality. Further, a lifetime history of suicide attempts increase the risk of death by suicide.

Objectives: Suicidality differs among diagnostic groups, with the strongest association being with mood disorders, but also with schizophrenia and anxiety disorders. Accordingly, we explored the differences in suicidality among various diagnostic groups.

Aims: To identify a diagnostic group with the highest risk of suicidality.

Methods: The study sample consisted of 122 patients categorized into three diagnostic groups: those with schizophrenia spectrum disorders (n=56), those with mood disorders (n=40) and those with anxiety disorders (n=26), mean age of 37.38 years. Assessment instruments included the Beck Scale for Suicide Ideation and the semistructured questionnaire for suicidal behaviour (lifetime history and method of suicide attempts).

Results: The three groups statistically differed with regard to lifetime suicide attempts ($p < 0.01$). More patients with mood (42.5%) and schizophrenia spectrum disorders (35.7%) reported lifetime suicide attempts compared to patients with anxiety disorders (0%). In all groups, self-poisoning was the most common method for suicide attempts. There was a significant difference among the diagnostic groups in the intensity of suicidal motivation ($p < 0.05$), but not in the intensity of overall suicidality ($p > 0.05$) and suicidal preparation ($p > 0.05$). Patients with mood disorders scored higher on the intensity of suicidal motivation compared to patients with schizophrenia spectrum.

Conclusion: The risk of lifetime suicide attempts was highest in patients with mood disorders, as well as intensity of suicidal motivation.