

Suicidology and suicide prevention

FC100

The effects of the last global economic crisis on the suicide rate in Europe

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Introduction Since 1897, Émile Durkheim noted that suicides occur more often during the economic changes that disrupt the social structure of society.

Objective and aims The objective of this study is to analyze the consequences of last global economic crisis on mortality by suicide in the EU countries in period 2007–2012.

Material and method We extracted data on mortality from the WHO database and unemployment trends from the EUROSTAT database. We had used this data to calculate the effect of unemployment on suicide rate, in pre-2004 and post-2004 EU countries.

Results If the number of suicides from 2007 was maintained in 2008–2012 period, EU 27 countries would have registered with 16,572 fewer suicides. The increase of suicides is based on the increasing number of suicides in men. The small increase in the suicide rate was recorded in Austria, France, Hungary and Slovenia. Luxembourg was the only country where the number of suicides was lower compared to 2007. In 2008, we can notice a slight decrease in the unemployment rate compared to 2007 and an increase in suicide by 3% in both groups of countries, followed by increasing suicide only in the post-2004 EU, where reach 10% in 2010, followed by a slight decrease in the coming years, while the unemployment rate gradually increases to 46% compared with 2007.

Conclusions In European Union countries, suicides have increased both before and during the crisis, in periods in which unemployment rose. States that joined the EU after 2004 are more vulnerable in times of crisis.

Disclosure of interest The authors have not supplied their declaration of competing interest.

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Childhood trauma in suicide attempters: Case-control study

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Introduction An expanding body of research suggests that childhood trauma and adverse experiences can lead to a variety of negative health outcomes, including substance abuse, depressive disorders, and attempted suicide among adolescents and adults. Alcoholism, depressed affect, and illicit drug use, which are strongly

associated with such experiences, appear to partially mediate this relationship as observed in population studies.

Objectives We have tested the association between early trauma and suicide attempts in a sample of suicide attempters from the Eureka International Project and a matched healthy control sample.

Methods We have studied the prevalence of childhood stressful events compared with healthy controls in a multicentre sample of 791 suicide attempters (SA) and 630 healthy controls (C), we have measured childhood parental neglect, physical abuse, sexual abuse, and emotional abuse, using the Childhood Trauma Questionnaire (CTQ). Chi² tests were performed using SPSS v15.0.

Results A significant increase in prevalence of childhood trauma was found in the suicide attempters sample for all types of trauma: childhood physical abuse: 25.3% (SA) vs. 11.1% (C) (Chi² test: 120,108 $P=0.000$); childhood sexual abuse: 18.2% (SA) vs. 2.4% (C) (Chi² test: 88,212 $P=0.000$); parental neglect 25.3% (SA) vs. 1.1% (C) (Chi² test: 164,910 $P=0.000$); childhood emotional abuse: 34.9% (SA) vs. 5.6% (C) (Chi² test: 176,546 $P=0.000$).

Suicide attempters were increasingly overrepresented compared with controls if experiencing more than 1 trauma: represented 77% of the sample who suffered 1 type of childhood trauma vs. more than 90% of the sample with 2 or more types of trauma.

Conclusions A powerful graded relationship exists between adverse childhood experiences and risk of attempted suicide.

Disclosure of interest The authors have not supplied their declaration of competing interest.

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TeleMental Health

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Profile of users of a new E-Mental Health ecological momentary assessment web-based program: MEMind

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Background e-Mental Health is an emergent area within e-Health. In the evaluation area, ecological momentary assessment (EMA) has been used to investigate separately on different psychiatric disorders while a comprehensive tool to cover the entire spectrum of mental health has not yet been developed. In this study, we aimed to present the MEMind wellness tracker and to characterize the group of patients who use it.

Methods We developed an EMA web application: MEMind, accessed through the web page <http://www.memind.net>. Since 20th May 2014 on, adult outpatients ($n=13,883$) attended in all psychiatric services within the Psychiatry Department of Fundación Jiménez Díaz in Madrid were proposed to use MEMind and then registered. Data collected from first year of implementation of the tool were transferred to an SPSS sheet and then analysed. A comparison between patients using and not using MEMind were performed.

Results MEMind users ($n=2842$) were significantly younger than MEMind non-users ($n=11,041$) (42.2 ± 13.5 vs. 48.5 ± 16.3 ; $P=0.000$) and mostly women (65% vs. 61.4%; $P=0.001$). Also, patients with neurotic disorders were the main users of MEMind (see Table 1). Furthermore, patients with thoughts about death and suicide were more likely to use MEMind (Table 2).

Conclusions Women, young people and patients with neurotic disorder were the main users of MEMind. Furthermore, people with