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Long-term Outcomes of Young People Who Attempted Suicide

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Suicide Attempt in Young People: A Signal for Long-term Health Care and Social Needs

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IMPORTANCE Suicidal behavior has increased since the onset of the global recession, a trend that may have long-term health and social implications.

OBJECTIVE To test whether suicide attempts among young people signal increased risk for later poor health and social functioning above and beyond a preexisting psychiatric disorder.

DESIGN We followed up a cohort of young people and assessed multiple aspects of their health and social functioning as they approached midlife. Outcomes among individuals who had self-reported a suicide attempt up through age 24 years (young suicide attempters) were compared with those who reported no attempt through age 24 years (nonattempters). Psychiatric history and social class were controlled for.

SETTING AND PARTICIPANTS The population-representative Dunedin Multidisciplinary Health and Development Study, which involved 1037 birth cohort members comprising 91

young suicide attempters and 946 nonattempters, 95% of whom were followed up to age 38 years.

MAIN OUTCOMES AND MEASURES Outcomes were selected to represent significant individual and societal costs: mental health, physical health, harm toward others, and need for support.

RESULTS As adults approaching midlife, young suicide attempters were significantly more likely to have persistent mental health problems (eg, depression, substance dependence, and additional suicide attempts) compared with nonattempters. They were also more likely to have physical health problems (eg, metabolic syndrome and elevated inflammation). They engaged in more violence (eg, violent crime and intimate partner abuse) and needed more social support (eg, long-term welfare receipt and unemployment). Furthermore, they reported being lonelier and less satisfied with their lives. These associations remained after adjustment for youth psychiatric diagnoses and social class.

CONCLUSIONS AND RELEVANCE Many young suicide attempters remain vulnerable to costly health and social problems into midlife. As rates of suicidal behavior rise with the continuing global recession, additional suicide prevention efforts and long-term monitoring and after-care services are needed.

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Suicide is the most extreme event confronting mental health practitioners, with devastating and far-reaching effects for individuals and communities. Prior studies examined the contributions of personal, familial, and social factors to suicide risk,¹ but little is known about the long-term effects of suicidal behavior. In *JAMA Psychiatry*, Goldman-Mellor and colleagues² reported on the sequelae of suicide behavior by comparing long-term outcomes from young people who made a serious suicide attempt with their peers.

The study by Goldman-Mellor et al² uniquely contributes to the suicide and mental health literature because of its rich longitudinal data set. The authors examined associations between suicide attempts and mental and physical health many years after the initial suicide attempt. The study population included members of a birth cohort that comprised 91 young persons with suicide attempts through age 24 years and 946 young persons without such attempts and followed up to age 38 years. After controlling for sev-

eral important confounding psychiatric conditions, the authors found that a suicide attempt during younger ages was associated with mental and physical health problems, increased violence, and a greater need for social support over the years after the attempt.

Goldman-Mellor et al² describe possible pathways via which a suicide attempt may be associated with a dysfunctional life trajectory. These include a need for greater use of mental health care systems after the attempt, increased practice and exposure to self-harm, poor physical health and self-neglect, and elevated levels of loneliness and dissatisfaction with life. It is also possible that a suicide attempt may also indicate underlying cognitive and emotional vulnerabilities that were not assessed in this study. Suicidal behavior during the adolescent years may signal decreased ability to regulate negative emotions, deficient levels of self-control, or both. Indeed, poor affect regulation, impaired self-control, and increased impulsivity are individual difference characteristics that may be associated with a range of negative life outcomes, including suicide

attempts.^{3,4} A suicide attempt may also signal high levels of hopelessness or trait neuroticism, both of which are associated with a plethora of social and psychological difficulties.⁵ Future research should examine the contribution of these complex premorbid factors to the ways in which the lives of young suicide attempters unfolded over time.

The authors did not explore the effect of life stressors that may have occurred at the time of the initial suicide attempt. In another longitudinal cohort study conducted in New Zealand, exposure to adverse life events was associated with subsequent suicidal behaviors in young people after considering the importance of social background, family circumstances, personality factors, and psychiatric history.⁶ Adverse events may interact with these risk factors (only partially controlled for in the study by Goldman-Mellor et al²), resulting in an accumulative negative effect later in life. It would be useful to have information about these individuals' lives at the time of the suicide attempt to better understand if the life processes that motivated the attempt were also responsible for shaping the poor mental, physical, and social outcomes observed later in life.

The authors placed their findings within the context of the global recession, a provocative feature of this report. One question this raises is whether the stress of the recession may have strengthened the association between suicide attempts in youth and later morbidity. In other words, would the signal value of a youth suicide attempt have been weaker or stronger if the cohort reached adolescence during a period of economic prosperity? In addition, family social class did not meaningfully change the significant associations between a youth suicide attempt and negative outcomes, which would seem counter to the argument that

the economic crisis in New Zealand influenced these associations. Future research could examine the life trajectories of young suicide attempters in other countries to increase understanding of how the current findings generalize across different cultural and economic contexts.

The study by Goldman-Mellor et al² provides important information useful for public health prevention of suicide. Although a suicide attempt is not a modifiable risk factor per se, it may indicate the presence of other psychological risk factors that may be modifiable with appropriate intervention. These findings support the utility of timely, theoretically grounded, empirically based interventions after a youth suicide attempt, which would potentially reduce the long-term consequences of the event on the individual and on society. For example, a randomized clinical trial of adults who attempted suicide and received either cognitive therapy or usual care found that cognitive therapy was effective in preventing suicide attempts for this group during an 18-month follow-up period.⁷ Therapists targeted proximal thoughts, images, and core beliefs that were activated prior to the suicide attempt as well as hopelessness, poor problem solving, and impaired impulse control. In addition to fewer subsequent attempts, participants in the cognitive therapy condition reported decreased hopelessness and depression. It is unclear, however, whether this intervention led to improved social and physical health outcomes over time, which is a meaningful goal for future research on therapeutic interventions for suicide attempters. As the research by Goldman-Mellor et al² highlights, additional work is needed to identify factors that promote resilience in a population that appears to be at risk for adverse consequences well beyond the immediate threat posed by a suicide attempt.

ARTICLE INFORMATION

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