

1910 dead patients

Suicide within one year after contact with mental health- and substance misuse services 2008–2015 – a national registry study from Norway

English summary

Background

Patients in mental health- and substance misuse services are at higher risk of suicide and suicidal behavior than the general population. Despite this, there has been limited knowledge and no systematic collection of data on people who die in suicide during or after contact with these services in Norway. This has made it difficult to develop suicide preventive efforts in the health care system, and impossible to monitor potential effects or time trends. As part of our work to establish a national surveillance system for suicide in mental health and substance misuse services, this report presents findings from the first national registry study in Norway on suicide within one year after contact with these services.

Method

By using data from the Norwegian Cause of Death Registry, all deaths coded as suicide in the period 2008–2015 were linked to the Norwegian Patient Registry with a unique personal identification number. People of all ages who had direct contact with a specialist mental health- or substance misuse service in the year preceding death were included in the study.

Main findings

- There were 4458 deaths by suicide in Norway from 2008–2015, and 1910 (43 %) of these people had contact with a specialist mental health- or substance misuse service in the year before death.
- 1515 (79 %) had last contact with adult mental health services, 237 (12 %) with substance misuse services, 120 (6 %) with a private mental health specialist and 38 (2 %) with child- and adolescent mental health services. A considerable proportion (336, 18 %) had been in contact with more than one service last year.
- More men (1182, 62 %) than women (728, 38 %) died in suicide after contact with a specialist mental health- or substance misuse service. Nevertheless, a higher proportion of the women who died in suicide had been in contact with these services compared to men (56 % of women vs. 37 % of men).

- The lowest prevalence of contact before suicide was found among the age groups above 65 years old.
- Of the people in contact with any adult mental health service, 67 % had at least one admission to inpatient care during the last year.
- There is a clustering of suicide deaths close in time to last service contact – particularly among discharged patients and those with an ongoing outpatient treatment.
- The people who died in suicide during or after contact with an outpatient service usually had a low number of direct contacts in the year before death (median = 7). In this group, 42 % had less than five direct contacts.
- In adult mental health services, affective disorders was the most common registered diagnosis (32 %), followed by a surprisingly high proportion of unspecified disorders (24 %). The majority of persons with an affective disorder was diagnosed with depressive disorders at last contact (82 %).

Conclusion

Nearly half of the people who die in suicide in Norway have been in contact with a specialist mental health- or substance misuse service in the year prior to death. This demonstrates the need for better suicide prevention efforts aimed at patients in the specialist mental health services. Efforts aimed at the high-risk periods, such as the days after discharge, is an important priority area. More systematic data collection is however needed in order to develop suicide prevention strategies at the system level and evaluate these. In the establishment of a surveillance system for suicide among people in contact with mental health- and substance misuse services, data collected from clinicians will be used in addition to the registry data we have described in this report. This will contribute to a substantial improvement of the knowledge base in this area.

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