

Contact with in- and outpatient mental health services before suicide - a nationwide registry-based study from Norway.

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Introduction: Contact with mental health services is common prior to suicide, but the existing literature has mainly emphasized suicide in hospitalized patients, while studies on outpatients are scarce.

Aim: Study the distribution of in- and outpatient contacts, patient characteristics and time since last contact, in suicides who had received treatment in mental health services in the 12 months preceding death, by using nationwide registry data from Norway.

Methods: Data was obtained from the historical cohort of the Norwegian Surveillance System for Suicide, which consists of a registry linkage between the *Cause of Death Registry* (CDR) and *Norwegian Patient Registry* (NPR) on suicides from 2008 to 2015 who died within 12 months after contact with a specialist mental health service. For the current analyses, we extracted a sample of data on all suicides among adults in mental health services.

Results: In the study period, 1671 (37.5%) of all suicides in Norway had contact with mental health services the year preceding death. During the last 12 months, 89.8% of these patients had contact with an outpatient service and 68.2% had been admitted to a psychiatric hospital; 12.0% died as inpatients. The majority (61.5%) had their last contact with an outpatient service, and of these patients 32.6% died within the first week after a consultation. Regarding diagnoses, there was a high prevalence of unspecified mental disorders (23.4%), followed by depression (22.2%).

Conclusion: We found high levels of both outpatient contacts and psychiatric admissions, indicating a considerable overlap, even though the prevalence of outpatient contact was especially high. In addition to the well-known post-discharge clustering of suicides, we also found a clustering of suicides shortly after an outpatient consultation, which is an area requiring more attention. The proportion of patients with an unspecified mental disorder was surprisingly high, highlighting a possible area for prevention efforts.