
PHYSICAL DISORDERS AS PREDICTORS OF SUICIDE IN OLDER ADULTS

E. Stenager¹, A.E. Annette Erlangsen¹, Y.C. Yates Comwell²

¹Psychiatry, Institute of Regional Health Service, Odense, Denmark ; ²Psychiatry, University of Rochester Medical Center, Rochester, USA

Objective: The aim of the study was to examine the association between specific physical diseases and suicide in older adults as well as to assess whether depression or perceived burdensomeness might be causal mechanisms.

Method: Individual-level register data on all older adults aged 60 years and over living in Denmark during 1990-2009 (N=2,301,709) was assessed using survival analysis. Relative risks of suicide were assessed for a total of 38 physical disorders while adjusting for age, period, conjugal status, income, physical comorbidity, and psychiatric disorders among others depression. Impact was examined within short and long term after diagnose.

Results: In all, 6,012 deaths due to suicide were observed during more than 22 mill. person-years. Presence of a physical disorders resulted in a 51% and 39% higher suicide rates for older adult men and women, respectively. Men with no physical disorders had a suicide rate of 33.0 [CI-95%: 31.6-34.4] vs. 49.7 [47.3-52.1] among those with 1-3 physical disorders. For older adult women the corresponding figures were 14.1 [13.1-15.2] and 19.6 [18.5-20.6], respectively.

Significantly higher rate ratios of suicide were identified for lung cancer, intestinal cancer, chronic obstructive pulmonary disorders (COPD), liver disease, and male genital disorders when compared to persons with no diagnose. Men and women diagnosed with COPD experienced a 1.8 [CI-95%: 1.6-2.1] and 1.8 [CI-95%: 1.5-2.2] fold higher risk of suicide during first three years, respectively.

Conclusion: Elevated risks of suicide were identified in numerous physical disorders, also when adjusting for psychiatric comorbidity.