

Use of Antiepileptic or Benzodiazepine Medication and Suicidal Ideation – the Northern Finland Birth Cohort 1966

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Introduction: Antiepileptics and benzodiazepines have been associated with increased risk of suicidality. However, in previous studies the severity of depression and anxiety have not been taken into account as possible confounders.

Objectives: To find out how antiepileptics and benzodiazepines affect suicidal ideation and other symptoms in general population.

Aims: To assess the association between use of antiepileptics or benzodiazepines and suicidal ideation in relation to other symptoms of depression and anxiety. The association will be studied in different diagnostic groups in a large population-based cohort.

Methods: Information on the prescribed medications in the Northern Finland Birth Cohort 1966 was collected at the age of 31 years with a postal questionnaire (N=8,211). The presence of suicidal ideation and other symptoms of depression and anxiety was assessed via the Symptom Checklist – questionnaire. The associations between medications and suicidal ideation were studied in different diagnostic groups: epilepsy, depression, any non-organic mental disorder, and control group.

Results: There were no difference in suicidal ideation between antiepileptic users (n=54) and non-users (n=8,157) (suicidal ideation mean 1.07 vs. 1.05, p=0.63). Subjects using benzodiazepines (n=147) had more suicidal ideation than non-users (n=8,064) (1.29 vs. 1.05, p<0.001). The antiepileptic and benzodiazepine users had more other depression and anxiety symptoms. When adjusting for these symptoms, both antiepileptic and benzodiazepine users had less suicidal ideation than non-users. This was found in all diagnostic groups.

Conclusions: Either use of antiepileptics or benzodiazepines was not associated with increased suicidal ideation when symptoms of depression and anxiety were taken into account.