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EW0849

Predictors of a suicidal behavior in patients with dementia

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Introduction Cognitive disorders are associated with a wide range of psychopathological syndromes and behavioral disorders, and suicidal manifestations in dementia are understudied nowadays.

Objectives To investigate clinical-psychopathological predictors of a suicidal behavior in patients with dementia.

Methodology Forty-four patients with dementia were examined: 23 patients with suicidal manifestations and 21 patients without them (control group). Clinical and psychometrical methods were used: Mini Mental State Examination (MMSE) scale; Assessment of Suicide Risk scale; Hamilton Rating Scale for Depression (HDRS), and statistical ones.

Results It was determined that male patients with dementia had suicidal behavioral manifestations more often than female patients (69.6%; $P < 0.05$). An average age of the patients was 69.88 ± 1.85 years with no significant difference between the main and control groups.

The majority of the patients with dementia (52.3%) had suicidal manifestations. Real suicidal intentions were the most frequent (25%; $P < 0.05$); 20.5% of patients expressed passive thoughts (antivital sentences, fantasies, ideas concerning death); 2 patients (6.82%; $P < 0.05$) had suicidal attempts. Patients with suicidal tendencies in their clinical picture more often had hallucinatory syndrome (39.1%; $P < 0.05$); features of severe depression (35.04 ± 1.54 points; $P < 0.01$); a high level of suicidal risk (26.34 ± 1.68 points; $P < 0.01$); a severe cognitive deficit (MMSE score 0–10); and a significantly lower level of self-awareness of death (18.53 ± 0.72 points; $P < 0.05$) in comparison with the control group.

Conclusions A high suicide risk in dementia correlated with a level of depressive symptoms ($r = 0.6$), moderate and/or severe grades of dementia ($r = 0.45$), and a low level of self-awareness of death ($r = 0.35$).

Disclosure of interest The authors have not supplied their declaration of competing interest.

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The burden of attempted suicide: The attitude of emergency services workers

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Introduction The great global burden of suicide requires specific preventive strategies focused on emergency services (ES) workers, providing first aid after attempted suicide.



Objectives To investigate the approach of ES workers toward attempted suicides, and to assess work-related stress and team-work attitude as variables likely to influence suicide risk perception.

Methods A total of 265 ES workers (73 medical doctors, 130 nurses, 62 health and social care workers) from 3 hospitals in the area of Modena (Northern Italy) were involved. In a group setting, titles from local newspapers reporting about suicides were read, and ES workers were asked to fill in 3 psychometric scale questionnaires (SUIATT, MBI and SAQ).

Results The questionnaires returned were 88 (33%), 47% ($n = 42$) were filled by women, median age was 40 years. Doctors group had the highest response rate (60%). Burnout levels were intermediate at the Emotional Exhaustion subscale, severe at the Depersonalization subscale and mild at the Professional Efficacy subscale. Eighteen percent recorded a good team perception, 33% had a good perception of their work conditions. SUIATT subscales showed a restrictive attitude toward suicide, regardless of hospital and task.

Discussion No associations emerged among SUIATT, MBI and SAQ subscales; male sex alone correlated to the SUIATT factor “rationality/mental alteration”, suggesting more “tolerance” of suicidal behaviour.

Conclusions It is crucial to raise awareness among ES workers on this issue, since those workers considering suicide as “more acceptable” are more likely to recognise its signs.

Disclosure of interest The authors have not supplied their declaration of competing interest.

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Attempted suicide: Study of the phenomenon in a sample of patients in the province of Modena

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Introduction Attempted suicide consists in a self-damaging non-fatal behaviour, with an explicit or implicit evidence of the intent to die. It has a multifactorial aetiology: presence of psychiatric disorder, particularly major depression and other non-psychiatric components, like a series of stressful events.

Aim To describe suicidal behavior among patients who attempted suicide.

Methods Cross-sectional study. Patients admitted to three hospitals in the Province of Modena (Italy) after having attempted suicide were enrolled. Observation time: August 2015–August 2016 (13 months). Descriptive statistics made with STATA 13.0.

Results A total of 187 subjects (female 65%) were enrolled in the period of time considered. Forty-one percent were aged 45–64; 43.7% had higher education; 50.4% were unemployed; 49.6% had regular income. Common means to attempt suicide were drugs (64%), weapons (11%), precipitation (10%), other (6%), choking (4%). Recent stressful events were reported by the 83.4% of respondents, namely: family conflicts (29%), economic problems (17%), personal health problems (11%), health problems affecting a family member (5%), emotional separation (9%), job loss (7%), other (22%), alcohol abuse (27%), substance abuse (4%). The main psychiatric diagnoses were: depressive disorder (56.67%), personality disorder (20%), psychotic disorder (6.67%), bipolar disorder (5.33%), behavioural disorders (2.67%), anxiety disorders (2%), dementia (1.33%).

Conclusions Findings of the present study are consistent with available literature and could help to identify “high risk” groups to plan future targeted programmes.

Disclosure of interest The authors have not supplied their declaration of competing interest.

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