

# Suicide Prevention

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## **COVID-19**

[Suicide risk and prevention during the COVID-19 pandemic](#) Suicide is likely to become a more pressing concern as the pandemic spreads and has longer-term effects on the general population, the economy, and vulnerable groups. The response must capitalise on, but extend beyond, general mental health policies and practices.

[Treating Suicidal Patients During COVID-19: Best Practices and Telehealth](#) A webinar on treating patients at risk for suicide during COVID-19 is now archived online. Presenters discuss best practices in suicide care that can be delivered easily and effectively via telehealth: (1) safety planning, (2) treatment that directly targets thoughts of suicide, (3) and dialectical behaviour therapy-based self-help skills and resources. The webinar archive includes PowerPoint slides and supplemental resources.

[COVID trauma response: pandemics require trauma-informed mental health support](#) Review of the new trauma-informed guidance for healthcare workers, developed by the COVID Trauma Response Working Group from UCL and the Camden and Islington NHS Trust. The guidance aims to provide a coordinated, trauma-informed and evidence-based psychological response to the COVID outbreak.

## **Studies**

[Substance use disorders and risk of suicide in a general US population: a case control study](#) Substance use disorders are associated with significant risk of suicide mortality, especially for women, even after controlling for other important risk factors. Experiencing multiple substance use disorders is particularly risky. These findings suggest increased suicide risk screening and prevention efforts for individuals with substance use disorders are needed.

[Incidence and Lethality of Suicidal Overdoses by Drug Class](#) In this cross-sectional study of state censuses and national samples that included 421 466 medically identified suicidal drug overdoses, the risk that an overdose would be fatal was highest if an opioid or barbiturate was involved. Lethality increased with age, whereas youth overdoses often involved toxins with low lethality.

[Clinician-recalled quoted speech in electronic health records and risk of suicide attempt: a case-crossover study](#) This study successfully developed an algorithm to identify quoted speech in text fields from routine mental healthcare records. Contrary to the hypothesis, no association between this exposure and proximity to a suicide attempt was found; however, further evaluation is warranted on the way in which clinician-perceived risk might be feasibly characterised from clinical text.