

Only about half of suicidal patients asked if they have access to firearms

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Credit: George Hodan/Public Domain

Despite national guidelines urging emergency department doctors to ask suicidal patients if they have access to firearms or other lethal implements, only about half actually do, according to a new study from researchers at the University of Colorado Anschutz Medical Campus.

The researchers interviewed 1,358 patients from eight emergency



departments (EDs) in seven states who had either attempted <u>suicide</u> or were thinking about it.

"We asked the patients about their access to firearms and then reviewed their charts," said the study's lead author Emmy Betz, MD, MPH, from the University of Colorado School of Medicine. "We found in about 50 percent of cases there is no documentation by the doctor that anyone asked the patients about firearms access. That means there is a large group of patients we are missing a chance to intervene for."

Some 25 percent of potentially suicidal patients who said they had guns at home kept at least one of them loaded and unlocked. Half of them had easy access to guns which put them at risk for future suicides.

According to the study, published in the latest edition of *Depression and Anxiety*, emergency departments are a key setting for suicide prevention with 8 percent of patients admitted for either attempting suicide or having `suicidal ideation' or thoughts of ending their own lives.

"Multiple ED visits appear to be a risk factor for suicide and many suicide victims are seen in the ED shortly before death," the study said. "Based on models using national suicide statistics, ED-based interventions might help decrease suicide deaths by 20 percent annually."

Still, previous studies suggest that ED doctors are skeptical about the effectiveness of such intervention and do not ask or counsel patients about their access to lethal means of ending their lives once they leave the hospital.

This study seems to confirm that.

"This rate of assessment falls short of national guidelines recommending



that all suicidal patients receive counseling about reducing access to firearms and other lethal means," Betz said. "Lethal means assessment is important for both overall risk assessment and for safety planning for patients being discharged."

While it is difficult to control access to sharp objects, supplies for hanging and medication given their widespread availability, patients with easy access to guns are at an especially high risk.

Those who commit suicide often do so minutes after making the decision. And approximately 90 percent of firearm suicides are fatal compared to 2 percent of medication overdoses.

Betz said doctors could make a plan with the families of these patients. They could ask them to lock up firearms or remove them from the house for a period of time.

Some doctors are reluctant to ask <u>patients</u> about this because they don't know if they should and if they do, what to do with the information.

"It is legal and appropriate to ask about this when it is relevant as it is in the case of suicide attempts or <u>suicidal ideation</u>," Betz said. "Do it in a respectful, non-judgmental way and it will usually be well-received. Still, there isn't a lot of training on this. As a result, we are missing the chance to save a lot of lives."

Provided by CU Anschutz Medical Campus

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