

Among all cancers, lung cancer appears to put patients at greatest suicide risk

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Lung cancer may pose greatest suicide risk. Credit: ATS

A lung cancer diagnosis appears to put patients at the greatest risk of suicide when compared to the most common types of non-skin cancers, according to new research presented at the ATS 2017 International Conference.

Researchers analyzed 3,640,229 patients in the Surveillance, Epidemiology, and End Results (SEER) database and looked at [suicide](#) deaths for all cancers and for lung, prostate, breast and [colorectal cancers](#) individually. Over a 40 year period, [cancer](#) diagnoses were associated with 6,661 suicides.

The study found that, compared to the general population, the suicide rate in patients with:

- any kind of cancer was 60 percent higher,
- [lung cancer](#) was 420 percent higher,
- colorectal cancer was 40 percent higher,
- breast cancer was 20 percent higher, and
- prostate cancer was 20 percent higher.

"We wanted to see what the impact of one of life's most stressful events is on patients," said Mohamed Rahouma, MD, a post-doctoral cardiothoracic research fellow at Weill Cornell Medical College/New York Presbyterian Hospital. "I think it's fair to say that most clinicians don't think about suicide risk in cancer patients. This study, I hope, will change that by making us more aware of those at greatest risk of suicide so that this catastrophe in the care of our patients doesn't happen."

Among [lung cancer patients](#), Asians have a more than 13-fold and men a

nearly 9-fold increase in suicides. Other factors that increased [suicide risk](#) were being older, being widowed, refusing surgical treatment and having a difficult-to-treat (metastatic) type of lung cancer.

The authors noted that over the 40-year study period, suicide rates decreased, most notably for lung cancer when compared to the other three most common cancers.

"While cancer diagnosis counselling is an established practice, especially if a patient seems depressed, referral for ongoing psychological support and counseling typically does not happen," Dr. Rahouma said. "This represents a lost opportunity to help patients with a devastating diagnosis."

Provided by American Thoracic Society

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