

Brief safety plan intervention in ER can cut suicidal behavior

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(HealthDay)—Use of the Safety Planning Intervention (SPI) plus follow-

up phone calls for suicidal patients presenting in the emergency department cuts suicidal behavior and increases the likelihood of outpatient mental health treatment over the next six months, according to a study published online July 11 in *JAMA Psychiatry*.

Barbara Stanley, Ph.D., from Columbia University in New York City, and colleagues assessed whether the SPI administered in nine Veterans Affairs emergency departments with telephone follow-up contact for suicidal [patients](#) was associated with reduced suicidal behavior and improved outpatient treatment engagement in the high-risk, six-month period following discharge.

The researchers found that the 1,186 patients in the SPI+ group were less likely to engage in [suicidal behavior](#) during the six-month follow-up period (3.03 percent) versus the 454 patients receiving usual care (5.29 percent). Suicidal behaviors were cut nearly in half with SPI+ (odds ratio, 0.56; $P = 0.03$). Additionally, patients receiving the SPI+ had more than double the odds of attending at least one outpatient mental health visit (odds ratio, 2.06; P

"The Safety Planning Intervention with structured follow-up telephone contact may be an effective brief suicide prevention [intervention](#) that can be implemented in [emergency](#) departments," the authors write.

More information: [Abstract/Full Text](#)

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