

Social support key to remission from suicidal thoughts for disabling chronic pain sufferers

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There has been little research on factors associated with resilience and recovery among those in chronic and disabling pain who have had suicidal thoughts. A new nationally representative study from the University of Toronto found that almost two-thirds of formerly suicidal Canadians (63%) with chronic pain were free from suicidal thoughts in



the past year.

"Social support played a key role in remission; the biggest factor in recovery from suicidal thoughts was having a confidant, defined as having at least one close relationship that provide the person in chronic pain a sense of emotional security and well-being. Even when a wide range of other characteristics such as age, gender and mental health history were taken into account, those with a confidant had 87% higher odds of being in remission from suicidal thoughts compared to those with no close relationships" reported lead author Esme Fuller-Thomson, Sandra Rotman Endowed Chair at University of Toronto's Factor-Inwentash Faculty of Social Work and Director of the Institute for Life Course & Aging.

"Clearly we need targeted efforts to decrease social isolation and loneliness among those experiencing chronic pain. These participants reported that pain prevented some or most of their activities, so they were particularly vulnerable to social isolation. More awareness by the general public that mobility limitations associated with chronic pain can make it difficult for individuals to socialize outside the household, could encourage friends and family to visit and phone more and thereby decrease loneliness" stated Fuller-Thomson.

"In our study, individuals living in poverty and those struggling to meet basic living expenses, were more likely to still have suicidal thoughts. Living in poverty may also limit access to needed resources to alleviate pain symptoms, and increase hopelessness that symptoms could improve, thereby presenting poverty as a barrier to suicide remission. This study was conducted in Canada where free and universal health care is available, and thus health care costs should not have been burdensome. Thus, we hypothesize that the negative association between poverty and remission from suicidal thoughts might be even stronger in countries without universal health care, such as the USA" reported co-author



Lyndsey D Kotchapaw, a recent graduate of the MSW program at the University of Toronto.

"This study's findings that individuals with chronic pain with a history of depression and <u>anxiety disorders</u> were less likely to remit from suicidal ideation, is consistent with literature on mood disorders and suicidality in the general population. Previous research indicates that individuals with chronic pain take longer to recover from depression compared to those without chronic pain. A barrier to suicide remission may be difficulties in problem solving, which is a common symptom of affective disorders" noted Kotchapaw.

Respondents in chronic pain who were in <u>remission</u> from suicidal thoughts were also significantly more likely to be older, women, white, better educated, and more likely to use spirituality to cope with daily difficulties.

The study, published online this month in the *Journal of Pain*, was based on a nationally representative sample of 635 Canadians who reported that they had ever "seriously thought about committing suicide or taking (their) own life" who also reported that they currently had chronic pain which prevented some or most of their activities. Data were drawn from the 2012 Canadian Community Health Survey-Mental Health.

"With close to two-thirds of formerly suicidal Canadians in chronic pain free of any <u>suicidal thoughts</u>, these findings provide a hopeful message of resilience and recovery in the context of disabling pain and help to improve targeted outreach to those most at risk for unremitting suicidality" stated Fuller-Thomson.

More information: Fuller-Thomson, E & Kotchapaw, LD. Remission from suicidal ideation among those in chronic pain: What factors are associated with resilience? *Journal of Pain*, 2019.



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