

Tackling suicide risk in people with mental disorders

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Clinical researchers from Oxford University's Department of Psychiatry and Oxford Health NHS Foundation Trust, together with colleagues from elsewhere, have developed guidance to help clinicians identify and



treat patients at risk of suicide.

The alternative approach to clinical practice, published in *The Lancet Psychiatry*, was developed by health practitioners and suicide prevention experts, together with a service user.

The new guidance is intended to reduce risk through a person-centered strategy in which assessment is regarded as a therapeutic process aimed at identifying interventions to enhance well-being, together with an individualized safety plan developed collaboratively with the patient.

Professor Keith Hawton CBE, Professor of Psychiatry and Director of the Centre for Suicide Research at Oxford University, and a lead author on the article, said, "A substantial proportion of individuals who die by suicide each year have been suffering from mental illness. Therefore prevention of suicide is one key task of mental health practitioners, but traditionally this has been dominated by attempts to predict suicide risk. Our approach, which is more focused on a therapeutic approach to addressing risk, should greatly improve patient care, with likely benefits for suicide prevention."

Karen Lascelles, Nurse Consultant at Oxford Health NHS Foundation Trust, and joint lead author of the article, said, "This therapeutic and collaborative approach to patient safety can help clinicians, patients and patients' families gain a better understanding of when and why a patient might become vulnerable, and what the patient and those involved in their care can do to help keep them safe. It should be taught to clinicians during their training and in practice, and supported by organizations and regulators."

Steve Gilbert, OBE, another author of the article, said, "As a suicide attempt survivor of multiple episodes, I know all too well the heartbreaking agony of being told you are at 'low risk of suicide' based



on the risk prediction methodology. The importance of a clinician meeting me where I am, acknowledging my situation, and working with me to understand the ways in which we can collectively keep me safe cannot be underestimated. I believe that a therapeutic and empathetic assessment can be the starting point for a life-saving relationship."

The authors highlight the fact that extensive evidence from several countries shows that prediction of risk largely doesn't work. They also point out that preoccupation with risk prediction may undermine efforts to help patients with their problems, which has been highlighted by both family members and patients themselves.

More information: Assessment of suicide risk in mental health practice: Shifting from prediction to therapeutic assessment, formulation and risk management, *The Lancet Psychiatry* (2022).

Provided by University of Oxford

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