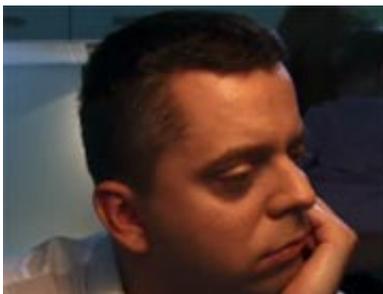


# Pain conditions linked to increased risk of suicide

May 27 2013

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Certain non-cancer pain conditions, including back pain, migraine, and psychogenic pain, are associated with increased risk of suicide in patients using Veterans Health Administration services, according to research published online May 22 in *JAMA Psychiatry*.

(HealthDay)—Certain non-cancer pain conditions, including back pain, migraine, and psychogenic pain, are associated with increased risk of suicide in patients using Veterans Health Administration (VHA) services, according to research published online May 22 in *JAMA Psychiatry*.

Mark A. Ilgen, Ph.D., of the Veterans Affairs Serious Mental Illness Treatment Resource and Evaluation Center in Ann Arbor, Mich., and colleagues performed a retrospective analysis of data from the National Death Index and treatment records from the Department of Veterans Affairs Healthcare System to evaluate associations between clinical

diagnoses of certain non-cancer [pain](#) conditions and suicide. The study population included all individuals receiving VHA services during the 2005 fiscal year who remained alive at the beginning of the 2006 fiscal year (4,863,086 participants). The pain conditions that were examined were arthritis, back pain, neuropathic pain, headache or tension headache, migraine headache, fibromyalgia, and psychogenic pain. The observation period for suicide death was fiscal years 2006 to 2008.

The researchers found elevated suicide risks for each pain-related condition, except arthritis and neuropathy, after adjusting for age, sex, and score on the Charlson Comorbidity Index. After additional adjustment for concomitant [psychiatric conditions](#), psychogenic pain (hazard ratio [HR], 1.58), migraine (HR, 1.34), and back pain (HR, 1.13) continued to be associated with increased risk for [suicide](#).

"There is a need for increased awareness of [suicide risk](#) in individuals with certain non-cancer pain diagnoses, in particular back pain, migraine, and psychogenic pain," Ilgen and colleagues conclude.

**More information:** [Abstract](#)

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