Exploring Suicide and Mental Health using the Maryland Violent Death Reporting System

Adebola Akinyemi, MPH
Jennifer Stanley, MPH
Rachel Turner, MA

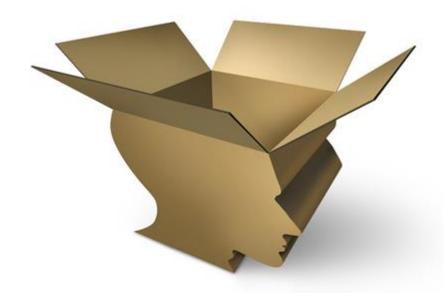
Maryland's 28th Annual Suicide Prevention Conference October 5th, 2016

Center for Injury Epidemiology Prevention and Health Promotion Administration



Objectives

- ✓ Understand the application of the Maryland Violent Death Reporting System (MVDRS)
- ✓ Increase awareness of the role of mental health in suicides
- √ Utilize insight into risk factors to enhance prevention programs



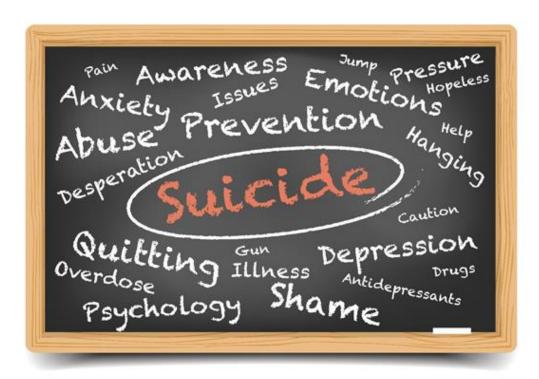
What is MVDRS?

- CDC-funded program that collects information on the violent deaths of Maryland resident deaths, excludes out-of-state resident deaths—nationally known as the National Violent Death Reporting System.
- Collects and links data from death certificates, medical examiner reports (including toxicology), and police reports.
- A resource for greater scientific understanding of violent death to encourage the development of effective violent death prevention strategies in Maryland.

Literature Review

- 90% of persons who die of suicide are suffering from a mental disorder at the time of death (Phillips, 2010).
- Risk of suicide in severe mental illness rose sharply after age 50.
 Individuals treated for depression had the highest suicide risk. (Osbourne et. al, 2008).
- Marital and interpersonal relationship disruption, occupational and financial stressors, recent heavy substance use and intoxication as well as a history of previous suicide attempts and sexual abuse combine in an additive fashion with personality traits and mental illnesses to intensify risk for suicidal behavior in addiction patients (Yuodelis-Flores,& Ries, 2015).

An Overview of Suicide in Maryland (MVDRS 2009-2013)



<u>Suicide</u> - death resulting from the intentional use of force against oneself.

Characteristics of Suicide Victims 2009-2013 (n=2,630)

Total Number of Suicides: n=2,630

Overall Suicide Rate: 10.3 per 100,000 residents

Most victims were male (80.1%)

Rate for Males: 17.2 per 100,000 residents

- Rate for Females: 4.0 per 100,000 residents

Veterans and current members of the Armed Forces comprised 18.6% of

deaths

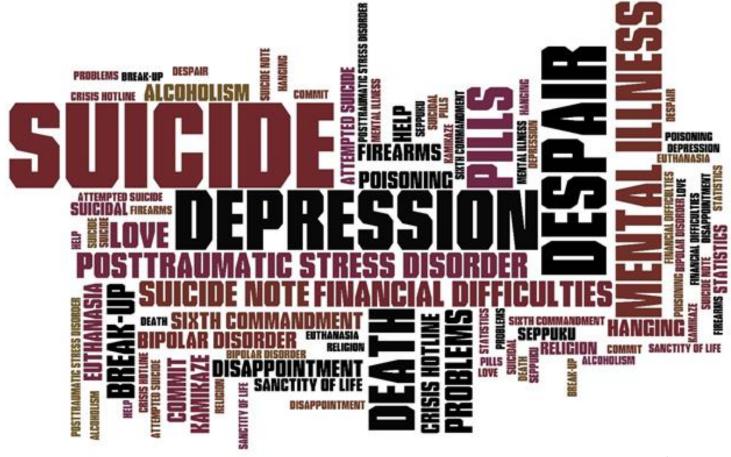


Characteristics of Suicide Victims 2009-2013 (n=2,630)

- The highest suicide rates by age group were found in the 45-64 and over
 65 age groups
 - Rate for ages 45-64 years: 13.3 per 100,000 residents
 - Rate for ages 65+: 12.0 per 100,000 residents
- The top weapon of injury for all victims was a firearm (46.0%), followed by Hanging/Strangulation/Suffocation (29.4%)
 - Males: Firearms (51.6%), Hanging/Strangulation/Suffocation (29.0%)
 - Females: Hanging/Strangulation/Suffocation (31.3%), Poisoning (30.7%)



Suicide and Mental Health 2012-2013



<u>Current diagnosed mental health problem</u> – those disorders/syndromes listed in the DSM-5 with the exception of substance dependence



Suicide Victims with a Mental Health Problem Demographic Characteristics, Maryland, 2012-2013 (n=1,098)

Demographic Characteristic	Victim has a Current Mental Health Problem	Total
Victims w/ Known Circumstances	432 (42.7)	1012 (100)
Sex Male Female	297 (37.6) 135 (60.8)	790 (100) 222 (100)
Race/Ethnicity Non-Hispanic White Non-Hispanic Black Hispanic Non-Hispanic Asian	312 (44.4) 47 (34.8) 13 (50.0) 11 (45.8)	703 (100) 135 (100) 26 (100) 24 (100)



Suicide Victims with a Mental Health Problem by Demographic Characteristics, Maryland, 2012-2013 (n=1,098), cont.

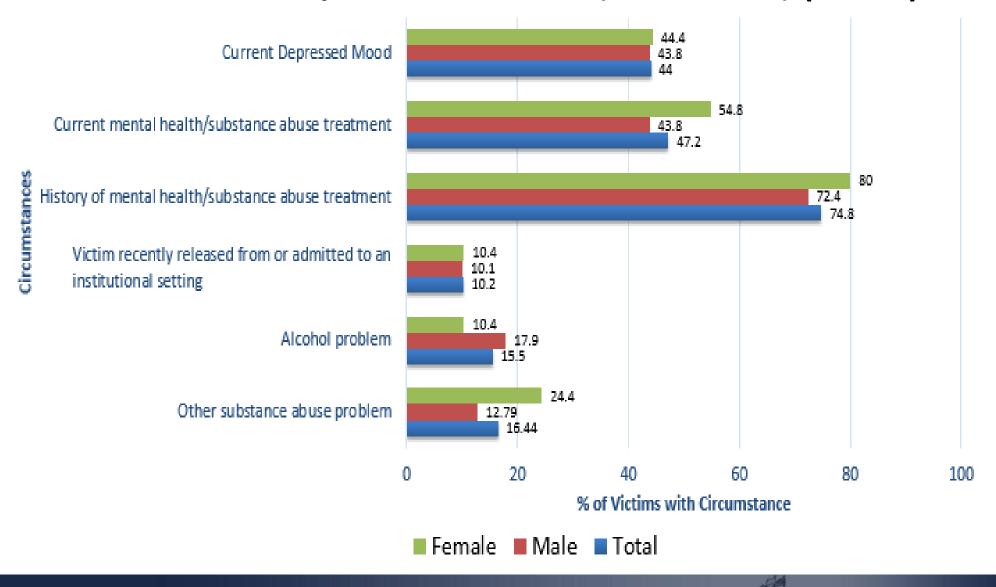
Demographic Characteristic	Victim has a Current Mental Health Problem	Total
Known Circumstances	432 (42.7)	1012 (100)
Age (years)		
10-24	57 (43.5)	131 (100)
25-34	73 (48.7)	150 (100)
35-44	57 (40.1)	142 (100)
45-64	185 (43.5)	425 (100)
65+	60 (36.6)	164 (100)
Veteran/Military		
Yes	73 (38.2)	191 (100)
No	351 (43.8)	802 (100)



Characteristics of Suicide Victims with a Mental Health Problem in Maryland, 2012-2013 (n=432)

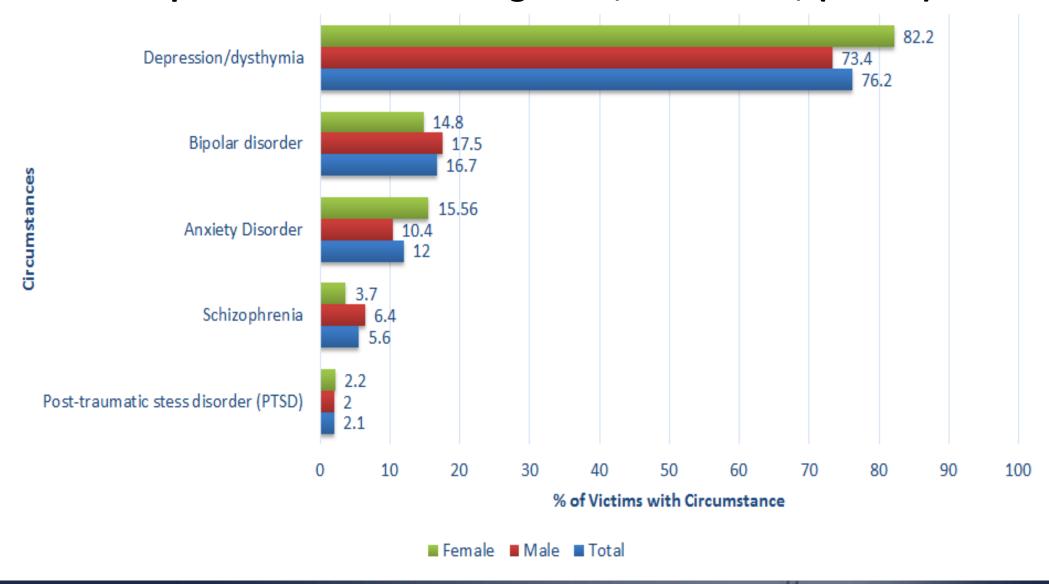
Characteristic	
Known Circumstances	1,012 (92.2%) victims
Current Mental Health Problem	432 (42.7%) victims
Sex	68.8% Male, 31.3% Female
Race/Ethnicity	72.2% Non-Hispanic White 10.9% Non-Hispanic Black 3.0% Hispanic
Age (years)	16.90% - 25-34 42.8% - 45-64
Veteran/Military	16.9.% Yes

Mental Health/Substance Abuse, 2012-2013, (n=432)



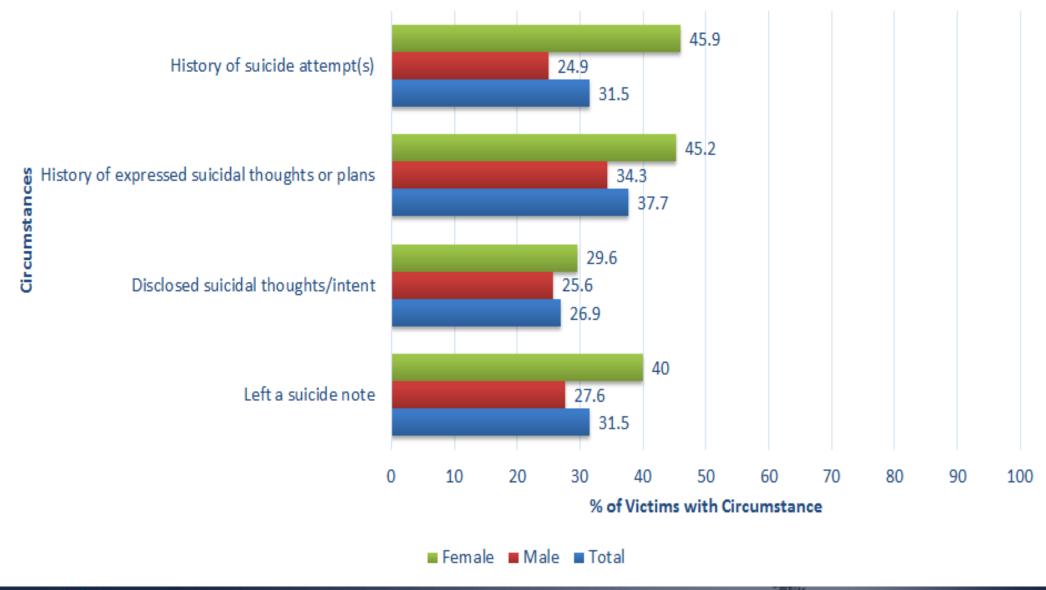


Top 5 Mental Health Diagnoses, 2012-2013, (n=432)



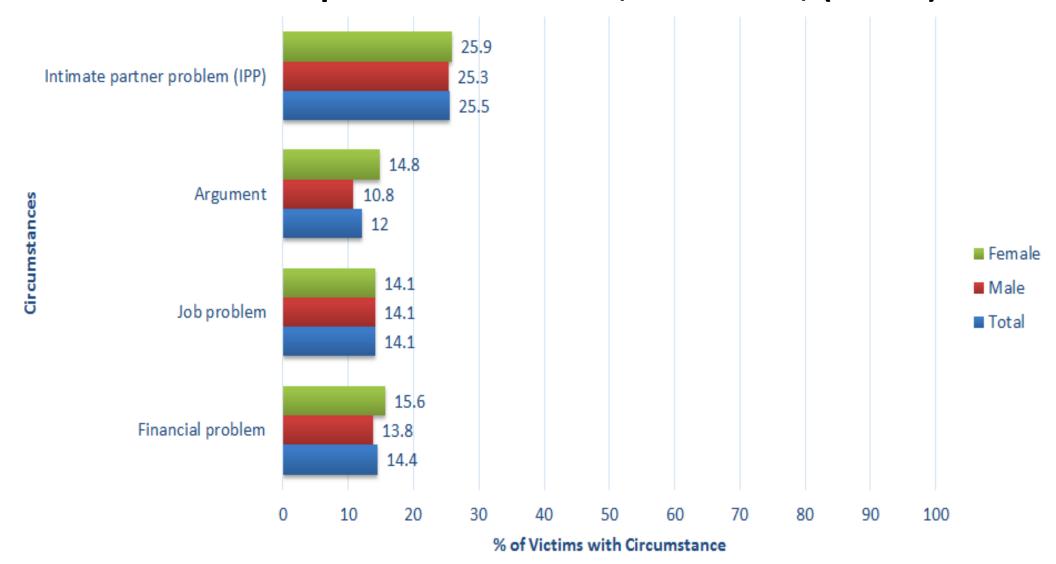


Suicide Markers, 2012-2013, (n=432)





Relationship and Life Stressors, 2012-2013, (n=432)





Toxicology Results, Suicide Victims with a Mental Health Problem, Maryland, 2012-2013 (n=432)

Substance Tested Positive	Total	Male	Females
	n(%)	n(%)	n(%)
Blood Alcohol Concentration* (BAC)	114 (28.1)	80 (29.2)	34 (25.8)
BAC < 0.08 g/dl	36 (31.6)	24 (30.0)	12 (35.3)
BAC ≥0.08 g/dl [†]	73 (64.0)	52 (65.0)	21 (61.8)
Amphetamines [‡]	9 (2.2)	7 (2.6)	§
Antidepressants [‡]	139 (34.5)	73 (26.9)	66 (50.0)
Cocaine [‡]	8 (2.0)	8 (3.0)	§
Opiates [‡]	57 (14.1)	25 (9.2)	32 (24.2)

^{*}Percentage of victims tested: Total - 94.0%, Male - 92.3%, Female - 97.8%

[§]Counts not reported for deaths<6



[†]BAC≥ 0.08 g/dL used as the standard for intoxication

[‡]Percentage of victims tested: Total - 93.3%, Male - 91.3%, Female - 97.8%

Narrative Examples

Gunshot to Head

- 41 year old white female
- Hypertension, cancerous brain tumor, recent deafness
- Depressed due to health issues
- Previous suicide attempts
- Emergency petitions
- Put scissors/knife to throat
- Appeared drunk/drugged
- Intimate partner problems

Hanging

- 10 year old black male
- Fair student
- Previous suicide attempt
- ADHD: Adderall to Ritalin
- Depression Rx: Methylphenidate
- Visits therapist weekly
- Lives with aunt, father incarcerated
- Mother deceased, wants to be with deceased mother

Discussion

- •What were the precipitating circumstances, relationship and life stressors, and suicide markers in each victim's narrative?
- What components of a suicide prevention or mental health program could specifically target the issues each victim faced?
- What did you find most interesting about the presentation, and how could you use what you learned to help others?



Data Requests?

Maryland Violent Death Reporting System
Department of Health and Mental Hygiene
201 W. Preston Street, 4th Floor Baltimore, MD 21201
(410) 767-6807 – phone
dhmh.envhealth@maryland.gov



Acknowledgements

Clifford S. Mitchell, Director, Environmental Health Bureau Subha Chandar, Deputy Director, Environmental Health Bureau

References

- Centers for Disease Control and Prevention. National Violent Death Reporting System (NVDRS) Coding Manual Revised [Online] 2015 National Center for Injury Prevention and Control, Centers for Disease Control and Prevention (producer).
- Osborn, D., Levy, G., Nazareth, I., & King, M. (2008). Suicide and severe mental illnesses. Cohort study within the UK general practice research database. Schizophrenia Research, 99(1-3), 134-138.
- Phillips, M. R. (2010). Rethinking the role of mental illness in suicide. The American Journal Of Psychiatry, 167(7), 731-733.
- Yuodelis-Flores, C., & Ries, R. K. (2015). Addiction and suicide: A review, 24(2), 98-104. The American Journal On Addictions.

