

the former indicating greater seriousness of intention. Has consideration been given to precautions to avoid discovery after attempting suicide? If so, the risk should be considered to be serious. What method of suicide has been considered? What is the individual's perception of this method? If an individual believes that their chosen method is more likely to succeed, the risk is higher. Also, if plans include using violent methods like jumping, drowning or hanging, the risk is considered to be more serious. Has the individual made provision for events after death? If the individual has plans for funeral arrangements, to deal with financial affairs or to write a suicide note, the risk is higher.

● Mental illness

All mental illnesses, including dementia, are reported to increase the risk of suicide in the elderly. Up to 90 per cent of elderly suicide victims have depressive ill-

ness, treatment non-compliance and social withdrawal. In the presence of suicidal ideation, it would be very easy for a patient with heart failure to stop taking diuretics or a patient with diabetes to stop taking insulin.

Management

● General

Careful history, mental state examination, physical examination and an additional 'third party' history from an informant (such as a relative) is important to identify the severity of the risk, any mental or physical illness, other correlates of suicide, poor compliance with treatment, and available social supports. An effort must be made to enquire about hoarding of medication for overdose; where possible, this should be observed first hand on a home visit.

In an individual patient, absence of factors that usually predict greater risk of suicide does not necessarily mean that the risk is lower in that patient. Most stud-

Table 1: Assessing suicidal ideation

Individuals replying positively to the following are at high risk of suicide:

- Is the individual planning to kill him/herself?
- Has suicide been considered for some time?
- Is the individual planning precautions to avoid discovery?
- Is the method of suicide likely to succeed?
- Is a violent method likely to be used?
- Has the individual planned for events after death (eg funeral arrangements, financial affairs)?

Note that in individual patients, the presence of risk factors for suicide confirms the seriousness of the risk, but their absence does not exclude the risk

ness^{13,4}. In addition to its misuse, alcohol is used in combination with the actual method of suicide in 30 per cent of victims, perhaps for 'Dutch courage'^{13,4}. Presence of suicidal ideation in the context of any mental illness should therefore be considered very seriously in the elderly.

● Demographic and other correlates

Risk factors associated with completed suicides in the elderly include male, not being married (single, widowed, divorced or separated), social isolation, recent bereavement, financial difficulties, physical illness and chronic pain¹.

● Other factors

A careful enquiry should be conducted to examine evidence of refusal to eat, poor compliance with medica-

Table 2: When to refer older patients with suicidal ideation

Older patients should be referred to psychogeriatric services if there are concerns that:

- Mental illness may be present
- The risk of suicide may be serious
- The risk of suicide is known to be serious
- The patient may not be able to manage at home
- The patient may not comply with treatment

ties demonstrate increased risk factors in suicide as a group effect. Thus, their presence in individual patients confirms the seriousness of the risk but their absence does not exclude the risk.

● Treatment

The usual principles of psychological, physical and social treatment apply in the treatment of those with suicidal ideation. Mental illness should be identified and rigorously treated. Depression is the most common diagnosis and should be treated optimally with antidepressants. Traditional concern over risk of overdose with prescribed tricyclic antidepressants is no longer applicable given the availability of newer antidepressants, such as the selective serotonin reuptake inhibitors, which are comparatively safe in overdose.