

More mental health visits tied to lower rates of youth suicide

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highest suicide risk. Having more mental health visits within the 30 days before the index date was associated with decreased odds of suicide (OR, 0.78).

"Our findings suggest that youths with <u>psychiatric</u> <u>disorders</u>, particularly mood disorders, schizophrenia, and substance use should be routinely assessed for suicide risk and receive highintensity, evidence-based treatments for suicidality, such as <u>cognitive behavioral therapy</u>," Fontanella said in a statement.

More information: <u>Abstract/Full Text</u> (subscription or payment may be required)

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The odds of suicide decrease among youths who have more mental health visits, according to a study recently published in *JAMA Pediatrics*.

Cynthia A. Fontanella, Ph.D., from The Ohio State University in Columbus, and colleagues compared the clinical profiles and patterns of use of health and mental health care services among 910 Medicaid-enrolled children and adolescents who died by suicide and 6,346 individuals in a living control group matched by sex, race, ethnicity, Medicaid eligibility category, state, and age.

The researchers found that 41.3 percent of suicide decedents had a mental health diagnosis in the six months before death versus 17.5 percent of controls. Compared with controls, a greater proportion of suicide decedents used services in the six months before the index date (57.8 versus 75.5 percent; odds ratio [OR], 2.39). Youths with epilepsy (OR, 4.89), depression (OR, 3.19), schizophrenia (OR, 3.18), <u>substance use disorder</u> (OR, 2.65), and <u>bipolar disorder</u> (OR, 2.09) had the



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