

Potential Paths to Suicidal Ideation & Suicide Attempts among High-Risk Women

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Background

Women experience a greater rate of suicidal ideation (SI) than men and are 3 times more likely to attempt suicide. Although men overall are more likely to complete suicide, women who have a diagnosis of Major Depressive Disorder are twice as likely as men to complete. According to the CDC, the age-adjusted suicide rate among women has increased by 55% compared to a 28% increase in men over the last 20 years. Despite this increased risk, little is known about factors that may contribute to SI or suicide attempts (SA) among women. Our aims were to: 1) determine potential predictors of risk for SI and SA among women, and 2) identify mood-related symptoms that may differentiate women who attempt suicide from those who report never attempting suicide.

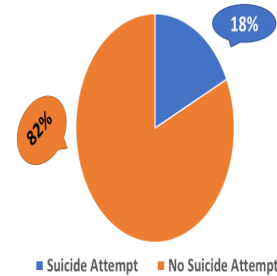
Methods

Data for this study stem from research conducted by the Women & Mood Disorders Task Group of the NNDC. We acquired information from approximately 6000 women at elevated risk for depression at 17 sites affiliated with the NNDC. 3372 responded to questions about suicide. Other data included sociodemographic and reproductive status, behavioral and mental health history, and exposure to stress & adversity. Women also completed the PHQ-9 and GAD-7 to assess symptoms. We used structural equation modeling and logistic regression to examine the aims.

Participants

- Average age: 43 (18 – 90)
- Average PHQ-9 score indicates mild depression for the sample (5.39)
 - 8.3% were severely depressed
 - 16.5% reported suicidal ideation
- 6% Hispanic/Latina; 6% African American; 4% Asian American; 84% European American
- 39% - Income <\$50,000
- 27% - No college degree

Women Reporting Suicide Attempts



Symptoms Associated with Increased Odds of Suicide Attempt

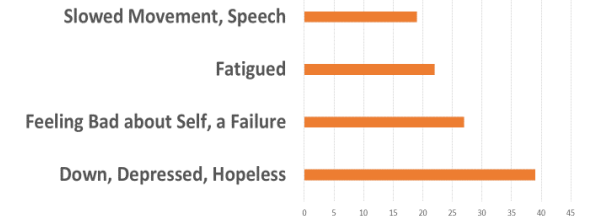
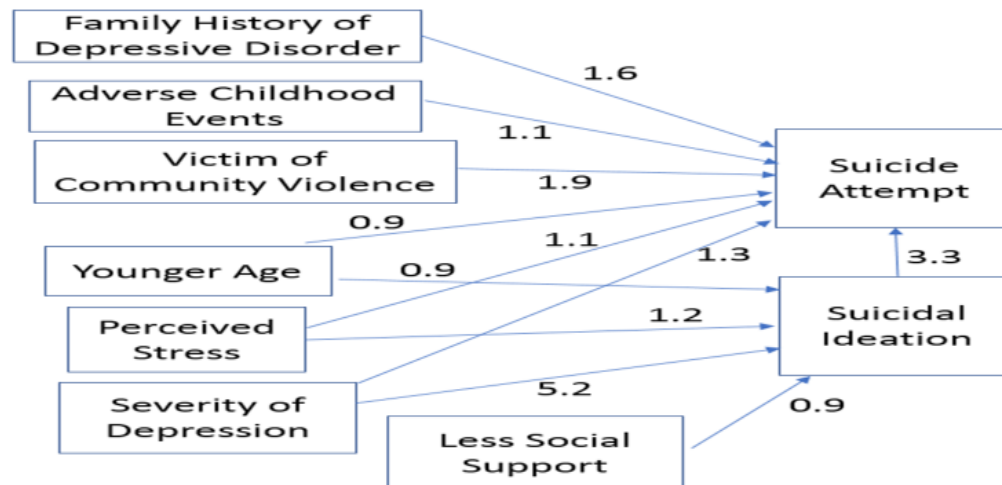


Figure 1. Path Model for Women's Suicide Risk



Conclusions

Results suggest that frequency of suicidal thoughts plays a key role in predicting vulnerability to suicide attempts (SA), reinforcing the importance of assessing suicidal ideation (SI) in the clinical setting. Severity of depression (especially symptoms of hopelessness and personal inadequacy) increases the odds of both SA and SI. The strong predictive role of familial depression in suicide attempts, combined with stressful/traumatic life experiences, supports previous stress-diathesis models of suicide behavior. Studies are needed to identify unique biological and psychological mechanisms that may mediate these effects for women. The salience of childhood abuse and domestic/community violence to suicide risk for women reinforces previous findings of our group and others that these adversities differentiate suicide risk for women versus men. Our results also indicate that different factors influence SI and SA. Research is essential to understand varied paths that may lead to suicidal behavior among women, some of which may not relate to the frequency or intensity of their suicidal thoughts.