



PROFILE OF PATIENTS ADMITTED IN A TERTIARY GOVERNMENT HOSPITAL FROM JANUARY 2021 TO DECEMBER 2021 FOR A SUICIDE ATTEMPT

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Abstract: This study employed the descriptive retrospective cross-sectional design. Chart review was done on all patients referred to the Department of Psychiatry for an attempted suicide. A master data sheet contained the following patient's data: sex, age, marital status, area of residence, employment status, educational attainment, prior contact with mental health services, previous psychiatric condition, and their corresponding psychiatric and non-psychiatric conditions. A total of 40 patient charts were examined for this study. Seventy percent of the patients were male, 40% belonged to the 19 to 30-year-old age group, and 62.5% were single, separated, or widowed. The highest number of suicide attempters came from Cebu City (27.5%) and were unemployed (67.5%), while 29.0% only reached an elementary level education. The majority of the patients (77.5%) did not have prior contact with mental health services and were not known to have a previous psychiatric condition. In this study population, the most frequent diagnosis, seen in 75%, was collectively reported as depressive disorders. The prominent socio-demographic profile for this study population were males, within the 19- to 30-year-old age group, single, separated or widowed, living in an urban area, with no employment, and some elementary education. Most of them did not have prior contact with mental health services nor were given a previous psychiatric diagnosis but were eventually noted to have a psychiatric condition after being referred to the Department of Psychiatry for a suicide attempt. This study reminds health professionals to be vigilant with patients in crisis having the risk factors identified in this study.

Keywords: In-patient records, prevalence of patients, suicide attempt, socio-demographic profile

I. INTRODUCTION

In the Philippines, there is a paucity of studies on suicide and a lack of cognizance of suicide as a public health dilemma. Thus, Filipinos who have suicidal ideation or with previous suicide attempts are not receiving the help they need. Dr. Brock Chisholm, the first Director-General of the World Health Organization (WHO) in 1954, famously stated that "without mental health there can be no true physical health (Kolappa et al., 2013). Many years have passed since then but we are still continually being faced with growing mental health problems, a number of them leading to attempted suicide and even to death (WHO, 2022).

Last 2014, the first WHO World Suicide Report entitled "Preventing suicide: a global imperative" was published. The report stated that around 804,000 completed suicides occurred globally in 2012 with an annual global age-standardized suicide rate of 15.0 for males and 8.0 for females. For each of these completed suicides, there are many more people who have attempted suicide. A prior suicide attempt is the single most important risk factor for suicide in the general public. The same report acknowledged that in a number of countries, data regarding suicide and suicide attempts are not available. It stressed that improved

quality and availability of data regarding this phenomenon are needed for effective suicide prevention (MSD, 2014). Globally, the availability and quality of data on suicide and suicide attempts is poor (WHO, 2022).

Seven years after the first WHO world suicide report, the WHO updated the suicide fact sheet. The report stressed that globally, there is still a deficiency on information regarding suicide and suicide attempts (WHO, 2023). In developed countries, extensive studies on suicide and factors associated with suicidal behavior have been done. This leads to better national suicide prevention strategies in these countries (CDC, 2022).

Unfortunately, in the Philippines, there is a lack of studies and data on suicide and suicidal attempts due to the stigma attached to these acts (Maramag, 2020). On top of this, there is scarcity of knowledge about suicide as a public health topic because it is considered taboo and therefore is not openly discussed in Filipino society (Yamio, 2017). This implies that many Filipinos who have suicidal ideation or had previous suicide attempts are not obtaining the help they critically need (WHO, 2022).

This study aims to determine the profile of patients with previous suicide attempts admitted to a tertiary government hospital during the period of January 2021 to December 2021. In addition, the prevalence of those who had previous contact with mental health services, as well as any prior psychiatric and non-psychiatric conditions among these patients, as diagnosed by the Psychiatry department, will also be determined.

II. METHODOLOGY

This study used a descriptive retrospective cross-sectional design and was conducted in a government-owned tertiary hospital located along B. Rodriguez Street, Barangay Sambag II, Cebu City, Cebu, having a bed capacity of 1,200. The hospital is an apex hospital which receives numerous referrals from different municipal and

provincial hospitals from all over the Visayas and some parts of Mindanao.

A transmittal letter request was sent to the Vicente Sotto Memorial Medical Center Department of Psychiatry Technical Review Committee, which granted approval for the conduct of the study. The Vicente Sotto Memorial Medical Center (VSMMC) Institutional Ethical Review Committee, under the Professional Education Training and Research Office (PETRO), approved this study for implementation. The list of patients, specifically those with a suicide attempt who were admitted during the period from January 2021 to December 2021, were obtained from Department of Psychiatry consultation-liaison logbook. This study gathered the records containing only the patients initials and admission date as identifiers, and recent admission for a suicide attempt. The socio-demographic variables retrieved included the age, sex, marital status, whether employed or not at the time of admission, educational attainment (no formal education, some elementary level education, elementary school graduate, some high school level education, high school graduate, some college level education, or college graduate), and area of residence (Cebu City, Mandaue City, Lapu-Lapu City, other Metro Cebu cities and municipalities, northern part of Cebu Province, southern part of Cebu Province, or outside Cebu province). Terms of contact (with or without prior contact with mental health services) were also recorded.

The DSM-5 diagnoses developed for successive editions, served as a reference for the pathological diagnosis of mental disorders (American Psychiatric Association, 2013). This tool is essential for trained clinicians and documentation for in-patient diagnosis. It was noted that patients who had previous contact with mental health services were given a diagnosis by the attending physician.

Once the list was completed, the clinical records were retrieved and placed in a secure area inside the Department of

Psychiatry Records Section by the researcher to preserve the confidentiality and security of the records. After data was properly collected and tallied, all documents which contained patient identifiers, were shredded and properly disposed of.

The clinical records of a total of 40 patients admitted because of a suicide

attempt were retrieved. There were, however, 18 patient charts that were damaged due to a recent typhoon where data could no longer be retrieved.

Data were then tabulated in Microsoft Excel to ensure uniformity and completeness. Frequency and proportions were used to analyze the data.

III. RESULTS AND DISCUSSION

Table 1. Socio-demographic Profile of Patients Admitted for a Suicide Attempt (N=40)

Profiles	F	%
SEX		
Male	28	70.0
Female	12	30.0
AGE		
12 to 18 years old	2	5.0
19 to 30 years old	16	40.0
31 to 40 years old	10	25.0
41 to 50 years old	6	15.0
51 to 59 years old	1	2.5
60 years old and above	5	12.5
MARITAL STATUS		
Single, separated, or widowed	25	62.5
Married, including those in common-law partnerships	15	37.5
AREA OF RESIDENCE		
Cebu City	11	27.5
Mandaue City	2	5.0
Lapu-Lapu City	6	15.0
Other Metro Cebu cities and municipalities	7	17.5
Northern part of Cebu Province	9	22.5
Southern part of Cebu Province	4	10.0
Outside of Cebu Province	1	2.5
EMPLOYMENT		
With employment at the time of admission	13	32.5
No employment at the time of admission	27	67.5
EDUCATIONAL ATTAINMENT		
No formal education	0	0
Some elementary level education	11	29.0
Elementary school graduates	1	3.0
Some high school level education	9	24.0
High school graduates	7	18.0
Some college level education	10	26.0
College graduates	0	0

Table 1 shows the socio-demographic characteristics of the patients admitted for a suicide attempt. In terms of sex, more than half (70%) were males. This result is similar to the 2019 WHO global estimate, which revealed that males, whether in the Philippines or globally, are more likely to commit suicide than females (Mental Health and Substance Use, 2021). This difference in gender frequency may be due to the variabilities in the two sexes in dealing with stress, help-seeking behavior, alcohol use, and availability of deadly methods to commit suicide (Sadock et al., 2017). A local study done by Redaniel et al. (2011) mentions that men of working age may be more disposed to committing suicide in times of financial difficulties due to increased societal demands to achieve.

Considering the age, the greatest number was found in those who were 19 to 30 years old (40%), followed by those who were 31 to 40 years old (25%), and those who were 41 to 50 years old (15%). Next were those who were 60 years old and above (12.5%), those who were 12 to 18 years old (5%), and lastly, those who were 51 to 59 years old (2.5%). This finding is consistent with the study by Cimene and Ramos (2021), which noted that most of those who committed suicide were in the prime of their life (Bachmann, 2018). A study by Galicia and Bautista (2018) on university students in the Philippines mentions that this may be due to increased academic stress and other social adversities.

A great majority of the patients were single, separated, or widowed (62.5%) in contrast to those who were married or were in common-law partnerships (37.5%). The result reflected the study findings of Bachmann (2018), which also noted higher suicide rates among the widowed or divorced. Sadock et al. (2017) specifically notes that the state of being unmarried, divorced, or widowed increases the risk of suicide. This phenomenon is also supported by Durkheim's theory of an egoistic type of suicide among people who are not well

integrated into a social group (Sadock et al., 2017).

Cebu City (27.5%) had the highest number of patients with suicide attempts and was closely followed by cities and municipalities belonging to the northern part of Cebu province (22.5%). Patients who resided in other Metro Cebu cities and municipalities comprised 17.5% of the total. Lapu-Lapu City had 15% of the patient population while those who resided in the southern part of Cebu province comprised 10% of the total. Mandaue City had 5% while samples from outside of Cebu province had the lowest number at 2.5%. These results are in contrast to the study of Sebastián et al. (2020) which reported a higher rate of suicide attempts in rural and semi-rural municipalities. Unfortunately, there is no local study on suicide which includes area of residence as a factor. Still, this finding is reflective of the egoistic type of suicide previously mentioned (Sadock et al., 2017).

Most of the patients were not employed at the time of admission (67.5%), while those who were employed at the time of admission comprised 32.5%. This result is consistent with the findings of Sadock et al. (2017) which noted that unemployment is a risk factor for a suicide attempt.

In terms of educational attainment, the total population was 38 since there were 2 patient records that did not contain data on educational attainment. The highest sample came from those with some elementary level education (29%), followed closely by those with some college level education (26%), and those with some high school level education (24%). Eighteen percent (18%) of the sample were high school graduates while only 3% were elementary school graduates. There were no college graduates or patients with no formal education in the sample. These data replicate the study by Øien-ødegaard et al. which noted low educational attainment as a risk factor for suicide (Øien-ødegaard et al., 2021).

Table 2. Prevalence of Patients with a Previous Contact of Mental health services and Psychiatric Condition (N=40)

Terms of contact	F	%
With Previous Contact	9	22.50
Without Previous Contact	31	77.50
Characteristic		
Previous Psychiatric Condition	9	22.50
With Previous Psychiatric Condition	31	77.50

Table 2 shows the prevalence of patients with previous contact with mental health services. Majority of the patient sample (77.5%) did not have previous contact with mental health services, while only 22.5% had previous contact with mental health services. This is comparable to the meta-analysis done by Walby et al. (2018), which cited a prevalence range of contact with mental health services at 18.3% to 26.1%. The above-mentioned result is unlike the study result of Kammer et al. (2020), which cites a prevalence rate of 51-79% prevalence rate of previous contact with mental health services. It is important to know, though, that the study of Kammer et al. (2020) occurred later than the study by Walby and colleagues. There may have been interventions done to increase the rate of contact with mental health services.

Correspondingly, a preponderance of suicide attempters (31, 77.5%) had no previous psychiatric condition, while only 22.5% were previously diagnosed with a psychiatric condition. These results are in contrast to the study of Sahu et al. (2021), which reported that 86.5% of their study population who attempted suicide had a history of psychiatric illness. The results of this study are quite alarming since, upon admission, it was noted that 75% of the study population had a current psychiatric diagnosis. This connotes a lack in mental health-seeking. If the patients had been seen prior and managed for their condition, then the attempted suicide may have not happened.

Table 3. Psychiatric Conditions and Non-psychiatric Conditions of Patients with previous suicide attempt

PATIENT CONDITIONS	f	%
PSYCHIATRIC CONDITIONS		
Schizophrenia	3	7.5
Schizophreniform disorder	1	2.5
Brief psychotic disorder	7	17.5
Delusional Disorder, persecutory type	1	2.5
Alcohol-induced psychotic disorder	1	2.5
Methamphetamine- induced psychotic disorder	2	5.0
Major depressive disorder	5	12.5
Major depressive disorder with psychotic features	5	12.5
Persistent Depressive Disorder with intermittent major depressive episodes, with current episode	1	2.5
Bipolar 1 Disorder, MRE: Depressed	1	2.5
Adjustment Disorder with depressed mood	1	2.5
Alcohol Intoxication	2	5.0
TOTAL	30	75
NON-PSYCHIATRIC CONDITIONS		
Parent-Child Relational Problem	2	5.0
Relationship Distress with Spouse or Intimate Partner	5	12.5
Social Exclusion or Rejection	2	5
Cannot rule in any psychopathology at the time of consult (HAMA)	1	2.5
TOTAL	10	25

The psychiatric conditions and non-psychiatric conditions of patients shown in Table 3 are based on the VSMC Psychiatry department diagnosis among patients admitted for a suicide attempt. It can be observed that 75% of patients admitted for a suicide attempt were diagnosed with a psychiatric condition upon admission, while only a minority (25%) had non-psychiatric conditions.

Table 3 enumerates the psychiatric conditions, with the greatest number being those patients diagnosed with brief psychotic disorder (17.5%). This is then followed by two conditions, namely, major depressive disorder and major depressive disorder with psychotic features, which are both at 12.5% of the sample. The diagnosis of schizophrenia (7.5%), was followed by methamphetamine-induced psychotic disorder and alcohol intoxication, both at 5%. The rest of the sample population had psychiatric conditions such as: Schizophreniform disorder; Delusional Disorder; Alcohol-induced psychotic disorder; Persistent Depressive Disorder with intermittent major depressive episodes, with current episode; Bipolar 1 Disorder, MRE: Depressed; and Adjustment Disorder with depressed mood. Each of these conditions comprised 2.5% of the sample population. Still, the psychiatric conditions associated with these suicide attempts were mostly similar to the results of previous studies. Ultimately, this study additionally illustrates that depression is still the leading cause of attempted suicides (Kammer et al., 2020). Of course, it is important to note that second to depressive disorders, psychotic disorders such as brief psychotic disorder and schizophrenia also occur in patients who attempt suicide. The finding is in agreement with Bachmann (2018) who reported that people diagnosed with a psychiatric condition have a greater risk for suicide attempts.

On the other hand, for the non-psychiatric conditions, the greatest number of patients who attempted suicide were diagnosed with Relationship Distress with

Spouse or Intimate Partner (12.5%). This is then followed by Parent-Child Relational Problem and Social Exclusion or Rejection which were both seen in 5% of the sample population. There was one patient (2.5%) wherein a psychopathology could not be ruled in at the time of consult since the patient went home against medical advice. A study by LaCroix et al. (2018) mentioned that relationship stress is associated with greater suicide risk and may contribute to suicide behavior.

IV. CONCLUSION

This research highlighted the socio-demographic profile prominent for this study population, such as male sex, belonging to the 19- to 30-year-old age group, being single, separated, or widowed, living in an urban area, having no employment, and being only an elementary school graduate. This study also stressed the fact that the majority of this sample population did not have prior contact with mental health services and did not have a previous psychiatric diagnosis but were eventually noted to have a psychiatric condition after their suicide attempt.

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