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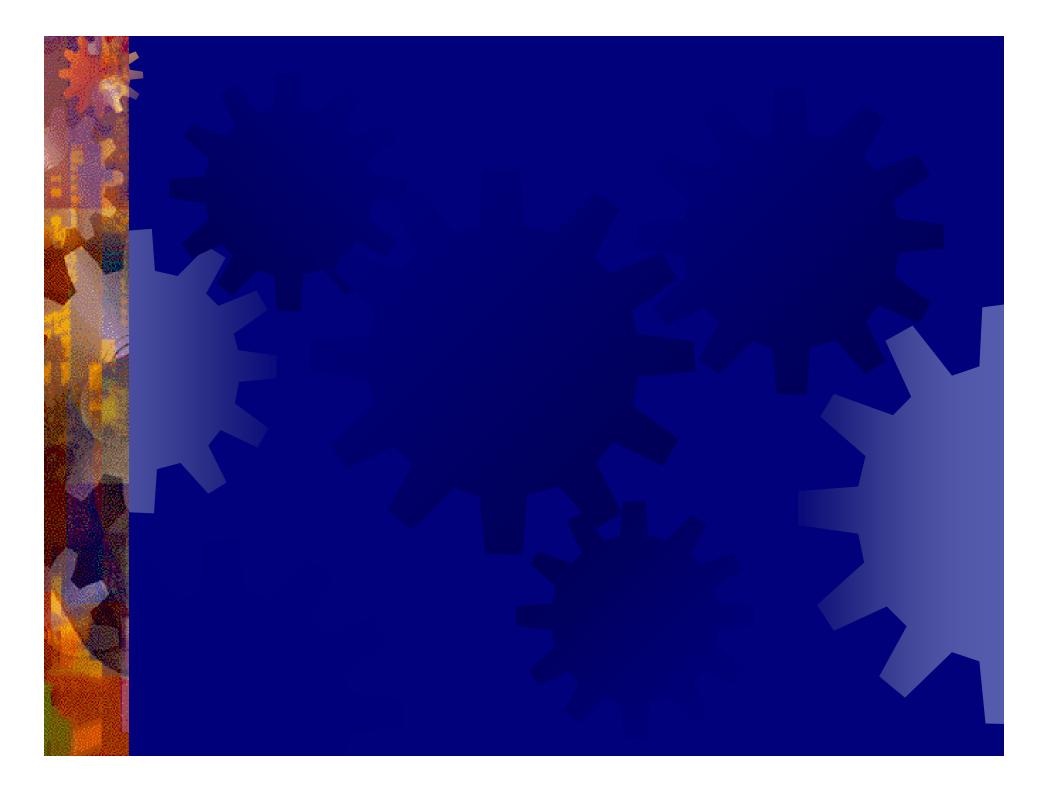
EXHIBIT O Mental Health

Document consists of 16 pages.

Entire document provided.

□ Due to size limitations, pages ______ provided. A copy of the complete document is available through the Research Library (775/684-6827) or e-mail library@lcb.state.nv.us).

Meeting Date 10/9/03



DEFINITIONS

*Suicide

*Suicide Gesture/Suicidal Behavior (no intent to die)

*Suicidal Attempt (with intent to die)

SUICIDE RESEARCH LIMITATIONS

- 1. Unknown universe of suicides.
- 1. Underreporting of suicide events
- 2. Misclassification of deaths (accidents? undetermined?)
- 3. Stigma
- 4. Sparse research on suicide among substance abusers (often excluded in studies)

RANKING OF SUICIDE 2001

(Rate p	er 100,	000 po	pulation)) :	Number:
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286

515

767

1. New Mexico	19.8	362
2. Montana	19.3	175
3. Nevada	18.4	387
4. Wyoming	16.8	83
5. Colorado	16.3	722
• 6. Alaska	16.1	102
• 7. Idaho	15.9	210

15.9

14.8

14.5

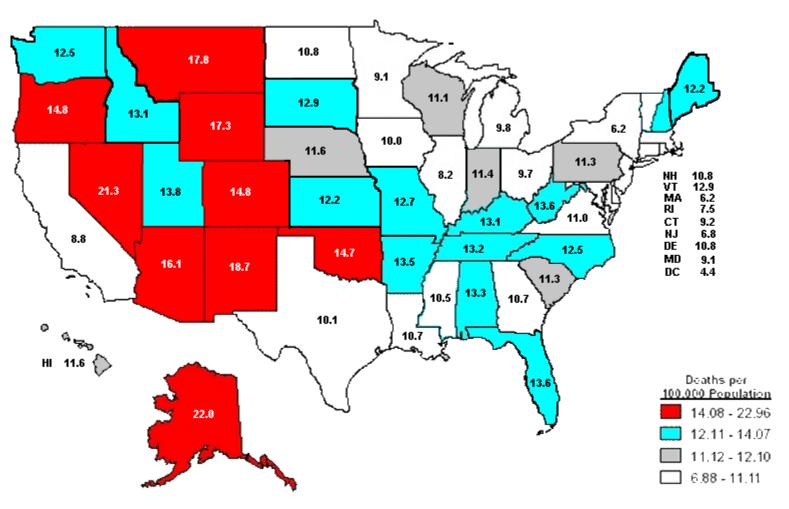
Association of Suicidology 2001

• 8. West Virginia

• 9. Oklahoma

• 10. Arizona





Nevada Leading Causes Death 1995-2000 (cpc)

Heart Disease	23,978
Cancer	20,189
Pulmonary dise	ease 7,716
Stroke	4,880
• SUICIDE	2,340 *
Motor vehicle A	Accidents 1,917
Diabetes	1,535
Liver disease	1,509
Kidney disease	1,496
Sepsis	1,405
Homicide	768 *

SUICIDE RATES BY GENDER NEVADA (2002)

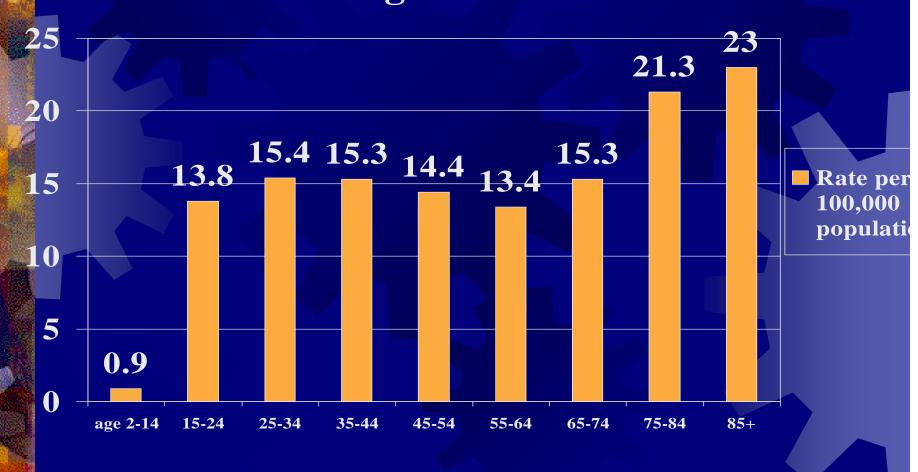
Males 326 (3.6%)

Females **87** (1.1%)

Total = 413

Center for Health Data and Research

USA SUICIDE BY AGE Rates generally increase with age, Peaking in late life



NEVADA SUICIDE METHODS 2002 Total = 413

Firearms/Explosives	239
Poisoning	93
Hanging	62
Cutting/Stabbing	5
Jumped from Height	5
Others	9
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NEVADA SUICIDE DEATHS 2002

Nevada Total = 413

Clark County = 273

Washoe County = 70

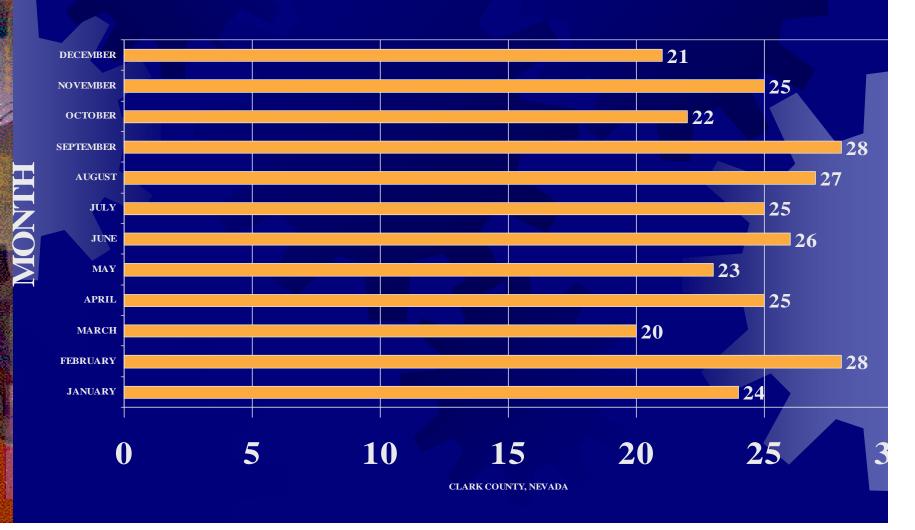
Douglas = 12

Carson City = 11

Out Of State = 39

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2001 SUICIDE DEATHS BY MONTH TOTAL 292



SUICIDES BY RISK GROUPS

Suicide Groups:

% of Suicides

Affective Disorders/ Depression 60 %

Alcoholism/Subs Abuse*

15-25%

Schizophrenia

10-15%

SURVIVORS OF SUICIDE USA

- Each suicide intimately affects at least 6 other people (estimate)
- Based on the over 736,000 suicides from 1976 through 2000 estimated that the number of survivors of suicides in the U.S. is 4.4 million (1 of every 62 Americans in 2000.
- If there is a suicide every 18 minutes, then there are 6 new survivors every 18 minutes as well.

(Note: treatment staff, teams, students, trainees etc. also impacted)

TREATMENT: WHEN SUICIDAL PATIENTS REQUIRE HOSPITALIZATION

- 1. When patient is acutely or actively psychotic, with poor judgment, command hallucinations with intent or plan.
- 2. When patient is under significant influence of drugs, especially hallucinogenic drugs.
- 3. When patient is intoxicated and emergency room in facility is not equipped to hold for 12 to 23 hours for observation.

TREATMENT: WHEN SUICIDAL PATIENTS REQUIRE HOSPITALIZATION (CONTINUED)

- 4. When patient must go home alone, and will be home by himself without supportive family or friends nearby.
- 5. When suicidal ideation does not diminish and the patient's mood does not change despite the intervention of the physician, family and/or friends.
- 6. When the stressor for suicide has not been reasonably resolved or still present in the home.

SUICIDE PREVENTION

"THE NEVADA EXPERIENCE"

Nevada 1996-1997

- SR #84 Presented by Sen. Reid
 Passed by Congress by unanimous vote
- Suicide Prevention Action Network (SPAN) organized
- * 1998 Fiscal Budget for CDC include \$2.5 million for suicide Prevention

Nevada 1998

 Suicide Prevention Research Center (SPRC) established in Las Vegas with Trauma Center of UNSOM

House resolution #212 (mirrors SR #84) passed in Nevada

Nevada 1999

- US Surgeon General's Call to Action to Prevent Suicide
- SCR11 adopted by NV Legislature
- \$200,000 Funding for Nevada Hotline
- American Foundation for Suicide Prevention (AFSP)-NV established

- Federal Steering Group Formed (DHHS)
- Public hearings on National Strategy for Suicide Prevention
- \$3 million for Suicide Hotlines
- \$75 million for Youth suicide Prevention through SAMSHA

- SCR3 On Nevada Suicide Prevention presented to legislature
- \$9 million granted to American Assoc.of Suicidology (AAS) for Evaluation and Certification of Suicide Hotlines (1-800-SUICIDE)
- Interim Study committee (Sen. O'Connell)

\$3 million appropriated for National Suicide Prevention Resource Center

 Interim Study Committee works on Suicide Prevention Legislation Draft

- Suicide Prevention legislation Adopted in 2003 session of Nevada state legislature.
- SB No. 49 creates statewide program for suicide Prevention within Dept. of Human Resources
- SB No. 36 –regional training programs for teachers and administrators to facilitate access to info relating to suicide among pupils.

*SCR No. 3

Urges each community in Nevada to form coalition of agencies an service providers to reduce number of suicides and provide support for survivors.

*SCR No. 4

Urges Clark county health district to plan and coordinate public information campaign relating to suicide prevention and expand injury prevention efforts in Clark county.

*SCR No.5

Urges agencies in Clark county to cooperate in establishment of plan for suicide prevention in Clark county.

APPROACHES TO SUICIDE

A. <u>Prevention</u> (early identification and diagnosis)

B. Intervention (treatment)

C. Postvention (Follow-up and aftercare)

A. Prevention

- Public education and awareness
- Gatekeepers training and education
- Suicide Screening programs
- Crisis Centers and Hotlines
- "Means restriction" of weapons and lethal substances

TREATMENT (Intervention)

- Timely and appropriate treatment in appropriate setting
- Availability of emergency services, hospital beds for admission
- Judicious use of medications with potential for abuse or self-harm
- Peace officers, police systems instructions to deal with emergencies and get help

Postvention (Follow-up)

- Care for Survivors of Suicide
- Treatment facilities to conduct Root Cause
- analysis (Suicide Reviews)
- Improve insurance health benefits reimbursements for treatment of addictions including gambling problems
- Implementation and coordination of
- comprehensive support services

Suicide Prevention Resources

American Foundation for Suicide Prevention (AFSP)

www.afsp.org

AFSP-Nevada Chapter

www.afspnv.org

American Association of Suicidology (AAS)

www.suicidology

Suicide Prevention Action Network (SPAN USA)

www.spanusa.org

Nevada State Suicide Prevention Website

www.suicidehelpnv.org

MHDS 2003 Suicide Prevention Resources Directory

http://mhds.state.nv.us

Study of suicide Prevention

LCB Bulletin No.03-11 (January 2003)

SUICIDE PREVENTION

"Most suicides, although by no means all, can be prevented. The breach between what we know and what we do is lethal".

Kay Redfield Jamison, M.D.