

HISTORY OF SUICIDAL BEHAVIOR AND ANALGESIC USE IN COMMUNITY-DWELLING ELDERLY

E. Olié¹, P. Courtet¹, V. Poulain², K. Ritchie³, S. Artero³

¹Inserm, U 1061, La Colombière Hospital, CHRU Montpellier / University of Montpellier 1, ²Inserm, U 1061, La Colombière Hospital, ³Inserm, U 1061, La Colombière Hospital, University of Montpellier 1, Montpellier, France

Background: Analgesics are easily obtainable and frequently used as a means of suicide. Elderly persons are high consumers of analgesics, notably opioids and also have a high suicide risk.

Aim: To determine whether elderly persons with a history of suicide attempts have higher rates of analgesic use compared to depressed and normal controls.

Methods: 857 non-institutionalized individuals without dementia from a cohort of community-dwelling persons aged over 65 years (the ESPRIT study) were randomly selected from electoral rolls and divided into three groups: 41 subjects with a lifetime history of suicide attempts (SA), 410 affective controls (AC) with a history of depression without suicide attempts, and 406 healthy controls (HC). Data on socio-demographic and clinical characteristics including analgesic use (based on data from the national healthcare insurance scheme over 3 year follow up) were collected. Logistic regression was used to compare analgesic consumption by grade (I: non opioid drugs; II: opioid drugs) in the three groups.

Results: After controlling for gender, age, education, chronic disease, hospitalization, living alone and subjective health, opioid consumption was observed to be significantly higher in both SA and AC in comparison to HC (respectively: OR=2.33 [1.15-4.73] and OR=1.39 [1.01-1.91]). After exclusion of cancer cases, the relationship remained significant only for the SA group.

Conclusions: Our findings suggest that suicidal vulnerability may be associated with an increased sensitivity to pain.