

Suicide (Prevention) Notes

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Conclusion: Lithium lowers the risk of suicide attempts and completions by ~80% during 18 mos. treatment of adult patients with bipolar and major mood disorders. Suicide attempts and the risk of suicide are targets for lithium in these patient populations.

Title of Paper:

“Decreased Risk of Suicides and Attempts during Long-term Lithium Treatment: a Meta-analytic Review (A CLASSIC)

Baldessarini RJ, Tondo L, Davis P, Pompili M, Goodwin FK, Hennen J. *Bipolar Disorders* 2006; 8: 625-639

The Study Objectives: This study was a meta-analytic comparison of rates of suicide attempts and completed suicide in patients with major affective disorders (MDD, MAD, Bipolar I/II, and some with Schizoaffective DO, bipolar type) with and without long-term lithium treatment.

Results:

- Overall risk of suicides + attempts was 5X LESS ON Li+ vs. off Li+
- Effects were similar when comparing completions vs attempts and bipolar do vs maj mood do
- Incidence Ratio of attempts: completions INCREASED by 2.5X ON Li+ suggesting reduced lethality conferred by lithium
- SEE magnificent Forest plots showing Risk Ratios and 95% Confidence Intervals

Discussion: The basis for the benefit remains unclear. Considerations include: 1) the risk of suicide is strongly associated with the depressive-dysphoric phases of illness and is rare in hypomania/mania. Lithium limits recurrence of depression in bipolar I/II; 2) inherent impact of lithium on impulsivity and aggression

Questions for further consideration:

1. Is this protection dose-dependent? In particular is it present at (non-therapeutic) Li+ blood levels of 0.4-0.6?
2. Is this protection conferred in patients NOT included in these studies: complex bipolar do, in mixed states, w/ rapid cycling, w/ signif. psychosis, with substance use, w/ other co-morbid.

NOTE: Each issue of “Suicide (Prevention) Notes” is prepared by a member of the IOL’s Executive Committee. This issue was prepared by Adrienne Bentman, M.D., Director, Adult Psychiatry Residency Training.