

Suicide (Prevention) Notes

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Conclusion: We assess the patient for pain when completing an admission interview, and for inpatients, throughout their hospital stay. As this article suggests, linking pain to the constructs of social isolation and feelings of being a burden to others is important in assessing suicide risk. Hence, it is critical to explore the extent to which patient with chronic pain perceive their disabilities as socially isolating, or as having a negative impact on significant others. Family involvement is critical as well in supporting the psychiatric patient in pain.

Title of Paper: “Chronic Pain and the Interpersonal Theory of Suicide”, by Wilson, K., Kowal, J., Henderson, P, McWilliams, L., *Rehabilitation Psychology*, 2013: 58. No. 1, 111-115

The Study: The interpersonal theory of suicide attempts to integrate various psychological and social risk factors for suicidal behavior into a general conceptual framework. It proposes that two factors—thwarted belongingness and perceived burdensomeness—each contribute to the psychological context that leads to the desire to commit suicide.

A total of 303 patients of a chronic pain rehabilitation program completed measures of pain severity, duration, and disability; cognitive–affective measures of depression and catastrophizing; and interpersonal measures of relationship distress and self-perceived burden to others. The latter measures were included as indices of the belongingness and burdensomeness constructs which are important factors related to suicide risk and potential, noted in the Interpersonal theory of suicide. Participants also rated two items pertaining to suicidal ideation.

Results: In a multiple regression analysis, both distress in interpersonal relations and self-perceived burden to others were significant predictors of suicidal ideation, even after adjusting statistically for demographic characteristics, pain severity and duration, functional limitations, catastrophizing, and depression.

Discussion: People with chronic pain have elevated rates of suicidal ideation, but few studies of this population have tested specific predictions about suicide risk factors that are derived from theory. The interpersonal theory of suicide proposes that two factors—thwarted belongingness and perceived burdensomeness—each contribute to the psychological context that leads to the desire to commit suicide. The findings of this study validate that the interpersonal theory of suicide is relevant to understanding elevated rates of suicidal ideation among people with chronic pain, and may have broader applicability to other populations with chronic illness or disability.

Questions for further consideration:

-How can we incorporate this information into our suicide risk assessment of the patient with physical pain?
-How do we react when we care for psychiatric patients experiencing pain- do we sometimes doubt the pain is “real”? Especially with the patient with an addiction issue- do we link complaints of pain to “med-seeking” behavior?

NOTE: Each issue of “Suicide (Prevention) Notes” is prepared by a member of the IOL’s Executive Committee. This issue was prepared by Ellen W. Blair, APRN, NEA-BC, Director of Nursing, The Institute of Living