NREPP SAMHSA's National Registry of Evidence-based Programs and Practices

Suicide Prevention Programs

Review 11

Oyama, H., Sakashita, T., Ono, Y., Goto, M., Fujita, M., & Koida, J. (2008). Effect of community-based intervention using depression screening on elderly suicide risk: A meta-analysis of the evidence from Japan. *Community Mental Health Journal, 44*, 311–320. PubMed abstract available at http://www.ncbi.nlm.nih.gov/pubmed/18363103.

Objectives	Quantify the effect of community-based depression screening (CDS) with follow-up on the completed suicide risk for older adults over 65.
Studies Included	Five international studies published between 1998 and 2006
Participants in the Studies	Adults aged 65 and older with high suicide risk rates
Settings	Rural regions of Japan
Outcomes	Suicide risk
Limitations of the Studies	The before-and-after design used could cause time-dependent confounding, including a regression effect toward the mean and secular trend. Nonrandomized assignment cannot control for unmeasured confounding variables. Author bias and selection bias are apparent since this research group (including these authors) conducted most of the included studies.

Results

The implementation of universal prevention programs involving community-based depression screening (CDS) and health education is associated with a reduced risk of completed suicide among older residents (four of five studies revealed the risk reductions in the target populations were significantly greater than the secular trends). The CDS appeared to decrease suicide risk in older women with the accompanying follow-up conducted by general practitioners or psychiatrists; in contrast, there was a stronger effect in older men when the follow-up was conducted by psychiatrists than by general practitioners.