

Suicide Prevention Programs

Review 8

Mann, J. J., Apter, A., Bertoloe, J., Beautrais, A., Currier, D., Haas, A., . . . Hendin, H. (2005). Suicide prevention strategies. *Journal of the American Medical Association*, 294, 2064–2074. PubMed abstract available at <http://www.ncbi.nlm.nih.gov/pubmed/16249421>.

Objectives	Examine evidence for the effectiveness of specific suicide-preventive interventions and make recommendations for future prevention programs and research.
Studies Included	Ninety-three U.S. and international studies published between 1972 and 2005
Participants in the Studies	Adolescents and adults in the general population, high-risk adults, military personnel, psychiatric patients, primary care patients, primary care physicians, patients who attempted suicide, adults with schizophrenia spectrum disorders, adults with affective disorders, borderline personality disorder patients
Settings	Settings were not reported for all studies.
Outcomes	Primary outcomes of interest: suicidal behavior (completion, attempt, ideation); intermediary or secondary outcomes: treatment seeking, identification of at-risk individuals, antidepressant prescription/use rates, referrals
Limitations of the Studies	Many universal or targeted educational interventions are multifaceted, and it is not known which components produce the desired outcome; or the follow-up periods after interventions were too short.

Results

Education of physicians and restricting access to lethal means were found to prevent suicide. Other methods including public education, screening programs, and media education need more testing. Investigating which components of suicide prevention programs are effective in reducing rates of suicide and suicide attempt is essential to make the best use of limited resources.