SUICIDE PREVENTION

VA is focusing research on identifying risk factors for suicide in Veterans, as well as on screening and assessments to identify those Veterans most at risk. Other research aims to develop effective interventions and identify crucial time periods at which to intervene. In addition, VA is part of a consortium set up by the Army to mesh military and civilian efforts on suicide prevention. The consortium will allow researchers to determine how best to screen and assess personnel, develop effective interventions, and ultimately reduce suicides.

EXAMPLES OF VA RESEARCH ADVANCES

GENETIC RISK FOR SUICIDE—Two genes may increase risk for suicide attempts in adults exposed to childhood trauma. Researchers from the New Jersey VA Health Care System studied more than 800 African Americans. Those with one of the two genes were slightly more likely to attempt suicide, compared with those who had neither gene. Those with both genes were more than twice as likely to attempt suicide. The two genes help to regulate the body's response to stress as well as many other processes, including mood, digestion, and immunity. The research could one day help clinicians identify Veterans most at risk for suicide attempts.

MIND OVER MOOD—Veterans with depression and substance abuse issues are already at high risk for suicide attempts. Among these Veterans, those who don't feel able to extricate themselves from periods of low moods are at particularly high risk for suicide-related hospitalization. Assessing high-risk Veterans for this characteristic—called "negative mood regulation expectancy"—may help identify those who most require intervention.

CERTAIN BRAIN INJURIES ARE RISK FACTORS FOR SUICIDE—Specific types of traumatic brain injury (TBI) may put Veterans at increased risk for suicide, say researchers from the VA's Mental Illness Research Education and Clinical Center in Denver. Using five years of data, they confirmed that TBI in general was a risk factor: compared with Veterans with no history of TBI, those with such a history were 55 percent more likely to die by suicide. Within the TBI group, those who had suffered a concussion or skull fracture were the most likely to commit suicide. The study may help pinpoint those Veterans who could most benefit from suicide prevention strategies.

TARGETING TIME PERIODS—Ann Arbor researchers focused on Veterans receiving treatment for depression to identify high-risk periods for suicide attempts. They found that the suicide rate was highest after psychiatric hospitalizations. The second-highest rate occurred during the 12 weeks after patients started new antidepressant medications. The researchers suggest that health systems could achieve maximum impact by focusing prevention efforts on these two time periods.

★ **FACTS ABOUT SUICIDE PREVENTION—***Recent data show that while suicide has continued to be more common among VA health care users than among the general population, the rates have declined in the past few years relative to the period between 1993 and 2002. In 2003, VA began focusing additional attention and resources on mental health care in response to the influx of returning Iraq and Afghanistan Veterans. The Veterans Crisis Line is a toll-free, confidential resource at **1-800-273-8255**. Veterans and their families also can chat online at www.VeteransCrisisLine.net. No registration with the VA or enrollment in VA health care is necessary.*