

IS SOMEONE YOU KNOW THINKING ABOUT SUICIDE?



The road, which ends in suicide, is usually a very long one. The process doesn't happen over night. People who become suicidal have usually suffered from a brain illness such as clinical depression, anxiety disorder, bipolar (manic depression) or schizophrenia for many years. Some have sought professional treatment; others have not. Some have felt suicidal in the past, for others, the suicidal thoughts are new.

The Journal of the American Medical Association has reported that 95% of all suicides occur at the peak of a depressive episode. The illnesses that cause suicide can distort thinking, so people can't think clearly or rationally. They may not know they have a treatable illness, or they may think that they can't be helped. Their illness can cause thoughts of hopelessness and helplessness, which may then lead to suicidal thoughts.

If depression is recognized and treated, suicidal thoughts can be eliminated. Many suicides can be prevented.

KNOW WHAT TO WATCH FOR:

Symptoms of Depression

- Persistent sad or empty mood.
- Feelings of hopelessness, helplessness, guilt, pessimism, or worthlessness.
- Chronic fatigue or loss of interest in ordinary activities, including sex.
- Disturbances in eating or sleeping patterns.
- Irritability, increased crying; generalized anxiety (may include chronic fear of dying/convinced dying of incurable disease), panic attacks.
- Difficulty concentrating, remembering, or making decisions.
- Thoughts of suicide; suicide plans or attempts.
- Persistent physical symptoms or pains that do not respond to treatment - headaches, stomach problems, neck/back pain, joint pain, mouth pain.

If you are concerned about any of these symptoms, ask the person how he or she is feeling. Getting help is key to suicide prevention... the earlier, the better.

Warning Signs of Suicide

- Talking or joking about suicide. Statements about being reunited with a deceased loved one.
- Statements about hopelessness, helplessness, or worthlessness. Example: "Life is useless." "Everyone would be better off without me." "It doesn't matter. I won't be around much longer anyway." "I wish I could just disappear."
- Preoccupation with death. Example: recurrent death themes in music, literature, or drawings. Writing letters or leaving notes referring to death or "the end".
- Suddenly happier or calmer.
- Loss of interest in things one cares about.
- Unusual visiting or calling people one cares about - saying their good-byes.
- Giving possessions away, making arrangements, setting one's affairs in order.
- Self-destructive behavior (alcohol/drug abuse, self-injury or mutilation, promiscuity). (**over**)

- Risk-taking behavior (reckless driving/excessive speeding, carelessness around bridges, cliffs or balconies, or walking in front of traffic).
- Having several accidents resulting in injury. Close calls or brushes with death.
- Obsession with guns or knives.

KNOW WHAT TO DO:

If you see possible warning signs of suicide...

- **It's okay to ask the person, "Do you ever feel so badly that you think of suicide?"** Don't worry about planting the idea in someone's head. Suicidal thoughts are common with depressive illnesses, although not all people have them. If a person has been thinking of suicide, he will be relieved and grateful that you were willing to be so open and nonjudgmental. It shows a person you truly care and take him seriously.
- **If you get a yes to your question, question the individual further. Ask, "Do you have a plan?" If yes, ask, "Do you know when you would do it?" "Do you know when?" (today, next week?) "Do you have access to what you would use?"** Asking these questions will give you an idea if the person is in immediate danger. If you feel she is, do not leave her alone! A suicidal person must see a doctor or psychiatrist immediately. You may have to take her to the nearest hospital emergency room or call 911. Always take thoughts of or plans for suicide seriously.
- **Never keep a plan for suicide a secret.** Don't worry about breaking a bond of friendship at this point. Friendships can be fixed. **And never call a person's bluff, or try to minimize his problems by telling him he has everything to live for or how hurt his family would be.** This will only increase his guilt and feelings of hopelessness. He needs to be reassured that there is help that what he is feeling is treatable, and that his suicidal feelings are temporary.
- **If you feel the person isn't in immediate danger, you can say things like, "I can tell you're really hurting", and "I care about you and will do my best to help you."** Then follow through - help her find a doctor or a mental health professional. Be by her side when she makes that first phone call, or go along with her to his first appointment. It's not a good idea to leave it up to a person to get help on her own. A supportive person can mean so much to someone who's in pain.

In order to save lives, it's critical that we recognize the symptoms of these biological diseases that cause suicide. There is still stigma associated with these illnesses, which can prevent people from getting help. Your willingness to talk about depression and suicide with a friend, family member, or co-worker can go a long way in reducing stigma. Education is the key to understanding the tragedy of suicide that, in many cases, can be prevented.