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DECISION MAKING AND VULNERABILITY TO SUICIDAL BEHAVIOUR IN ELDERLY

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Suicide is a major public health concern, especially for older adults, who have higher rates of completed suicide than any other age group in most countries of the world. However, understanding suicidal behaviour remains a challenging task particularly among the elders who have been poorly studied. Decision making has been recently found to be altered in suicide attempters under 65. To test whether decision making would be a neuropsychological trait of vulnerability to suicidal behaviours, the authors used the Iowa Gambling Task to investigate normothymic non demented elders with a history of suicidal behaviour (N = 35) and compared it to decision making in non suicide attempters with a past history of depression (N = 52) and comparison subjects (N = 43). The data also were compared to those of similar groups of younger normothymic subjects. Moreover, the old suicidal patients were assessed according to the age at the onset of suicidal behaviour (before or after 60). Old suicide attempters did not significantly differ from the other aged groups and according to the age of first suicidal behaviour. Old suicide attempters presented better performances than that of younger suicidal patients. Vulnerability to suicidal behaviour in older people may proceed from cognitive processes which are different from the ones involved in suicidal vulnerability of younger subjects. These results are preliminary and further studies are needed to explore vulnerability cognitive patterns to suicide among elders.