

## MEDICO-ECONOMIC IMPACT OF A SUICIDE ATTEMPT ON THE RELATIVES OF THE SUICIDE ATTEMPTER

V. Jardon<sup>1</sup>, E. Poulet<sup>2</sup>, P. Genest<sup>3</sup>, F. Chastang<sup>4</sup>, G. Brousse<sup>5</sup>, J.B. Garre<sup>6</sup>, C. Pichene<sup>7</sup>, C. Thevenon Gignac<sup>8</sup>, L. Jehel<sup>9</sup>, C. Chanudet<sup>10</sup>, M. Benoit<sup>11</sup>, J. Mousques<sup>12</sup>, P. Dourgnon<sup>12</sup>, A.L. Demarty<sup>13</sup>, S. Duhem<sup>13</sup>, F. Ducrocq<sup>1</sup>, M. Seguin<sup>14</sup>, G. Vaiva<sup>1</sup>

<sup>1</sup>CHRU Lille - Hopital Michel Fontan, Lille, <sup>2</sup>CH Le Vinatier, Lyon, <sup>3</sup>CHRU Brest, Brest, <sup>4</sup>CHRU Caen, Caen, <sup>5</sup>CHU Clermont-Ferrand, Clermont-Ferrand, <sup>6</sup>CHU Angers, Angers, <sup>7</sup>CHU Nancy, Nancy, <sup>8</sup>CH Dron, Tourcoing, <sup>9</sup>CHU Fort de France, Fort de France, <sup>10</sup>CH Quimper, Quimper, <sup>11</sup>CHU Nice, Nice, <sup>12</sup>IRDES, Paris, <sup>13</sup>CIC Lille, Lille, France, <sup>14</sup>Douglas Research Center - Mac Gill University, Montréal, QC, Canada

**Hypothesis:** A suicide attempt is an major event that creates harm on both family and close relatives, that can be measured in terms of traumatic stress and medico-economic impact (costs). Each year, 3.750.000 French people are concerned by a suicide attempt of a relative (or close person).

**Subjects:** Male or female, older than 16, being a relative of a suicide attempter (i.e. living in the same house as the suicide attempter). 171 families were included (171 suicide attempters and 171 « family informants »). These subjects were compared to IRDES datas on French population (Institute of Research and Documentation on Health Economy ; sample of 20.000 subjects, representing 95% of the French families). All subjects were reassessed by phone at 3 month and 1 year.

**Results:** 80% of the relatives declare "being fine" at 1 year; the 20% that declare being "not so well" are important to qualify, the sooner after the suicide attempt. An explicative model trying to evaluate the risk of being "not so well" at 1 year is possible ; this model is highly represented by the psychotraumatic impact of the confrontation with the suicide attempt.

On the economic plan, we can observe a great stability in healthcare contacts at 1 year (hospitalizations, GP or Specialists contacts, other kind of care contact...), contrasting with a big increase in medication use (x 2.37 in comparison with IRDES population); all the medication types being concerned, psychotropic and others.

The question of a self-medication partly unconscious is raised.