

## S39-01 - EPIDEMIOLOGY OF SUICIDAL AND RISK-TAKING BEHAVIOR

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In EU, the latest available data estimates that some 63,000 individuals die annually due to suicide, which translates to 1 suicidal death every 40 seconds. Europe comprises seven countries that are among the top 15 countries with the highest suicide mortality rates. Statistics illustrate that the highest mortality rates for suicide ( $\geq 25/100,000$ ) comprises mostly former Soviet Union Republics. Suicide rates among the age-group 15-24 years have been steadily increasing over the past few decades with statistics reporting rates up to approximately 22/100,000 among males and 4.8/100,000 among females in Europe.

Epidemiological research has demonstrated that suicide is significantly correlated with suicidal and risk behaviors. Studies have identified suicidal ideation and deliberate self-harm to be significantly correlated to both suicide and attempted suicide. Furthermore, the strongest predictor of suicide is in fact a previous suicide attempt. In Europe, there are 10-20 suicide attempts for every completed suicide. In the US, it is even higher, with estimations reporting 100-200 suicide attempts for every completed suicide. However, suicidal behavior is not an isolated act, rather is a result of a process that co-occurs with psychiatric illnesses, which can range from depressive episodes to schizophrenia. Moreover, epidemiological evidence stipulates that suicidal behavior coincides with a multitude of risk-taking behaviors that are frequently established in adolescent years. Studies have linked suicidal behavior to various types of risk-taking behaviors that include peer victimization, sexual risk behavior, delinquency, and substance abuse. Future epidemiological studies in suicide are fundamental in monitoring, identifying risks and formulating preventive interventions.