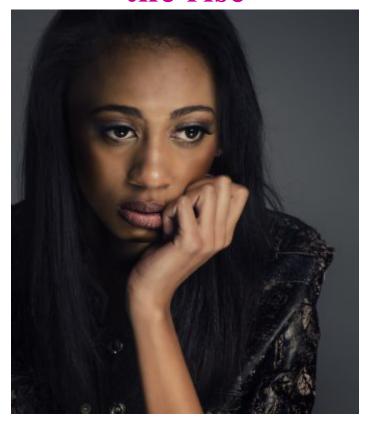
Suicide: a tragic and preventable reality on the rise



A life ended far too soon as a result of personal despair is a reality that is happening more and more in the United States. In fact, suicide rates are up a shocking 25 percent since 1999.

Suicide is the 10th-highest cause of death in America, and the second-highest cause of death for people ages 15-34. According to the National Suicide Prevention Lifeline, over 12 million people contemplate suicide in the U.S. every year. Of those, two million people call the national suicide hotline for help.

Forty thousand people die of suicide in the U.S. every year. That's more than 100 people every day, and many of these are veterans. In fact, more people die from suicide every year than in automobile accidents.

While it is a tragic and complicated issue, suicide is preventable. Can you imagine how many lives would be saved if we put as much time, energy, effort and money into suicide prevention as we do for automobile safety?

It is also a significant health concern. Physicians estimate that more than 90 percent of people who commit suicide have a diagnosed or undiagnosed mental illness. If we are to make a difference in suicide rates, we must improve mental healthcare access and delivery in the U.S.

Suicide is devastating to families. Often, those left behind spend a lifetime of grief and wondering without any satisfaction or understanding.

Suicide warning signs and symptoms

Most people who commit suicide plan it for a while. Rarely is it a spur of the moment decision. There may be a major precipitating event, but the plan or thought of suicide was already in place.

Most family members say that "we never saw it coming." As one suicide expert reports, "That is because they don't want you to see it coming." That is why it is so important to pay attention to the warning signs of suicide.

These behaviors may be warning signs that someone is considering suicide:

- Talking about dying or wanting to die
- Talking about killing themselves
- Mentioning that they feel empty, hopeless, or have no reason to live
- Investigating or planning a way to kill themselves, such as an online search for suicide, hoarding pills, or purchasing a gun
- Talking excessively about feeling guilty or ashamed or trapped with no way out
- Feeling unbearable emotional or physical pain

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- Speaking about being a burden to others
- Increasing use of alcohol and/or drugs
- Seeming anxious or angry
- Withdrawing from friends and family
- A significant change in eating and/or sleeping habits
- Acting enraged or mentioning getting revenge
- Taking enormous risks like driving recklessly
- Talking about death frequently
- Exhibiting extreme mood swings
- Giving away important or essential items or possessions
- Saying goodbye to family and friends

Suicide risk factors

Suicide does not discriminate. People of all ages, sexes, skincolors, and levels of wealth, education and social status can be at risk for suicide. Suicidal behavior is exceptionally complicated.

There can be many different factors that contribute to someone attempting suicide, including:

- Depression
- Mental illness
- Substance abuse
- Chronic pain
- Previous suicide attempts
- A family history of mental illness
- A family history of substance abuse
- A family history of suicide
- History of family violence (including physical or sexual abuse)
- Having guns in the home
- Recently released from prison or jail

Many people who have risk factors never attempt or contemplate suicide. Nevertheless, displaying suicidal thoughts, behavior or discussion is not normal. It is a response to extreme distress and despair and should not be ignored. This may be the only time to connect a person who is suicidal with someone who can help them.

Actions for helping someone who appears suicidal

- Ask: "Are you thinking about killing yourself?" It's not an
 easy question, but studies show that asking at-risk
 individuals if they are suicidal does not increase suicides
 or suicidal thoughts.
- 2. *Keep them safe:* Reducing a suicidal person's access to highly lethal items or places is an essential part of suicide prevention. While this is not always easy, asking if the atrisk person has a plan and removing or disabling the lethal means can make a difference.
- 3. *Be there:* Listen carefully and learn what the individual is thinking and feeling. Findings suggest acknowledging and talking about suicide may, in fact, reduce rather than increase suicidal thoughts.

- 4. Help them connect: Save the National Suicide Prevention Lifeline's number in your phone, so it's there when you need it: 1-800-273-TALK (8255). You can also help make a connection with a trusted individual like a family member, friend, spiritual advisor, or mental health professional.
- 5. Stay connected: Staying in touch after a crisis or after being discharged from care can make a difference. Studies have shown the number of suicide deaths goes down when someone follows up with the at-risk person.

Your action can save a life

If you observe disturbing social media posts, contact the website directly and immediately to express your concern over their posts, or even call 911. This can save a friend's life.

If you know someone being treated for mental illness, make sure they are keeping their mental health appointments and that they are taking their medicines.

If you know of someone who may have untreated mental health issues, do everything you can to get them help. If you need assistance getting them help, talk to your doctor, their doctor, or call the suicide prevention line for additional support services. Take action. Time is of the essence.

If you know someone who appears suicidal, get help as soon as possible, especially if their behavior is new or has escalated recently.

Call the National Suicide Prevention Lifeline, 1-800-273-TALK (8255). The Lifeline is available 24 hours a day, 7 days a week. The deaf and hard of hearing can contact the Lifeline via TTY at 1-800-799-4889. Put the National Suicide Prevention Lifeline, 1-800-273-TALK (8255) in your cell phone for ready reference in the future.

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Dr. Charles Crutchfield III, M.D.

Charles E. Crutchfield III, MD is a board-certified dermatologist and Clinical Professor at the University of Minnesota Medical School. He also has a private practice in Eagan, MN. He received his M.D. and master's degree in Molecular Biology and Genomics from the Mayo Clinic. He has been selected as one of the top 10 dermatologists in the United States by Black Enterprise Magazine. Dr. Crutchfield was recognized by Minnesota Medicine as one of the 100 Most Influential Healthcare Leaders in Minnesota. He is the team dermatologist for the Minnesota Twins, Vikings, Timberwolves, Wild and Lynx. Dr. Crutchfield is an active member of both the American and National Medical Associations, and president of the Minnesota Association of Black Physicians.

