

To: All Providers
From: PerformCare
Date: May 1, 2024
Subject: Suicide Prevention Memo #17: Alcohol Use Disorder and Suicidal Thinking

For May, PerformCare would like to share information related to suicide and those we treat with Alcohol Use Disorders (AUD). Information specific to other forms of substance abuse will be a topic of future communications.

Riszk et. al. (2021) reported alcohol related suicide rates were noted to have recently increased by 35% and AUD increased the risk of death by suicide by 20%. They warn that suicidal thinking is a significant clinical concern for anyone seeking treatment for AUD. In a brief by SAMHSA in 2016, it was reported that 22% of suicide deaths involved alcohol intoxication. In 2022, Ledden et al. reported findings from their study of 14, 949 adults completing psychiatric health screenings using the Alcohol Use Disorders Identification Test (AUDIT). They found that those who had indicators of dependence, binge drinking, and had a history of harmful effects of alcohol use had higher rates of suicidal thinking, attempts and non-suicidal self -injury.

Riszk et al. (2021) clarified that these elevated risks are not accounted for by co-morbid psychiatric diagnoses. They differentiate risk factors by acute intoxication and chronic alcohol use and dependence, noting that the first 24 hours after intoxication is a time for most heightened risk (seven-fold) and is associated with the most significant lethality. These authors present conceptual models for relationships with alcohol and suicidal behavior that should be considered in treatment. They discuss proximal (acute intoxication) and distal (chronic alcohol) pathways leading to suicide risk. Acute intoxication (proximal) could lead to suicide attempts due to lack of self-regulation, impulse control, and impulsivity. Emotional numbing and lack of fear could also be implicated in this model. Chronic alcohol use (distal) may produce a diathesis stress interaction of AUD and suicidal thinking that are implications for treatment. These factors include: chronic alcohol use and subsequent intoxication leading to increased impulsivity in those who have suicidal thinking; social isolation, disrupted relationships and a lack of support systems; heightening of existing psychosocial stressors; increased personal or interpersonal violence; financial and job insecurity; health concerns; and cognitive deficits. All distal factors correlate with existing risk factors for suicide, but may be heightened with chronic alcohol use and should be addressed in the treatment process.

References

<https://www.cambridge.org/core/journals/bjpsych-open/article/alcohol-use-and-its-association-with-suicide-attempt-suicidal-thoughts-and-nonsuicidal-selfharm-in-two-successive-nationally-representative-english-household-samples/A0BDB904D24BBEDFE4320FA16569D671>

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7955902/>

<https://store.samhsa.gov/sites/default/files/sma16-4935.pdf>

Ledden S, Moran P, Osborn D, Pitman A. Alcohol use and its association with suicide attempt, suicidal thoughts and non-suicidal self-harm in two successive, nationally representative English household samples. *BJPsych Open*. 2022;8(6):e192. doi:10.1192/bjo.2022.594

Rizk MM, Herzog S, Dugad S, Stanley B. Suicide Risk and Addiction: The Impact of Alcohol and Opioid Use Disorders. *Curr Addict Rep*. 2021;8(2):194-207. doi: 10.1007/s40429-021-00361-z. Epub 2021 Mar 14. PMID: 33747710; PMCID: PMC7955902.