





One size fits all?

The different forms of alcohol use in suicidal crisis and their associations with repeated crisis care and death

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Suicide prevention strategies often take a 'one-size-fits-all' approach to alcohol use..



Frequency?

Quantity?

Dependency?

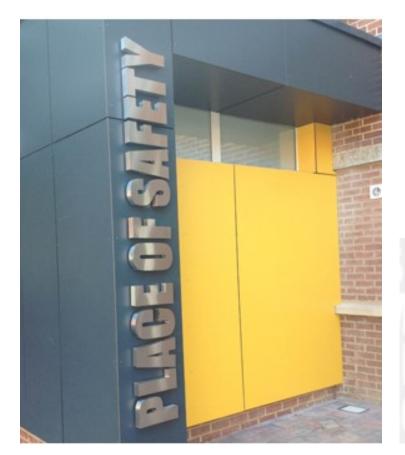
Withdrawal?

Intoxication?

Blood Alcohol level?

Alcohol Use Disorder?

The SLaM Health-based Place of Safety provides a unique window into alcohol and suicidal crisis





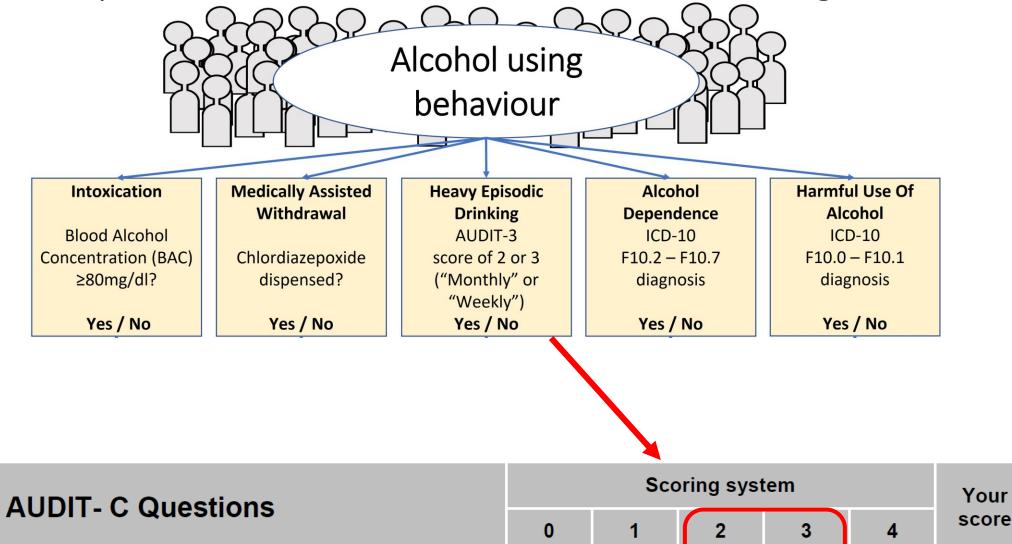
Mental Health Act 1983



Inclusion Criteria

- Detained under Section 136
 between 1st Feb 2017 and 4th Oct
 2018
- First detention in study period
- 18+ years old
- Detained due to a suicide attempt (or a credible expression of suicide intent)
- No primary diagnosis of Learning Disability, Neurodevelopmental Disorder or Organic Disorder
- N=650

Latent Class Analysis used five variables that are measures of a single 'latent' construct



How often have you had 6 or more units if female, or 8

or more if male, on a single occasion in the last year?

Less

than

monthly

Monthly

Weekly

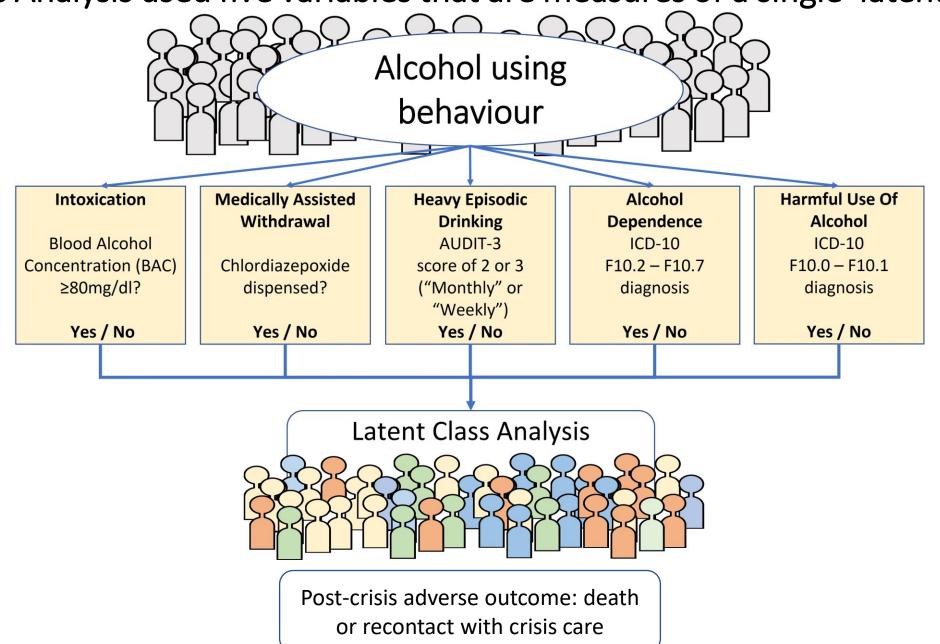
Never

Daily or

almost

daily

Latent Class Analysis used five variables that are measures of a single 'latent' construct



Sample characteristics

- 60.3% (n=392) detained having drunk alcohol prior to detention
- 18.6% (n=121) with an AUDIT score indicating possible dependence
- **59.1%** (n=384) male
- Mean age **35** (SD=11.5)
- Predominantly white ethnicity (64.5%, n=419)
- Psychiatric comorbidity the norm; only **26.8**% (n=174) with no mental health diagnosis.

- OUTCOME (within a median 490 days):
 - **4.9**% (n=32) died
 - **53.4%** (n=348) came back to crisis care

Low-risk drinkers, binge drinkers and dependent drinkers have distinct drinking profiles...

0.75

Class 1: Low-risk drinkers (57% of sample)

Class 2: Binge drinkers (28% of sample)

Class 3: Dependent drinkers (15% of sample)

tem-response probability 0.50 0.25 0.00 -Variable

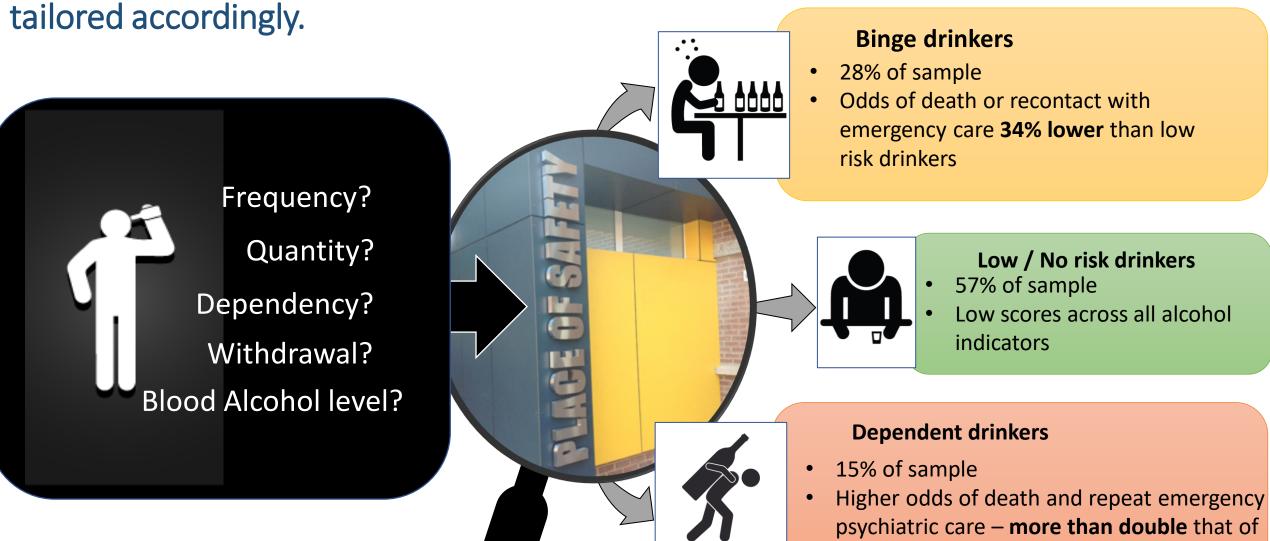
AUDIT-3 Binge = Response of 'Weekly' or 'Monthly' to Q3 of AUDIT BAC = Blood Alcohol Concentration ≥80mg/dl MAW = Medically Assisted Withdrawal (i.e. given chlordiazepoxide) Harmful = ICD-10 F10.0 or F10.1 diagnosis Dependence = ICD-10 F10.2 - F10.7 diagnosis ... and distinct patterns of post-crisis risk

Outcome: Death or Recontact with Emergency Psychiatric Care

| | AOR (95% CI) | p-value |
|-----------------------------|--------------------|---------|
| Class 1: Low-risk drinkers | (ref.) | |
| Class 2: Binge drinkers | 0.66 (0.53 – 0.81) | <0.001 |
| Class 3: Dependent drinkers | 2.32 (1.62 – 3.32) | <0.001 |
| Age | 1.00 (1.00 – 1.01) | 0.281 |
| Sex: Female | 1.16 (0.96 – 1.41) | 0.127 |
| Psychiatric diagnosis: Yes | 2.16 (1.78 – 2.64) | <0.001 |

Alcohol dependence and binge drinking are associated with divergent levels of risk of death or repeat crisis care after a suicide attempt. Crisis care policies should be tailored accordingly

low risk drinkers



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Alcohol dependence and heavy episodic drinking are associated with different levels of risk of death or repeat emergency service attendance after a suicide attempt



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