

Study: High Suicide Risk for ACS Patients



Researchers in Taiwan have found that patients with acute coronary syndrome are at an increased risk of suicide compared to otherwise healthy people. Their study published in *Journal of the American Heart Association* suggests the need to identify those patients at risk for suicide and develop effective interventions to prevent such deaths.

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The study found that during the first six months after an ACS diagnosis, people with ACS were 200 percent more likely to commit suicide. After adjustment for other risk factors, such as mental illness, the rate of suicide declined amongst ACS patients to around a 15 percent higher risk, which is still considered significant, the authors say.

“Depression and anxiety that develop after an [ACS] diagnosis have been associated with limited physical abilities, reduced physical function, poor health-related quality of life and an increased risk of new cardiovascular events or death,” explains Jung-Chen Chang, PhD, co-senior author and assistant professor at the School of Nursing in the College of Medicine at National Taiwan University. “In our study, we found the odds of suicide to be high amongst patients with ACS.”

Chang and colleagues used the National Mortality Registry in Taiwan to identify 41,050 people aged 35 years or older who committed suicide between 2000 and 2012, and then compared them to 164,200 people with similar demographics. Data were adjusted for stroke, diabetes, chronic kidney disease and psychiatric illness from the Health and Welfare Data Science Center in Taiwan.

While the study covered data from Taiwan, the authors note that the results are applicable to other countries, including the United States, since acute heart attack is one of the leading causes of death in most countries where the high prevalence of ACS represents a significant burden on healthcare resources.

Previous research, including prospective studies and systematic reviews, has shown that depression is common in patients with ACS. However, these studies have not reported the association between ACS and suicide after adjusting for stroke, diabetes, chronic kidney disease and psychiatric illness, according to Chang.

“We recommend that healthcare providers take the increased odds of suicide into their evaluation of patients newly diagnosed with ACS,” Chang says. “In addition to the existing efforts for managing depressive symptoms and reducing suicide, all cardiologists should be aware of the potential associations between ACS and suicide and make necessary referrals to specialists for suicide prevention.”

Source: [American Heart Association](#)

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