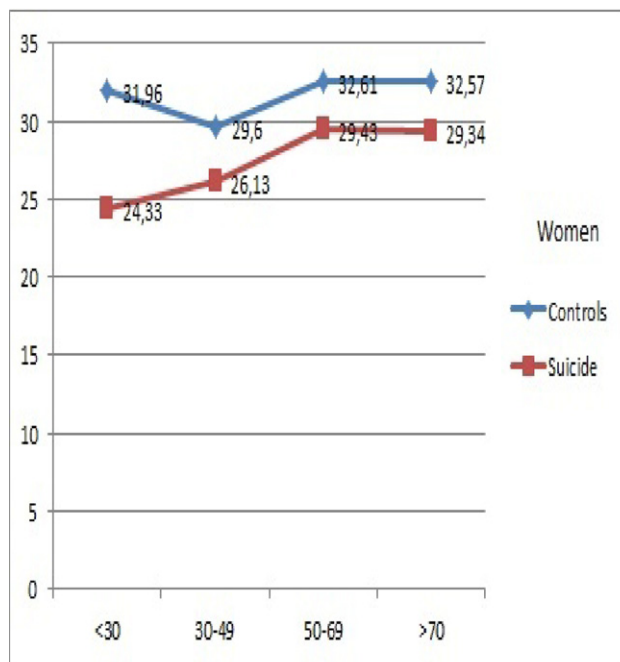


relationship between these two variables is complex and not all studies support it. Moreover, the relationships between depression, suicide and overweight point in different directions. More and more studies indicate the existence of a relationship between depression and overweight, suggesting that perhaps the “epidemic” of depression and overweight that we see in Western societies has some connection. In addition, depression is a risk factor for suicide well established. Our results indicate that suicide group tends to have lower BMI (less weight in relation to its size) than the controls.

Table 1



Disclosure of interest The authors have not supplied their declaration of competing interest.

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EW598

Prevalence of mental disorders in 1519 suicides: A meta-analysis

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Introduction Psychological autopsy studies have constantly indicated a clear relation between mental disorders and suicide. This relation has been found in studies across the world, although the percentage of cases with at least one mental disorder diagnosed may vary between studies and specially, between countries and geographical regions.

Methods Review of psychological autopsy studies of suicide completers which contained information on diagnostic distribution. Only studies carried out in Europe and North America were included.

Results A total of 14 studies, including 1519 suicides, were analyzed (Table 1).

Conclusions Suicide risk is a multifactor phenomenon, however, it is strongly related to mental disorders. Mental health strategies should be directed to target clinical groups at high risk of suicide.

Table 1

Study	Suicides with diagnose	Prevalence of mental disorder (%)	OR
Schneider/2005	146	89.57	17.9816
Waern/2002	82	96.47	122.0238
Almansi/2009	134	69.07	6.432
Appleby/1999	76	90.48	26.2647
Hawton/2002	38	90.47	123.5
Boardman/1999	151	71.23	3.1074
Foster/1999	101	86.32	21.0417
Thoresen/2006	31	72.09	9.1852
Preville/2005	40	42.10	6.1818
Lesage/1994	66	88	12.3095
Overholser/2011	125	84.46	8.1258
Shafii/1988	20	95.23	18.1818
Shaffer/1996	59	59	4.8404
Brent/1999	115	82.15	14.2313

	Estimation	Signif.	95% confidence interval	
			Lower	Upper
M-H combined OR	9.4603	0.000000	8.0168	11.1638
SE(lnOR)	0.0845			
Homogeneity Chi-squared	88.6904	0.000000		

Disclosure of interest The authors have not supplied their declaration of competing interest.

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EW602

Suicidal ideation during pregnancy in British Pakistani women

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Introduction Suicide is a major public health problem and one of the common causes of maternal mortality. Rates of suicide and self-harm are higher in British South Asian women compared to the majority white population. Suicidal Ideation (SI) is a significant risk factor associated with self-harm and suicide.

Objective To explore the prevalence and risk factors of SI in British Pakistani women.

Aim To identify risk factors associated with SI, in order to inform future preventive strategies.

Method This is a secondary analysis of a larger study which looked at depression during pregnancy and infant outcomes. Par-

Participants who consented (women aged 18 or over, in their third pregnancy trimester) were initially assessed for maternal depression using the Edinburgh Post-Natal Depression Scale (EPDS), with one of the questions on the EPDS being on SI. Participants who met the study criteria, were further assessed regarding socio-demographic factors, perceived social support, social adversity and isolation.

Results The rate of SI in this group of women was 8.1%, with baseline interview results suggesting that women with SI being significantly more likely to be aged 20 or less, have experience of severe life events and being less likely to have social support.

Conclusion This area of research is key to understanding SI in British Pakistani women, to better develop culturally sensitive interventions for use within this group.

Disclosure of interest The authors have not supplied their declaration of competing interest.

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EW604

Characteristics of individuals who use alcohol at the time of attempting suicide

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Objective The aim of this study was to analyze the clinical characteristics of individuals who used alcohol at the time of attempting suicide.

Methods We divided 143 individuals who attempted suicide by consuming drugs into two groups on the basis of their blood alcohol concentration level: drinker group ($n = 79$) and non-drinker group ($n = 64$). We compared epidemiological characteristics and suicidal behavior between the groups by using the Suicidal Intent Scale (SIS) and the Risk Rescue Rating Scale (RRRS). In addition, we administered the Glasgow Coma Scale (GCS) and the Acute Physiology and Chronic Health Evaluation–II (APACHE–II) to evaluate the medical lethality of the individuals who attempted suicide. We used Student's *t*-test, Pearson's correlation analysis, and multiple linear regression to analyze the data.

Results The drinker group scored lower on the SIS's planning subscale than the non-drinker group did ($P = 0.022$). The drinker group's blood alcohol concentration levels were negatively correlated with the rescue potential of their suicidal attempt ($P = 0.031$) and the APACHE-II score ($P = 0.003$). Higher blood alcohol concentration levels predicted poorer medical outcomes measured by the APACHE-II ($P = 0.004$).

Conclusion Our findings support the notion that alcohol use increases suicidal impulsivity, decreases rescue potential, and worsens medical outcomes. Therefore, suicide prevention programs need to include education and counselling about the risks associated with alcohol use.

Disclosure of interest The authors have not supplied their declaration of competing interest.

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EW605

Ethnic Immigrant suicide in a Canadian psychiatric service: A case series from 1966–1997

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Introduction Suicide is a major public-health problem in Canada. Data from 'Statistics Canada' suggests that there was a 10% increase in suicide rate between the years 1997 and 1999. Studies have found substantial differences in suicide rates (and patterns) amongst ethnic immigrants compared to Canadian-born individuals.

Aim The aim of the study was to investigate whether ethnic-immigrant patients differed from Canadian-born patients in their social, demographic, psychiatric and historical associations.

Methods All registered patients ($n = 276$) known to have completed suicide from 1966–1997 constituted the study sample. Data were extracted from the written case audits, autopsy and toxicology reports, and medical records.

Results Of the 276 known cases of suicide, 11 were Afro-Caribbean, 24 were Eastern European, 14 were Asian and 215 were Canadian-born patients. The ethnic-immigrant groups were broadly comparable to the Canadian-born group in terms of the social, demographic, psychiatric and background historical factors (except that the latter had a higher prevalence of alcohol and substance misuse). There were no significant differences between different ethnic immigrant groups themselves.

Conclusions The most salient implication of the findings are that social, psychiatric and historical associations of mentally ill patients who complete suicide are common across different ethnic immigrant groups, and as such a universal approach to mental health promotion, early identification and treatment would be similarly applicable to patients belonging to all groups.

Keywords Suicide; Ethnicity; Immigrants; Canada

Disclosure of interest The authors have not supplied their declaration of competing interest.

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EW607

Association between immigration status and inpatient psychiatric admission after attempted suicide: Results from a hospital-based observational study

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Introduction Acute suicidality or a condition after attempted suicide frequently leads patients to both voluntary or involuntary inpatient admission. Emergency room psychiatrists decide whether such patients can be treated on an outpatient basis.

Objectives To identify if immigration status is associated with the decision whether a patient needs a hospital admission.

Aims To detect social determinants of hospital-based health resource uses.

Methods A cross-sectional study including data from 323 patients treated in a general hospital's emergency room after a suicidal attempt during year 2014.