

P-724 - SUICIDAL RISK IN SENIORS WITH PSYCHIATRIC MORBIDITY - SERIOUS PROBLEM IN CLINICAL PRACTICE

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Introduction: Suicide is the most serious complication of mental disorders at all. Prevalence of suicidal risk is estimated in wide range from 5 to 15% according to the diagnostic category. Suicidal behavior in seniors is not a rarity at all - it is existing, serious and usually undiagnosed problem of clinical practice.

Objectives: The study evaluates the prevalence of suicidal risk in seniors with any mental disorder admitted to psychogeriatric ward and compares the difference between prevalence of suicidal risk in admitted seniors and suicidal risk reported by an outpatient physician who ordered hospitalization.

Methods and design: Descriptive cross-sectional study monitoring suicidal risk in seniors who have been admitted due to any mental disorder to psychogeriatric ward of Mental hospital in Kroměříž. Instruments of evaluation: Neuropsychiatric questionnaire for suicide risk assessment (M.I.N.I.). Medical records reported by outpatient physician who ordered hospitalization.

Results: Suicidal risk was detected in 14.7% of seniors with any mental disorder admitted to psychogeriatric ward when objectively evaluated by Neuropsychiatric questionnaire for suicide risk assessment (M.I.N.I.) - compared to outpatient physician's estimation of suicidal risk which has been reported in 5.9% of these seniors (significant difference at 0.01 p-level).

Conclusions: Suicidal risk in seniors with psychiatric morbidity seems to be underestimated but serious problem in routine clinical practice. Active awareness and better knowledge of suicidal risk in seniors with psychiatric morbidity is recommended to all the physicians.