



Suicidal Thoughts

Signs & Symptoms

- Writing a suicide note.
- Suicidal threats, gestures, or attempts.
- Thoughts of suicide that don't go away or occur often.



Let your doctor know if you have thoughts of suicide.

Causes

- Depression.
- Bipolar disorder.
- Schizophrenia.
- Grief. Loss of a loved one.
- A side effect of some medicines. One is isotretinoin. This is prescribed for severe acne. Some antidepressants have this effect, too. This is more of a risk in the first days to the first month they are taken.
- A family history of suicide or depression.
- Money and relationship problems.
- Increasing use of alcohol and/or drugs.
- Withdrawing from others.
- Showing rage or seeking revenge.
- Behaving recklessly.
- Talking about feeling trapped, hopeless, or in unbearable pain.

Questions to Ask

(Note: In some suicides, no warning signs are shown or noticed.)

Are any of these problems present?

- Suicide attempts or gestures. Does the person stand on the edge of a bridge, cut his or her wrists, etc.?
- Plans are being made for suicide. Has the person gotten a weapon or pills that could be used for suicide?
- Thoughts of suicide or death occur over and over. Suicide intent is stated. A suicide note is written.
- After being very depressed, the person suddenly felt better and stated something like "Now I know what I have to do," or "Now I see how to make everything better."

YES



NO

Has the person recently done any of these things?

- Repeated statements that show thoughts of suicide, such as, "I want to be dead," or "I don't want to live anymore."
- Given away favorite things. Cleaned the house. Gotten legal matters in order.

YES



NO

With thoughts of suicide or death, are any of these problems present?

- Depression or **symptoms of depression**.
- Bipolar disorder (manic-depression).
- Schizophrenia.
- Any other mental health or medical condition.

YES



NO

Flowchart continued on next page



Suicidal Thoughts, Continued

Treatment

- Emergency care.
- Treating the mental and/or physical problems that lead to thoughts and attempts of suicide. Examples are bipolar disorder and depression. (See **Depression** at www.HealthyLearn.com.)
- Counseling.
- Talking with family and friends often.



Get more information from:

HealthyLearn®
www.HealthyLearn.com

Mental Health America (MHA)
 800.969.6642
www.mentalhealthamerica.net

National Suicide Prevention Lifeline
 800.273.TALK
 (273.8255)
www.suicidepreventionlifeline.org

Have thoughts of suicide occurred after taking, stopping, or changing the dose of a prescribed medicine (this includes certain antidepressants) or using drugs and/or alcohol?

NO



Does the person thinking about suicide have other blood relatives who died from or attempted suicide?

NO



Self-Care / Prevention

For Suicidal Thoughts

- Call the National Suicide Prevention Lifeline at 800.273.8255.
- Let someone know. Talk to your doctor, a trusted family member, friend, or teacher. If it is hard for you to talk to someone, write your thoughts down. Let someone else read them.

To Help Prevent a Suicide

- Keep firearms, drugs, etc., away from persons at risk.
- Take courses that teach problem solving, coping skills, and suicide awareness.
- If you think the person is serious about suicide, get help. Watch and protect him or her until you get help. Keep the person talking. Ask questions such as, "Are you thinking about hurting or killing yourself?"
- Urge the person to call for help (e.g., his or her health care provider, a suicide prevention hotline, EMS, etc.) Make the call yourself if the person can't or won't.
- Express concern. The person needs to know that someone cares. Most suicidal persons feel alone. Tell the person how much he or she means to you and others. Talk about reasons to stay alive. Don't judge. The person needs someone to listen, not preach moral values.
- Tell the person that depression and thinking about suicide can be treated. Urge him or her to get professional care. Offer help in seeking care.