

Health care contacts of individuals with cardiac disease who died by suicide in Sweden in 2015

10. Public Health and community interventions

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Abstract text

Background Cardiac disease (CD) is a known risk factor for depression and studies show a connection with suicide. It is considered important to treat depression in those with CD both for better psychiatric health and for better outcome of the CD.

Aim To describe the health care contacts of individuals with CD who died by suicide in Sweden in 2015, and to examine to what extent depression and other mental health problems and suicidality were recognized and documented prior to death.

Method As a part of a larger project, medical records for the last two years for all individuals dying by suicide in Sweden 2015 were evaluated. We investigated the health care contacts of those with a ICD-10 diagnosis of CD (I20-25, I3, I4, I50-52).

Results People with CD had more healthcare contacts with primary care and specialist somatic care during the 24-month observation period the non-CD group. Only 18% of the individuals with CD had their last health care contact in psychiatric specialist care. At their last physician consultation depressive symptoms and/ or anxiety were recognized in 51%. Thirty-two percent received an F30-F39 diagnosis (mood disorders), 22% an F40-F48 diagnosis (Neurotic, stress related, somatoform disorders). Only 14% had a notation of elevated suicide risk. One in four of the CD group received pharmacological treatment of psychiatric problems at the last general practitioner consultation, and 4% counselling or psychotherapy.

Conclusion The individuals with CD had many health care contacts, most of which were outside of psychiatric specialist care. Symptoms of anxiety and or depression were recorded for half of them at their last physician visit, but notations of elevated suicide risk were seldom made. This suggests that primary health care and somatic specialist care are important arenas for interventions to improve recognition of mental health needs in persons with CD.