Adolescents with suicidal and nonsuicidal self-harm: clinical characteristics and response to therapeutic assessment.

Ougrin D, Zundel T, Kyriakopoulos M, Banarsee R, Stahl D, Taylor E.

Source

Department of Child and Adolescent Psychiatry, King's College London, UK. dennis.ougrin@kcl.ac.uk

Abstract

Self-harm is one of the best predictors of death by suicide, but few studies directly compare adolescents with suicidal versus nonsuicidal self-harm. Seventy adolescents presenting with self-harm (71% young women, ages 12-18 years) who participated in a randomized controlled trial were divided into suicidal and nonsuicidal self-harm categories using the Columbia Classification Algorithm of Suicide Assessment. Adolescents with suicidal self-harm were more likely than those with nonsuicidal self-harm to be young women, 22/23 (96%) versus 34/47 (72%), odds ratio (OR) = 8.33, 95% confidence interval (CI) [1.03, 50.0]; had a later age of onset of self-harm, 15.4 years vs. 13.8 years, mean difference = 1.6, 95% CI [.8, 2.43]; and used self-poisoning more often, 18/23 (78%) versus 11/47 (23%), OR = 3.43, 95% CI [2.00, 5.89]. Only those with nonsuicidal self-harm had an improvement on Children's Global Assessment Scale score following a brief therapeutic intervention, mean difference = 8.20, 95% CI [.97, 15.42]. However, there was no interaction between treatment and suicidality. There are important differences between adolescents presenting with suicidal and nonsuicidal self-harm. Suicidal self-harm in adolescence may be associated with a less favorable response to therapeutic assessment.