

Suicidal behavior among adolescents with conduct disorder—the role of alcohol dependence

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Abstract

Our aim was to investigate the association between alcohol dependence and suicidal behavior among adolescent girls and boys suffering from conduct disorder (CD). The original study sample consisted of 387 adolescents (age 12–17) admitted to psychiatric inpatient care between April 2001 and May 2005. DSM-IV-based psychiatric diagnoses and variables measuring suicidal behavior were obtained from the Schedule for Affective Disorders and Schizophrenia for School Aged Children—Present and Lifetime (K-SADS-PL). Of the total study population, 59 adolescent girls and 82 boys had CD according to DSM-IV criteria. Of all adolescents with CD, 24 (40.7%) girls and 24 (29.3%) boys were suffering from alcohol dependence. Among girls with CD, alcohol dependence increased the risk for suicide attempts up to 3.8-fold (95% CI 1.1–13.4). Among boys with CD, alcohol dependence increased the risk for life-threatening suicide attempt over nine-fold (95% CI 1.2–80.1). In addition, the risk for self-mutilative behavior was as high as 3.9-fold (95% CI 1.1–13.8) among girls and 5.3-fold (95% CI 1.1–26.5) among boys. The results indicate that, among adolescents suffering from CD, the risk of suicidal behavior is considerably increased by co-morbid alcohol dependence, which should therefore be carefully taken into account in clinical work.

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1. Introduction

Suicidal behavior of adolescents has become a major public health problem over the past decades (Fombonne,

1998). Both suicide attempts and completed suicides have increased parallelly (Apter et al., 1995). In childhood and early adolescence, completed suicide is an uncommon phenomenon that is not gender-specific.

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Later, usually after the age of 16 years, the suicide rate increases rapidly among males (Shaffer et al., 1996), while suicide attempts are more common among females (Lewinsohn et al., 2001). Suicide attempts among girls are typically performed using a non-violent method, such as poisoning. Contrary to girls, suicide attempts among boys are more lethal and, thus, more often completed (Brent et al., 1999).

It is a global phenomenon that the prevalence of conduct disorder (CD) as well as alcohol misuse is showing an increasing trend among adolescents (Keenan et al., 1999; Karam et al., 2004). Collishaw et al. (2004) found the proportion of adolescent boys and girls with conduct problems more than doubled between years 1974 and 1999. During the years 1981–1999, binge drinking has been found to have increased over three-fold among 14–18-year-old girls and to have doubled among boys (Lintonen et al., 2000).

The risk factors for suicidal behavior in youth are multifactorial and complex. Most empirical studies have shown no fundamental gender differences in risk factors for suicide attempts (Shaffer et al., 1996; Brent et al., 1999). An increased risk for suicidality among young persons has been found to be linked with many familial and external factors, such as parental psychopathology (Brent et al., 1999), disrupted family background (Shaffer et al., 1996), and physical or sexual abuse (Brent et al., 1999; Glowinski et al., 2001; Haavisto et al., 2003). It has also been reported that violent behavior towards others is a risk factor for suicidal behavior (Apter et al., 1995; Haavisto et al., 2003). Clinical depression is known to be a serious risk factor for suicide among adolescents (Marttunen et al., 1991; Glowinski et al., 2001; Haavisto et al., 2003), especially among adolescent girls (Marttunen et al., 1995; Brent et al., 1999; Lewinsohn et al., 2001), but depression is not essential prior to a suicide attempt. Other psychiatric disorders besides affective disorders have been linked with a risk of suicide attempts among adolescents, particularly conduct disorder, (Glowinski et al., 2001), alcohol abuse (Shaffer et al., 1996), and alcohol dependence (Glowinski et al., 2001). Adolescents with multiple co-morbid psychiatric conditions have an increased risk of suicidal behavior (Marttunen et al., 1991; Wagner et al., 1996; Kelly et al., 2001).

Although both alcohol use disorders and conduct disorder are well-known risk factors for suicidal behavior, research findings, especially for alcohol dependence, are still incongruous. Furthermore, studies on suicidality in association with conduct disorder and alcohol dependence in adolescents have frequently failed to take the potential gender effect into account, or the

number of adolescent girls has been too small for reliable generalization of the findings (Shaffer et al., 1996; Brent et al., 1999). Earlier studies have reported a three-fold increase in the risk of suicide attempts among girls suffering from alcohol dependence (Glowinski et al., 2001). Further, a few studies have found that conduct disorder elevates the risk of attempted suicide two- to four-fold among girls (Glowinski et al., 2001; Kelly et al., 2001) and four-fold among boys (Kelly et al., 2001). There is some evidence that co-morbid CD and alcohol dependence increases the risk for suicidal behavior among depressive girls (Wannan and Fombonne, 1998; Keenan et al., 1999).

The role of alcohol dependence in relation to suicidal behavior of adolescents who are suffering from conduct disorder has not yet been sufficiently investigated. The purpose of the present study was to examine for the first time the impact of alcohol dependence on suicide attempts and other types of suicidal behavior by gender in a population-based clinical sample of adolescent inpatients having a DSM-IV-diagnosed conduct disorder from a geographically large area in northern Finland. Our hypothesis was that alcohol dependence elevates the risk of suicidal behavior among adolescents with CD.

2. Methods

2.1. Participants

The STUDY-70 project was initiated to examine the association of various psychosocial risk factors with the outcomes of severe psychiatric and substance use disorders among hospital-treated adolescents aged 12–17 years. The basic study sample consisted of 387 adolescents (161 boys, 226 girls) admitted to Unit 70 at Oulu University Hospital, the Department of Psychiatry, between April 2001 and May 2005. The catchment area of Unit 70 covers the districts of Oulu and Lapland: all adolescents from this area in need of acute psychiatric hospitalization in closed ward are initially treated in Unit 70. The most common diagnoses of the patients in the entire sample are major depressive disorder (MDD) (41.3%, $n=160$), substance use disorders (46.8%, $n=181$), and conduct disorder (36.4%, $n=141$). The frequency of suicide attempts in the entire sample is 23.0% ($n=89$). Of the entire sample, 36.4% ($n=141$) were living in primary family (both biological parents present). The study protocol was approved by the Ethics Committee of the University Hospital of Oulu (Finland). The study sample in the present study consisted of 59 adolescent girls and 82 boys, all having a DSM-IV-diagnosed conduct disorder.

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