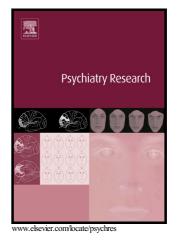
Author's Accepted Manuscript

Mental health follow-up after deliberate self-harm and risk for repeat self-harm and death

Jon Hunter, Robert Maunder, Paul Kurdyak, Andrew S. Wilton, Andrea Gruneir, Simone Vigod



 PII:
 S0165-1781(17)30879-X

 DOI:
 http://dx.doi.org/10.1016/j.psychres.2017.09.029

 Reference:
 PSY10840

To appear in: Psychiatry Research

Received date: 23 May 2017 Revised date: 28 July 2017 Accepted date: 9 September 2017

Cite this article as: Jon Hunter, Robert Maunder, Paul Kurdyak, Andrew S. Wilton, Andrea Gruneir and Simone Vigod, Mental health follow-up after deliberate self-harm and risk for repeat self-harm and death, *Psychiatry Research*, http://dx.doi.org/10.1016/j.psychres.2017.09.029

This is a PDF file of an unedited manuscript that has been accepted for publication. As a service to our customers we are providing this early version of the manuscript. The manuscript will undergo copyediting, typesetting, and review of the resulting galley proof before it is published in its final citable form. Please note that during the production process errors may be discovered which could affect the content, and all legal disclaimers that apply to the journal pertain.

ACCEPTED MANUSCRIPT

Mental health follow-up after deliberate self-harm and risk for repeat self-harm and death

Jon Hunter*^a, Robert Maunder^a, Paul Kurdyak^{a,b}, Andrew S. Wilton^b, Andrea Gruneir^c,

Simone Vigod^{a,b}

JSCrile

a - University of Toronto Department of Psychiatry, Toronto, Ontario, Canada

b - Institute for Clinical Evaluative Sciences, Toronto, Ontario, Canada

c - University of Alberta, Edmonton, Alberta, Canada

Corresponding author contact information:

*Jon Hunter:

Jon.Hunter@sinaihealthsystem.ca 416 586 4800 x4557 600 University Ave Toronto, ON M5G 1X5

Abstract

Morbidity and mortality after deliberate self-harm (DSH) are high, so mental health care shortly after DSH is recommended. Using population-level health data we determined the association between a mental health visit and risk for repeat DSH with or without intensive care unit (ICU) admission or all-cause death. Over two years, 23,140 individuals had emergency department treatment for DSH. Within 30 days, 10.7% had a family physician mental health visit, 17.1% visited a psychiatrist, 3.6% visited both and 68.6% neither. Individuals who received mental health follow-up had more chronic and severe mental illness and higher acuity DSH. Over five years, repeat DSH occurred in 4,792 (20.7%). Repeat DSH was more common in those who had a mental health visit within 30 days. Adjusting for baseline characteristics attenuated these differences. Similar results were found for DSH with ICU admission (5.0%) and death (7.6%). More frequent follow-up was not associated with better outcome. Timely access to mental health

دريافت فورى 🛶 متن كامل مقاله

- امکان دانلود نسخه تمام متن مقالات انگلیسی
 امکان دانلود نسخه ترجمه شده مقالات
 پذیرش سفارش ترجمه تخصصی
 امکان جستجو در آرشیو جامعی از صدها موضوع و هزاران مقاله
 امکان دانلود رایگان ۲ صفحه اول هر مقاله
 امکان پرداخت اینترنتی با کلیه کارت های عضو شتاب
 دانلود فوری مقاله پس از پرداخت آنلاین
 پشتیبانی کامل خرید با بهره مندی از سیستم هوشمند رهگیری سفارشات
- ISIArticles مرجع مقالات تخصصی ایران