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Out of the Shadows: Suicide: The hidden killer

30,000 people kill themselves each year, yet suicide is taboo

By Melissa McRobbie / Daily News Staff

Nearly everyone has been affected by suicide, personally or indirectly, but few speak openly about it.

It makes headlines if done publicly or by a celebrity such as grunge rocker Kurt Cobain, then quickly fades from the news.

Actor Owen Wilson's apparent suicide attempt last month was the latest such story, fueling a national media feeding frenzy.

In recent months, the local spotlight turned on the suicide deaths of a Stanford student, a Menlo-Atherton High School student and a San Jose Mercury News veteran journalist. Suicides committed on Caltrain tracks also draw some attention, particularly when they result in long train delays.

But of the 30,000 people a year nationwide who the American Foundation for Suicide Prevention says take their own lives, almost all do so behind the scenes. Many suffer silently for years before committing suicide, and often those left behind say they were surprised to learn their loved ones were in such distress.

Society's reluctance to talk about suicide and mental illness is one of the main obstacles to saving lives, experts say. Confronting these issues head-on will help people with suicidal thoughts realize they're not alone, understand why they're feeling the way they are, and get the help they need.

In San Mateo County, 36 people committed suicide from the beginning of this year to Sept. 4, said Karen Rodgers, management analyst for the county coroner's office. Last year the county recorded 50 suicides, and between 1996 and 2006 a total of 687 people took their lives in the county, an average of 62 per year.

In Santa Clara County, 76 people killed themselves between Jan. 1 and Sept. 6 of this year, according to county medical examiner's office records.

Last year 110 suicides were recorded in the county, and from 2000 to 2006 there were 840 suicides, or an annual average of 120.

Suicide cuts across all ages and backgrounds, said Dr. Paula Clayton, medical director for the American Foundation for Suicide Prevention.

The suicide rate is highest in very elderly men. It's the third leading cause of death in adolescents up to 19 and the second leading cause of death in young adults," Clayton said. "It's a very prominent cause of death, and no more so in the young than in the old."

Women attempt suicide twice as often as men - every 78 seconds, according to the American Foundation for Suicide Prevention. Men complete suicide four times as often, however, possibly because they tend to be more aggressive and impulsive than women and more likely to abuse drugs or alcohol, Clayton said.

Women are more likely than men to have mood disorders, and that is believed to contribute to their higher rate of attempted suicide.

Though suicide cuts across all age, gender and ethnic groups, there is one thing most suicidal people share: 90 percent have a psychiatric disorder, usually major depression, Clayton said.

Major depression is defined as when five or more symptoms of the disorder last at least two weeks, according to the Medline Plus encyclopedia, a service of the National Institutes of Health and the U.S. National Library of Medicine.

Symptoms of depression include changes in sleep patterns, eating habits and fatigue; a persistently sad or irritable mood; feelings of guilt, worthlessness or hopelessness; a loss of interest in activities once enjoyed; and recurrent thoughts of death or suicide.

Experts point out that although most depressed people are not suicidal, the majority of suicidal people are depressed.

Because depressed or mentally ill people tend not to seek help, getting them treatment can be difficult, Clayton said. There is a stigma associated with seeking treatment for depression.

"When you're feeling sick from cancer or heart disease, you certainly call your doctor first, and yet with suicide, we don't think of (treatment) as a solution," Clayton said. "I think it's just that they don't recognize it as a serious illness."

The American Foundation for Suicide Prevention has started holding "Out of the Darkness" walks across the country, which serve both as fundraisers and as a means of shining a bright light on a taboo topic. Money raised from the walks goes toward national suicide prevention efforts.

In July of last year, a team of three Caltrain employees participated in a 20-mile, overnight "Out of the Darkness" event in San Francisco as part of the rail agency's campaign to prevent suicides along its tracks.

"The main thing is that we hope to get the message out that this is serious, and you need to recognize it in yourself and others," Clayton said.

If you recognize signs that someone may be suicidal, it's OK to talk to them about it, Clayton and local suicide prevention experts say.

"If you're ever in doubt, just ask 'I worry about you, you seem depressed,' something like that," Clayton said.

Most suicidal people show warning signs such as increased alcohol or drug use, unusual impulsiveness, sudden rage or anger, or giving away prized possessions, according to the American Foundation for Suicide Prevention.

It is a myth that talking to someone about suicide will increase that person's chances of committing the act, said Amanda Freeman, program manager at **San Mateo County's Crisis Center, run by the private nonprofit Youth and Family Enrichment Services**. The center provides an array of services including a crisis line, a youth Web site and a support line for parents.

"When people call and we ask them if they want to commit suicide or if they're planning to commit suicide, they're actually relieved that someone finally asked," Freeman said.

Christine Poremski, director of development and marketing at Crisis Center, agreed that talking is crucial. "That is definitely the part that cannot be overemphasized, rather than hoping it'll go away, hoping that somebody else will do something," she said.

If a person claims to be suicidal, it's OK to ask direct questions such as "Do you have a plan?" or "How are you going to do it?" Poremski said.

"By asking those questions, that's when you start to engage the person," she said.

Dr. Nancy Pena, director of mental health for Santa Clara County, said there is still a significant amount of shame associated with talking about mental illness and suicide, which is a major roadblock for those working in suicide prevention.

"The more we can discuss it and sort of normalize the fact that many people on a daily basis experience emotional distress - and many will actually have a mental illness ... the better off our society is going to be," Pena said.

Sept. 9-15 is National Suicide Prevention Week, according to the American Association of Suicidology.

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