The Urgent Need for Additional Suicide Prevention Measures among Men in the United States of America

The Editor

Sir,

In the United States of America (USA), suicide prevention measures have been effective, causing a recent decline in annual suicide rates (1), but suicide rates by gender must be studied in detail over the long term and once these trends are discerned they must be linked to additional suicide prevention measures in the future. Thus, in this report, we examined annual suicide rates by gender in the USA for the 20-year period since 1981 based on a special report on vital statistics assembled by the Ministry of Health, Labour and Welfare and we calculated the annual ratio of male/female suicides. The report also studied suicide prevention measures that should be urgently examined in the USA in terms of aspects like previously reported contexts for suicide.

During the period studied, annual suicide rates among men went from 20.6 per 100 000 population (1986) to 17.1 (2000). Annual suicide rates among women went from 5.8 per 100 000 population (1981) to 4.0 (2000). This indicates that rates for both men and women have tended to decline. The annual ratio of male/female suicides went from 3.22 (1981) to 4.50 (1995) and this ratio has remained above four since 1988. The annual ratio of male/female suicides has been higher in recent years than in 1981. In other words, annual suicide rates for both men and women have tended to decline but the ratio of male/female suicides has tended to be higher than it was in 1981. Thus, further measures must be taken to promptly reduce the suicide rate among men. A recent report on the contexts for suicide in the USA cited societal problems like mental illness, physical illness, unemployment and divorce (2-4). The crucial step in dealing

with those problems is for the medical establishment, administrative bodies, police, communities and the general public to each examine measures that they can implement and actively cooperate with related bodies when necessary. Suicide prevention measures must be promptly promoted particularly among men.

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REFERENCES

- O' Hara MW, Gorman LL, Wright EJ. Description and evaluation of the lowa Depression Awareness, Recognition, and Treatment Program. Am J Psychiatry 1996; 153: 645–9.
- Gunter TD, Arndt S, Wenman G, Allen J, Loveless P, Sieleni B et al. Frequency of mental and addictive disorders among 320 men and women entering the lowa prison system: use of the MINI-Plus. J Am Acad Psychiatry Law 2008; 36: 27–34.
- Goodwin RD, Marusic A, Hoven CW. Suicide attempts in the United States: the role of physical illness. Soc Sci Med 2003; 56: 1783–8.
- 4. Inoue K. The correlation of the suicide rates with the rates of unemployment and divorce in the USA during 17 years. Am J Foren Med Path [in press]