A new brief scale to assess suicidality: Scale for impact of suicidality-management, assessment and planning of care (SIS-MAP- brief scanner)

Amresh Srivastava, Western University
Megan Johnston, University of Toronto
Miky Kaushal, Western University
Robbie Campbell, Western University
Charles Nelson, Western University
A New Brief Scale to Assess Suicidality: Scale for Impact of Suicidality-Management, Assessment and Planning of Care - Brief Screener (SIS-Map-Brief Screener)

Amresh Srivastava MD MRCPSych, FRCPc, Megan Johnston PhD, Miky Kaushal MD, Robbie Campbell MD FRCPc, Charles Nelson PhD, Regional Mental Health Care.St.Thomas & London, London Ontario, Canada

Part A: Construction of the Scale: Objective and Background

The scale was based upon a multidimensional concept of Risk: We believe Risk is a multi-dimensional construct consisting of 8 domains.

1. Mechanism of interaction between Risk and Protective factors, its constituents and constructs are not known.
2. Available instruments: Do not capture comprehensive nature of risk.
3. Furthermore, a shorter version of tools are required for emergency room and primary care.
4. Primary objective of this study was to create a brief & valid instrument for decision-making in a short period of time.

We further believe that 'Absolute' Risk appears when an individual's resilience is compromised by various risk factors, making an individual more vulnerable.

We completed an assessment of 79 (Mean age 38.26 years SD 14.78, Range 19-75) patients out of 95 subjects. These were randomly selected from inpatient and outpatients facilities at EMIC London, Ontario. Data was analyzed by SAS. 37 patients were male and 42 females 44 inpatient & 35 from outpatients

Risk arises from a combination of State and Trait Risk Interacting in a Complex Manner

Risk factors

- Family history
- Clinical judgement
- Personality
- Psychosocial
- Environment
- Comorbidity
- Protective

A hypothetical sketch

We analyzed the 24 item scale SIS-Map-Brief Screener developed from the original 108 item scale.

The measurement is called RISK INDEX, which was defined after deducting score of protective factors from total score, used for assessment and prediction of risk of State and Trait Risk interacting in a complex manner.

Part B: Examinining Clinical Merits of the Scale: Risk Index

A.4. Common RISK FACTORS identified from the scale

- Low level of resilience (0.111)
- Environmental (0.45)
- Social (0.62)
- Physical (0.45)
- Psychological (0.27)
- Comorbidity (0.133)
- Protective (0.27)
- Event (0.62)
- Severity of Depressive Symptoms (0.45)
- Problem with friends or neighbor or relatives (0.62)

Severity of suicide risk was positively correlated with Risk Factors like:

1. Low level of resilience (r=0.265, p<0.001)
2. Duration of illness (r=0.334, p<0.05)
3. History of Physical Assault (r=0.27, p<0.03)
4. Problem with friends or neighbor or relatives (r=0.413, p<0.04)

Conclusions

1. SIS-Map-Brief Screener appears to be a clinically useful tool for assessment of suicide behaviour for deciding planning for care.
2. Most frequent responses, significant risk factors and Score on Risk Index together can give better idea about risk for suicide, when assessment in required to be completed in a short time period.
3. A Score of Risk Index of 9 and more suggests a need for hospitalization. A score of 7 and 8 indicates need of caution in clinical judgement.
4. Future research in this area may find more precise pathways for decision making in management of suicide.

Contact: dr.amresh@gmail.com

Risk was classified after deducting score of Protective factors from total score, used for assessment and prediction of risk of State & Trait Risk interacting in a complex manner

Future research in this area may find more precise pathways for decision making in management of suicide.

A.3. SISMAP: mean value of subsdomains

A.4. Common FACTORS identified from the scale

- Low level of resilience (0.111)
- Environmental (0.45)
- Social (0.62)
- Physical (0.45)
- Psychological (0.27)
- Comorbidity (0.133)
- Protective (0.27)
- Event (0.62)
- Severity of Depressive Symptoms (0.45)
- Problem with friends or neighbor or relatives (0.62)

Severity of suicide risk was positively correlated with Risk Factors like:

1. Low level of resilience (r=0.265, p<0.001)
2. Duration of illness (r=0.334, p<0.05)
3. History of Physical Assault (r=0.27, p<0.06)
4. Problem with friends or neighbor or relatives (r=0.413, p<0.04)

Conclusions

1. SIS-Map-Brief Screener appears to be a clinically useful tool for assessment of suicide behaviour for deciding planning for care.
2. Most frequent responses, significant risk factors and Score on Risk Index together can give better idea about risk for suicide, when assessment in required to be completed in a short time period.
3. A Score of Risk Index of 9 and more suggests a need for hospitalization. A score of 7 and 8 indicates need of caution in clinical judgement.
4. Future research in this area may find more precise pathways for decision making in management of suicide.

Contact: dr.amresh@gmail.com