



SUICIDAL THOUGHTS IN LATER LIFE

“Last year, I felt like there was no point of living another day and there was nobody who would miss me if I wasn’t here. Nobody was more surprised than me when I started feeling better. Getting help from my doctor and psychotherapist made a difference.” – Abner, 78-year-old retired dentist

Suicidal thoughts can happen to anyone, with older adults being especially vulnerable. Some older adults with suicidal thoughts experience intense, unbearable pain and also find it hard to imagine any relief in sight. Older adults with strong feelings of hopelessness may not realize that things can get better with professional help. Even for problems that you feel have no solution, it is never necessary to resort to suicide. Many treatment options are available. Reading this handout is an important first step to getting help.

Why Do Some Older Adults Consider Suicide?

Many older adults with suicidal thoughts want desperately to eliminate the unrelenting emotional or physical pain they are experiencing. If you are suffering from overwhelming pain that you feel is unmanageable, there is a strong possibility you may be depressed.

Life-threatening depression cannot be easily resolved on your own. Depression is an illness, like cancer or diabetes, which results from a chemical imbalance in your body. Depression can be a life long illness or may be triggered by unfortunate events such as the death of a loved one, a serious illness, chronic pain, change in social roles (such as retirement or becoming a caregiver) or being a victim of abuse or crime. Alcohol and drug dependencies can also make people more vulnerable to depression and the feeling that life is no longer worth living. If not dealt with, untreated depression can magnify and can lead to suicidal thoughts that, in some cases, result in suicide.

What Suicidal Warning Signs Should I Be Aware Of?

A person who is contemplating suicide may or may not notice if he or she is experiencing dangerous warning signals. Experiencing any of the following symptoms does not mean you are suicidal, but several of these signs may be an indication that you need help:

- **Emotional Signs or Symptoms**
 - Feeling hopeless, unloved, anxious, or worthless
 - Feeling angry about the events leading up to your suicidal thoughts
 - Feeling guilty for not being able to make things better
 - Experiencing dramatic mood changes
 - Not deriving pleasure from, or losing interest in activities, hobbies, or socializing with friends
- **Behavioral Signs or Symptoms**
 - Giving away personal items and saying good-bye to loved ones
 - Getting personal affairs in order, e.g. finances, care of a pet
 - Acquiring a weapon or lethal amounts of medication
 - Death, dying or suicidal poems, notes, or journal entries
 - Taking unnecessary risks; being reckless and/or impulsive
 - Neglecting physical appearance
- **Mental Signs or Symptoms**
 - Unable to concentrate or make decisions
 - Talking about or seeming preoccupied with death
 - Constant thoughts of death or hurting oneself
 - Statements like:
 - “I wish I were dead.”
 - “I can’t take this life anymore.”
 - “I mess up everything I do.”
 - “You would be better off without me.”
 - “There is no hope.”
 - “Things will never get better.”
 - “I’m not sure I’ll be around.”
- **Physical Signs or Symptoms**
 - Poor sleeping patterns, nightmares
 - Loss of appetite or increased appetite
 - Lack of energy or hyperactivity
 - Persistent headaches, stomachaches, or chronic pain

Why Are Older Adults Hesitant To Talk About Suicidal Thoughts?

Older adults often are hesitant to talk about their feelings of depression and thoughts of suicide due to a variety of reasons including:

- **Misconceptions.** Older adults, as well as family and friends, often believe that depression is a normal part of aging. As a result of this misconception, friends and professionals do not always look or listen for warning signs when an older person may be feeling desperate.
- **Stigma.** Many older adults hide their true feelings and thoughts from their physician, family, and others because they are embarrassed, fear they will be negatively judged.
- **Ageism.** Our society tends to value younger people more than older adults. Some older adults are hesitant to share their thoughts of suicide, erroneously thinking that nobody will care about their suffering or their future.

How Can I Tell If I Am in Immediate Danger?

You are in immediate danger if you have current suicidal thoughts, a history of attempts or if you have a plan to carry out your suicidal thoughts. Having a plan means you are very serious about committing suicide. The more detailed the plan, the greater the risk. If you have everything you need to carry out the plan such as a weapon or pills, or think you might jump from a building, you are in imminent danger. Get help immediately! You can call 911, a local suicide hotline, your primary care doctor, or even walk into an emergency room.

What Should I Do If I Am Having Suicidal Thoughts?

Remember that while you may feel as if the depression and suicidal thoughts will never end, depression is a temporary condition and suicide can be prevented. By doing the following you will be making strides to take control of your life and improve your situation:

- **Get Help and Do Not Wait.** Start by talking to someone you trust as soon as possible, the sooner the better. It should be someone who is compassionate, preferably someone with knowledge of depression—perhaps a professional, like your doctor or a therapist, someone at a suicide hotline, or a family member or friend. The longer you wait, the

more chance you have that your depression and suicidal thoughts will intensify.

- **Be Honest About Your Feelings.** Choose a person with whom to discuss your personal feelings. Make sure you directly say how you feel. Keep in mind that others cannot tell how you are feeling inside or what you are thinking just by looking at you. Also, family members and those close to you may not want to believe you would hurt yourself. Being open, honest, and communicative is the best way to get help. *If the first person you tell is not helpful to you, tell someone else until you get the help you need.*
- **See a Physician for a Physical Examination.** If you are having suicidal thoughts, you need to be examined by your physician. Symptoms of depression should be carefully assessed by your physician to make sure there is not a physical condition or side effect of a medication that is causing your depressive symptoms.

If depression is diagnosed, your physician may prescribe an antidepressant medication, which can be a safe and effective treatment. To make sure antidepressant medications are working, properly, physicians need to monitor you at regular intervals. Older adults on antidepressant medication are likely to function better, be able to enjoy things they used to enjoy, and feel happier overall. Antidepressant medications may be needed for a few months or for some, a lifetime. When depression is severe or resistant to other treatments, electro-convulsive therapy (ECT) is an effective treatment option that can work well for older adults. Today's ECT is medically proven and safe.
- **Participate in Psychotherapy/Join a Support Group.** By working with a psychotherapist on a regular basis, you may be able to alleviate some of your feelings of sadness and hopelessness. Psychotherapy is often used along with an antidepressant medication for the best results. Psychotherapy can help you find different ways of looking at your problems and can help you determine the most appropriate method of dealing with your suicidal thoughts. A support group can help you feel connected to others and help change the way you perceive your life by learning from others and sharing your experiences.
- **Whatever You Are Worried About, Remember That You May See It Differently after Treatment for Depression.**
- **Stop Using Alcohol or Drugs.** Because alcohol and certain drugs are geared to depress the body's physiological system, they can

combine with a depressed mental state to make you even more susceptible to thoughts of suicide. Using alcohol and drugs can impair your ability to think clearly and rationally, decrease the effectiveness of medication and enhance impulsive behavior.

- **Remove Dangerous Objects or Weapons from Your Home.** When you are having suicidal thoughts, it is important that you remove any weapons from your home so that you are less likely to use them impulsively. Keep only small doses of your medication supply at home and ask someone else to keep the rest.
- **Spend Time with Others/ Get Involved in Activities.** Avoiding others is fairly typical of people who are depressed and this behavior can foster increased negative thoughts. Spending time with other people who aren't depressed can lift your mood, help you feel better and help you develop a support network. Finding activities or hobbies that you enjoy can also bring you comfort when you become dissatisfied with events in your life.

As you begin to receive help your pain will begin to lessen. You will likely discover that life is worth living and that it feels good to reconnect with your family, friends, and community.

Where To Get Help

National Resources

National Hopeline Network. The Network links crisis centers certified by the American Association of Suicidology (AAS) under one easy to remember, toll-free number: 1-800-Suicide. Each call is quickly transferred to a participating crisis center nearest the caller's location.

Phone: 1-800-784-2433. Web site: www.hopeline.com/4/faq.asp

National Suicide Prevention Lifeline. A 24-hour, toll free hotline funded by the federal government that will direct callers to a nearby crisis center. The Lifeline will accept calls from non-English speakers.

Phone: 1-800-273-8255(TALK).

Web site: www.suicidepreventionlifeline.org

Center for Elderly Suicide Prevention. A 24 hour toll free friendship line to receive emotional support, crisis intervention, and information and referrals. Phone: 1-800-971-0061.

Web site: www.ioaging.org/programs/cesp/cesp.html

National Mental Health Association. This non profit organization has a Resource Center providing information and referrals for any issue pertaining to mental health and mental illness and serves people seeking mental health information for themselves, family members or friends.

Phone: 1-800-969-6642.

Web site: www.nmha.org

New York City Resources

LIFENET. This community service operates a hotline 24 hours per day/7 days per week providing mental health and substance abuse services.

Phone: 1-800-543-3638 for English. 1-877-298-3373 for Spanish.

1-877-990-8585 for Mandarin, Cantonese and Korean.

Web site: www.mhaofnyc.org/2lifenet.html

The Samaritans of New York, Prevention Hotline. This is a local branch of an international humanitarian non-profit organization devoted to preventing suicide. The hotline is funded by the NYC/NYS Departments of Mental Health and operates 24 hours, seven days a week.

Phone: 1-212-673-3000. Web site: www.samaritansnyc.org

New York City HELPLINE Telephone Hotline. This New York suicide hotline provides immediate and caring responses to the city's residents who are troubled or in crisis. Trained volunteers talk with callers about their situations and define and explore their options. They offer free, current information and community referrals. The crisis hotline operates 24 hours a day, seven days a week. Phone: 1-212-532-2400.

Web site: www.helpline.org

CornellCARES Provider Directory. This is a user-friendly online directory of New York City Medicare mental health providers. It is easy to use and lists over 1000 professionals who specialize in improving the mental health of older New Yorkers including suicide.

Web site: www.CornellCARES.com

This resource provides brief, general information about this health care topic. It does not take the place of specific instructions you receive from your health care providers. For answers to other questions consult your physician or other health care provider.

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