young old (Y-O): 60–74 years, old-old (O-O): >75 years. The information was obtained by interviewing the subjects and caregivers. Chi-square test, ANOVA and logistic regression analysis were performed.

**Results:** Of the 384 individuals, 56.4% (N=214) were MA; 38.4% (N=100), Y-O and 18.2% (N=70) O-O. Proportion of living alone was higher in O-O group compared than other groups. The use of alcohol at the time of suicide attempt was more often in MA group compared than other groups. While interpersonal problem was major motivation in MA group, physical illness was in the elderly. Although O-O group had a higher rate of depression, they tend not to receive psychiatric evaluation. Logistic regression analysis revealed that O-O were less likely to use alcohol at the time of suicide attempt and to receive psychiatric evaluation at ER than Y-O.

**Conclusion:** Characteristics of elderly suicide attempts are different from those of suicide attempts in middle age group. Specific therapeutic approaches or preventive strategies for the elderly may be warranted.

**PS276**

Effect of alcohol use on the intent and lethality of suicide attempts: Assess the Suicidal Intent Scale(SIS) and the Risk-Rescue Rating Scale(RRRS)

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**Abstract**

**Background:** Suicide is among the leading causes of death worldwide. Although alcohol drinking is a well-known risk factor for suicide attempts, the impact of alcohol use on the intent and lethality of suicide attempts has rarely been studied. The aim of this study is to clarify the role of alcohol use disorder and acute alcohol consumption in suicide attempts.

**Methods:** Data on 1166 suicide attempters who visited in the emergency center was gathered in a major Korean city over 7-year period. Suicide attempts were categorized according to a diagnosis of alcohol use disorder and acute alcohol consumption at the time of the attempt. The intent and lethality of suicide attempts were evaluated by two validated questionnaires, Suicidal Intents Scale(SIS) and Risk-Rescue Rating Scale(RRRS).

Demographic features of the suicide attempters and clinical characteristics of the suicidal behavior were comprehensively evaluated. The variables were compared by Chi-square statistics and analysis of covariance(ANCOVA).

**Results:** Among the 1166 cases, suicide attempters were categorized into three groups: Alcohol use disorder group(AUD, n=339, 29.07%), Acute alcohol use group(AAU, n=362, 31.04%) and No alcohol use group(NAU, n=465, 39.89%). The mean Carbohydrate-deficient transferrin (CDT) value, a biomarker for long-term alcohol consumption was highest in AUD group(2.06 ± 2.21, p=0.032). For the Suicidal Intents Scale(SIS), AUD marked lowest scores(7.20 ± 5.57, p=0.016). For the Risk-Rescue Rating Scale(RRRS), AUD showed highest rescue score within groups and AAU showed higher rescue score than NAU(12.53 ± 2.11 vs 12.52 ± 2.14 vs 12.19 ± 2.10, p= 0.026).

**Conclusions:** AUD groups were more likely attempted suicide impulsively with lower suicidal intent. When alcohol was consumed in suicide attempts by individuals with or without alcohol use disorder, high-rescue methods were used with lower lethality. Consuming alcohol might have different functions in suicide attempts and patients with a diagnosis of alcohol use disorder should be considered a high-risk group for suicidal behavior in general.

**PS277**

The Effect of Case Management on Aftercare Adherence for Suicide Attempters Attending to Emergency Department: A Quasi-Experimental Study

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**Abstract**

**Objective:** Non-compliance increased risk of repetition of suicidal behavior for high-risk group of treating at hospital after attempted suicide. This study was performed to investigate the effect of case management intervention on aftercare adherence for those suicidal attempters discharging from emergency department.

**Methods:** This was a quasi-experimental study with recruited all suicide attempters before (control group) and after (intervention group) implementing the case management in a general hospital. The intervention of case management was repetitive telephone contacts and/or face-to-face interviews. All data was analyzed by SPSS 21.0 and the aftercare attendance was investigated by logistic regression.

**Results:** The control group, 426 participants, had average age of 34.81 years (SD 12.04) with a female to male ratio of 4.0. The intervention group, 230 participants, had average age of 34.82 years (SD 13.27) with a female to male ratio of 3.3. The intervention group had significant difference in aftercare attendance comparing to control group, especially in female gender and the age group of younger than 54. In the intervention group, face or face-phone contact had significant difference in aftercare attendance comparing to not able to intervention (OR=3.57, [95% CI, 1.34–9.55], p=0.011).

**Conclusions:** The intervention of case management improved aftercare adherence for suicidal attempters. Meanwhile, face or face-phone contact model of case management had better aftercare attendance. However, case management intervention was still unable to enhance aftercare on male and older than 55-year-old patients. Further research and service development are needed to focus on the insufficiency.

**PS278**

Association of testosterone levels and future suicide attempts in women with bipolar disorder:

A prospective study

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**Abstract**

**Background:** Considerable evidence suggests that testosterone may play a role in the pathophysiology of mood disorders in females. This is the first prospective study to examine whether blood testosterone levels predict suicide attempts in females with bipolar disorder. We hypothesized that testosterone may be related to the course of bipolar illness and suicidal behavior in