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 analyses 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=456, 39.89%). The mean Carbohydrate-deficient transferrin (CDT) value, a biomarker for long-term alcohol consumption was highest in AUD group(2.06 ± 2.11, p=0.032). For the Suicidal Intents Scale(SIS), AUD marked lowest scores(7.20 ± 5.579, p=0.016) on suicidal intents scales with p=0.032). For the Suicidal Intents Scale(SIS), AUD marked lowest scores(7.20 ± 5.579, p=0.016). For the Risk-Rescue Rating Scale(RRRS), 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 suicidal 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
women with bipolar disorder based on observations that testosterone may affect mood and suicidality. We examined whether testosterone is related to the course of illness at baseline and whether blood testosterone levels predict suicide attempts on follow-up.

**Methods:** Females with a DSM-IV diagnosis of a bipolar disorder in a depressive or mixed episode with at least one past suicide attempt were enrolled. We limited this study to previous suicide attempters in order to have a higher risk group for suicide attempt on follow-up and thus sufficient power to allow detection of a relationship to testosterone and clinical variables. Demographic and clinical parameters were assessed and recorded. Plasma testosterone was assayed using a double antibody radioimmunoassay procedure. Patients were followed up prospectively for up to 2.5 years. The SPSS 19 statistical program was used to perform statistical analyses.

**Results:** At baseline, testosterone levels positively correlated with the number of past major depressive episodes (r=0.353, p=0.014) and suicide attempts (r=0.408, p=0.003) but negatively with the Reasons for Living Scale scores (r=-0.373, p=0.014). We did not find a correlation between testosterone levels and Brown Goodwin lifetime aggression scale scores (r=0.126, p=0.395), the number of manic episodes (r=0.077, p=0.605), current severity of suicide ideation (r=0.133, p=0.425), depression (r=0.027, p=0.850) or hopelessness (r=0.001, p=0.997). The Cox proportional hazards regression analysis demonstrated that higher baseline testosterone levels predicted suicide attempts during the follow up period: HR=169, Wald=6.575, df=1, p=0.01, which means an increase in the testosterone level by 0.1 ng/ml (10 ng/dl) increases the probability of suicide attempt 16.9 times.

**Discussion:** This prospective study shows that testosterone levels may predict suicide attempts in women with bipolar illness. The results of this study also suggest that testosterone levels may be related to the course of bipolar disorder. Our results are consistent with observations suggesting that testosterone influences mood and behavior in females. For example, an association between blood or saliva testosterone levels and depressive symptoms in women was observed by several research groups. Possibly, depression mediates the relation between testosterone and suicidality.

**PS279**

**Completed suicides in 20 years in Lima**

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**Abstract**

**Objective:** Study socio demographic profile of complete suicides in patients seen in an Mental Health Institution along last 20 years in Lima.

**Method:** Use of Psychological Autopsy Protocol, review of Clinical History, relatives and friends’s testimonies, newspaper notes and Internet and social net information.

**Summary Of Results:** They were reported 38 patients with completed suicide: 19 male (50 %), 19 female (50 %), age rank from 18 to 82 y.o. Most prevalent age was 18 to 33 y.o: 52.6 %. Almost 40 % were single, and separated 31.5 %; 44.7 % with secondary school level, being student 31.5 %. The principal diagnosis was Major Depression:57.9 %, the first motivation was sentimental or conjugal conflict: 34.2 %, the two major lethal methods were hanging:52.6 % and jumping:18.4 %. Suicide patients were in treatment at least 1 to 5 years:44.7 %, and recorded more than 3 previous suicide attempt:52.6 %. At least 52.6 % was hospitalized once. A final letter or note was found in 44.7 %, and 55.3 % of them verbalized suicide intention to their Physician.

**Conclusions:** A profile of patients who completed suicide, seen in this trial, was: gender alike (in General Population (GP) the proportion is 2Male/1 female), mostly young, single or separated with sentimental trouble, Major Depression as first diagnosis in almost 60 % of cases like seen in GP. The principal method was hanging. The second was jumping which is fourth in GP. Also, more than a half of patients made at least 3 suicide attempts, and almost a half received treatment and hospitalized. Finally, almost all communicated their intention either by writing or talking also to their own Psychiatrist.

**PS280**

**Dual pathology and suicide attempt in Emergency Room, 2010–2012**

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National Institute of Mental Health, Peru

**Abstract**

**Objective:** To study incidence of dual pathology in patients with suicide attempt seeing at Emergency Room (ER) in a Peruvian Mental Health Institute during a tri-annual period.

**Methods:** A descriptive and longitudinal trial, assessing patients at ER with suicide attempts by means of clinical evaluation according DSM IV-RT criteria for establish clinical diagnosis, as well as an instruments for suicide attempt.

**Results:** From a total of 670 patients who presented suicide attempt, 100 of them (14.9 %) were diagnosed with dual pathology: female 79 (79 %), male:21 (21 %) .Age range was 18 to 78 years old. The principal conditions of duality were as follows: Depressive disorders and alcoholism: 61 (61 %), Depression and benzodiazepines: 17 (17 %), Depression and psychoactive substances: 6 (6 %), Bipolar disorder and alcoholism: 10 (10 %), Schizophrenia and alcoholism: 3 (3 %), and Anxiety disorders and alcoholism: 3 (3 %).

**Conclusion:** In this trial, it was found almost 15 % of Dual Pathology in patients with suicide attempt, being Alcoholism the major component in Depression, Bipolar, Schizophrenia and Anxiety Disorders, it is 77 % of sample, mostly in depressive states, also as a relevant condition related to suicide attempt. It is important to take a look to Benzodiazepines as a second condition for suicidal behavior.

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**PS281**

**Lifetime suicidal ideation and attempt in community adults with full major depressive disorder versus only sustained depressed mood**

**Running title:** Suicide in MDD and depressed mood

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_How to cite this article:_

Yoo HJ, Hong JP, Cho MJ, Fava M, Mischoulon D, Heo JY, Kim KW, Jeon HJ