Suicidality in pre-adolescence and early adulthood is associated with psychosocial and psychiatric problems in young adulthood


Do episodes of suicidal behaviour or thoughts in pre-adolescents and mid-adolescents have the same psychosocial and psychiatric outcomes in early adulthood as enduring or current suicidality?

**METHODS**

**Design:** Prospective cohort study.

**Follow up period:** 7 years.

**Setting:** Zurich, Switzerland, 1994–2001.

**People:** 102 pre-adolescents and adolescents selected from 618 participants the Zurich Adolescent Psychology and Psychopathology Study (ZAPPS; a stratified randomised sample of school children).

**Risk factors:** Participants were assessed using the Youth or Young Adult Self-Report (YASR) questionnaires at baseline, 3 year follow up, and 7 year follow up. Participants were stratified into risk groups according to the presence of suicidal thoughts or behaviour at pre-adolescence only (n = 21), adolescence only (n = 22), young adulthood only (n = 21), or in both adolescence and young adulthood (n = 17, enduring risk group). A control group of 21 participants with no history of suicidal thoughts or behaviour were age and gender matched to the young adulthood risk group.

**Outcomes:** Behavioural and emotional problems, and psychiatric diagnoses in young adulthood (7 year follow up). The problem behaviour section of the Young YASR was used to assess behavioural and emotional problems (a higher total score reflects greater problems). The Munich-Composite International Diagnostic Interview (M-CIDI) was used to assess DSM-IV psychiatric diagnoses.

**MAIN RESULTS**

Young adults with current or enduring suicidal thoughts and behaviour had the greatest behavioural and emotional problems (total YASR score: 63.96 enduring risk group vs 60.19 young adult risk group vs 37.81 adolescent risk group vs 31.82 pre-adolescent risk group vs 21.34 control group; p < 0.001). Psychiatric disorders were common in all young adults who had experienced suicidal thoughts and behaviour, but were especially so in those who had pre-adolescent, current or enduring suicidal thoughts and behaviour (AR for any DSM-IV psychiatric disorder: pre-adolescent risk group 92%; adolescent risk group 59%; young adult risk group 86%; enduring risk group 88%; control group 10%; p < 0.001). The most common psychiatric disorders were substance abuse (48%), phobia (41%), depressive disorders (35%), and somatoform disorders (21%).

**CONCLUSIONS**

Suicidal thoughts or behaviour from pre-adolescence to young adulthood (whether episodic or enduring) is associated with risk of psychosocial and psychiatric problems in young adults, especially if suicidality occurs before adolescence, in early adulthood, or is enduring.