CSA-associated risk for suicidal behavior in women is not limited to those with a history of depression

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Purpose of Our Study

The current report examines gender differences in risk for suicidal behavior in individuals with a history of CSA.

Results

- Those who were abused had significantly higher prevalence of MDD and suicidal behavior than those who were non-abused. As suicidal outcome severity increased from suicidal ideation through multiple suicide attempts, the odd ratios tended to increase for females; odds ratios for males remained consistent regardless of outcome severity. (Table 1).

- To control for the significant association between CSA and MDD, additional analyses included control for MDD and gender. Even while controlling for MDD and gender, persistent CSA-associated risk was found for suicidal ideation, persistent suicidal thoughts, suicidal plan, and multiple suicide attempts. (Table 2).

- A significant interaction between sex and history of CSA that predicted suicide attempt outside of a lifetime history of MDD was seen. The odds ratio for a risk of a suicide attempt in women with a history CSA attempting suicide, but no lifetime depressive episode, is 6.46 (95% CI 1.14 – 36.48). (Table 3).

Discussion

- In women, a history of CSA without a history of a lifetime depressive episode was associated with a 6-fold increased risk of lifetime suicide attempt. This finding differs from prior reports that instead observed that depression acts as a mediator between CSA and suicide (Silverman, Reinherz, & Giaconia, 1996).

- The strong relationship found in our study between sexual abuse and suicide attempts, even after controlling for depressive symptomatology is in agreement with other studies as well. (Martin et al., 2004; Sigfusdottir et al., 2007).

- These findings suggest that clinicians should be aware of the possibility of suicidal attempts in patients (primarily females) with a history of CSA that have never experienced a depressive episode.