

## G61 Suicides Among Youth in Geneva, Switzerland From 1993 to 2002

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After attending this presentation, attendees will understand the importance of knowing the circumstances of deaths in suicides among youth to help clinicians in their work in youth suicide prevention programs. The effort should be made to collect clinical data during medicolegal investigations.

This presentation will impact the forensic community and/or humanity by demonstrating how suicides among youth are such a tragic event, and that it is sometimes difficult to collect complete clinical information or do a full medicolegal investigation. Sparing the family from too many questions might be one of the reasons. In Geneva, Switzerland, lack of crucial information for clinicians who work to prevent suicides among youth is often observed. This study may help to create a close collaboration between suicides prevention programs and forensic medicine.

In Switzerland, suicides represent the leading cause of death in the age group 20 to 24 years, and the second most common cause of death in the 15 to 19 year age range. During the 1990s, the number of suicides in those age groups has remained stable, and has even decreased in Geneva between 1975 and 1996. The aim of this study was to look whether this tendency persisted during the years from 1993 to 2003. The authors analyzed all cases of suicide among youth less than 25 years of age in Geneva during this period. Suicide was defined through police and medicolegal investigations. Sixty-five suicides were found involving 50 male (77%) and 15 female (23%) victims. The minimum age was 12 years, and most of the victims were 18 years old or older (89%). No increase in the number of suicides throughout the years was found in the range being between 1 and 11 cases per year. For males, use of firearms was the most common method (38%), followed by fall from height (30%), hanging (16%), and drowning (10%). For females, fall from height was the most frequent (40%), followed by use of firearms and medication overdose (20% each), hanging (13%), and drowning (7%). Only 43% of the cases had toxicological testing, and the main drugs found were benzodiazepines, cannabis and cocaine. Blood alcohol concentration was analyzed in 53% of all deaths. Among them, 32% tested positive, half of them with a concentration below 52.5 mg/dl. Clinical data in medical charts were often incomplete, lacking in more than 70% of the cases. Although this study has brought very useful in formation about the circumstances of death, helping to better characterize suicide in youth, in Geneva, an effort should be made to collect more clinical data during medicolegal investigations. These data would be of help to clinicians who work in youth suicide prevention programs.

Suicides, Youth, Epidemiology