Body Modification: Personal Art or Cry for Help?

BY BRUCE JANCIN
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BROOMFIELD, Colo. — Body modification enthusiasts—individuals who undergo piercing, tattooing, and/or scarification—have a high rate of self-reported prior suicide attempts, David Lester, Ph.D., said at the annual conference of the American Association of Suicidology.

This observation is based upon a cross-sectional study of body art aficionados raises an intriguing question: Is body modification a marker for increased risk of suicidality, or is it instead a sort of substitute activity?

"As body modification is now becoming socially acceptable, maybe it's something that high-risk adolescents could do to reduce their suicidality," noted Dr. Lester, professor of psychology at Richard Stockton College of New Jersey, Pomona.

"Of course, that's a question that would require a longitudinal controlled study to properly answer," he said.

A detailed survey of 4,700 individuals who frequent a Web site devoted to hard-core body modification (www.bmexine.com) concluded that only 34% had never considered suicide.

Thirty-nine percent of respondents indicated they had only contemplated suicide, 27% responded that they had made one or more attempts.

"That strikes me as high," Dr. Lester said.

The median age of the survey respondents was 21 years. Eighty-eight percent were white, and roughly 45% were students.

Fifty-six percent of the body modification enthusiasts described themselves as heterosexual, 38% bisexual, and only 5% homosexual.

The type of body modification procedure individuals had undergone appeared to be related to their suicidality history. So did the anatomic site they selected for alteration.

For example, 27% of men and 46% of women with a pierced eyebrow—a relatively common form of body modification—reported previously attempting suicide, compared with 18% of men and 32% of women without an eyebrow piercing, he said.

Twenty-four percent of men with a tongue piercing reported previously attempting suicide, compared with 18% of those without this body modification. Given the very large sample size, that difference is highly statistically significant, Dr. Lester said.

Similarly, 37% of women with a pierced tongue reported prior deliberate self-harm, compared with 30% without a pierced tongue.

Altogether, of 25 possible anatomic sites for piercing, 9 were associated with increased suicidality.

Tattoos at nine specific anatomic sites were associated with an increase in self-reported suicide attempts.

"I would have predicted a lesser association with suicidality, given how much more popular tattoos have become since several decades ago, when they were viewed as deviant,"Dr. Lester observed.

Some of the highest rates of suicidality were found among individuals who engaged in scarification. For example, 39% of men and 48% of women with scarification of the upper arm or shoulder reported one or more prior attempts at suicide, compared with 18% and 32%, respectively, without this particular body modification.

Frequenters of a Web site devoted to body modification constitute a rather skewed survey population.

As a sort of quick-and-dirty assessment of survey reliability, Dr. Lester checked to see if three well-established associations in the suicidology literature held true among respondents to the body modification survey.

Study Finds Lower Suicide Rates Not Due to Antidepressant Use

BY BRUCE JANCIN
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BROOMFIELD, Colo. — The steep rise in antidepressant prescribing over the last several decades and the temporally associated decline in suicide rates in many Western countries are not causally related, Annette Erlangsen, Ph.D., said at the annual conference of the American Association of Suicidology.

Her 5-year study of the entire older population of Denmark—with accompanying data on individual prescriptions filled for antidepressants—showed that the vast bulk of the drop in the Danish suicide rate during the follow-up period involved the 96% of Danes not on an antidepressant.

"These findings do not provide information on whether SSRIs [selective serotonin reuptake inhibitors] or other types of antidepressants prevent suicides on an individual level," said Dr. Erlangsen of Pennsylvania State University, University Park.

"Nevertheless, our results show that the increased use of SSRIs has not had an impact on the change in the total suicide rate during the second part of life. SSRIs have not worked as a prevention strategy on a universal level," she added.

She presented a 5-year follow-up covering the years 1996-2000 involving all of the nearly 2.5 million Danes aged 50 years or older. She also restricted her study, which was based upon Danish national health registry data, to older Danes because suicide rates are highest in seniors, who also consume proportionately the largest amount of SSRIs.

During the study period, 1,416 older Danish men and 710 older women committed suicide. The suicide rate fell from 33.4/100,000 among older men in 1996 to 27.1/100,000 in 2000. Similarly, the annual suicide rate among older women dropped from 11.3/100,000 to 7.5/100,000.

A key finding in this study was that 90% of the decline in the suicide rate among older men and 76% of the decline in women was accounted for by individuals on antidepressants, she continued. The suicide rate in persons on an antidepressant was far higher than in those who weren't.

The rate did decline over time in antidepressant-treated patients, but only minimally—to a far lesser degree than in older Danes not on such therapy.

The suicide rate in individuals on tricyclic antidepressants proved similar to that in SSRI-treated patients. This was a surprising finding in light of the tricyclics' notorious lethality in overdose. The suicide rate actually rose slightly over time among Danes on atypical antidepressants. The most likely explanation is that these newer medications were largely reserved for patients who'd already failed to respond to other antidepressant classes.