

Suicidal Ideation and Schizophrenia

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ABSTRACT

Schizophrenia is a disorder characterized by alterations in thinking, perception, and behavior and also results in an impairment of cognitive function. Moreover, schizophrenia is a disease that affects social cognition and impairs the ability to interact with others and build social relationships.

The presence of suicidal ideation is quite common in schizophrenia. About 29 % of patients with schizophrenia manifest suicidal ideation. Patients who more frequently develop suicidal ideation have higher levels of illness awareness.

Fortunately, not all schizophrenia patients with suicidal ideation make self-harming gestures or commit suicide.

Assessment of suicidal risk represents good clinical practice. Risk stratification should always be assessed in all patients with schizophrenia. Checking for the presence of risk and protective factors is essential to identify patients with suicidal ideation who might switch to suicidal behavior.

To date, there are no approved medications for the treatment of suicidal ideation in schizophrenia. In our preliminary study, which enrolled 10 patients with schizophrenia, we observed that the use of 15 mg of vortioxetine, a new-generation multimodal antidepressant, acting on the serotonin transporter, has an affinity for other serotonergic receptors, which allows modulation of dopaminergic, noradrenergic, and glutamatergic neurotransmission.

Vortioxetine would appear to be effective in reducing suicidal ideation in patients with schizophrenia and also would have no major side effects. The effectiveness of vortioxetine was evaluated after 6 months and from preliminary data, it would appear to be long-lasting.

Further studies with larger randomized double-blind samples could be to elucidate the role of vortioxetine in treating suicidal ideation associated with schizophrenia.

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