The Role of Physicians in Suicide Prevention in South Korea

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Suicide rate of South Korea is the highest among OECD countries. Suicide is the fourth leading cause of death (all ages) in South Korea. More than 15,000 deaths by suicide occur each year in the South Korea. Suicide is the 1st leading cause of death in persons 10–39 years old.

The relationship between suicide and physical illness was reported to be meaningful. Up to 90% of people who die by suicide had contact with their primary care provider (PCP) in the year prior to their death. Up to 76% had contact with their PCP in the month prior to their suicide. These same individuals were more than twice as likely to have seen their PCP than a mental health professional in the year and month prior to their suicide. Therefore, the role of physicians as a gatekeeper or therapist could be important for suicide prevention.

In Korea, suicide prevention law legislated in March, 2011. The law included statement on national responsibility for suicide prevention including national policies, protection of life, and creation atmosphere for respect human life.

The Korean Medical Association made up the Task Force team for suicide prevention. The TFT will perform PR for physicians to increase awareness of suicide prevention, regular Suicide prevention education for physicians, and develop the system for managing suicide attempters who visited ER.
Suicide rate (2010)

- Number of suicides in 2010: 15,566
- Average 42.2 suicides/day
  - One suicide/ every 34 minute
  - One adolescent suicide/ every 25 hour
  - One elderly suicide (>65 yrs)/ every 1.5 hours

Statistics Korea (2010)

According to gender

According to age

Suicide prevention and physician

In Primary Care:
- Up to 90% of people who die by suicide had contact with their primary care provider (PCP) in the year prior to their death.
- Up to 75% had contact with their PCP in the month prior to their suicide.
These same individuals were more than twice as likely to have seen their PCP than a mental health professional in the year and month prior to their suicide.

Suicide Prevention Strategies in Primary Care
- Training staff to recognize and respond to warning signs of suicide
- Unveil awareness for depression
- Screen for suicidality in patients with key risk factors
- Educating patients about warning signs for suicide
- Restricting means for lethal self-harm

Suicide prevention policy in Korea

- National plan for suicide prevention (2009-2013)
  - Improving awareness of suicide
  - Prohibition from lethal methods
  - Mental health services for high risk group
  - Suicide prevention education for mental health workers
  - Suicide prevention law
  - Research on suicide prevention and surveillance system
  - Monitoring for keeping the suicide broadcasting guide
THE ROLE OF PHYSICIANS IN SUICIDE PREVENTION IN SOUTH KOREA

**Legislation**

- Suicide prevention law (March, 2011)
  - Statement on national responsibility for suicide prevention including national policies, protection of life, and creation atmosphere for respect human life

**Organizations for suicide prevention**

- National suicide prevention center
  - Under developing
- Local suicide prevention centers
  - 24 hours hotline (1577-0199)
- Mental health centers
- Korean association for suicide prevention
- Lifeline call center
- Call center (129) managed by ministry health and welfare

**Korean medical association – I**

- Task force team for suicide prevention
  - PR for physicians to increase awareness of suicide prevention
  - Suicide prevention education for physicians
  - System for managing suicide attempters who visited ER

**Activities of TFT**

- Symposium on “Suicide is a disease?”
  - 2011.7.19.
- Distribution of brochures and posters on signals for suicidality and coping skills for people at the risk to primary physicians

**Posters**

**Korean medical association – II**

- **MOU (Memorandum of Understanding)** between KMA and Korean association for suicide prevention
  - 5th Sept, 2011
  - Education of Physician for suicide prevention
  - Networking
  - Promotion of awareness
  - etc
Korean medical association – III

- Suicide prevention education every year in conferences by KMA
  - Epidemiology
  - General knowledge of suicide
  - Physical illness and suicide
  - Mental illness and suicide
  - Screen out for person at suicide risk
  - How to interview and manage person at suicide risk
  - Network systems

Thank You