

# **Suicide Warnings on Medications**

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#### **Crisis Resources for Suicide Prevention**

- 24/7 Crisis Hotline: 988 Suicide
  & Crisis Lifeline
  - o Call 988
  - Text 988
  - Chat988lifeline.org/chat
- 24/7 Crisis Text Line
  - Text HOME to 741-741
- Veterans Crisis Line
  - For veterans, active duty military & their family members
  - o Call 988, option 1
  - o Text 838-255
- 24/7 Trevor Project Suicide Hotline
  - For LGBTQ+ Youth
  - Text Start to 678-678
  - o Call 866-488-7386
  - Chat <a href="https://www.thetrevor">https://www.thetrevor</a> <a href="project.org/get-help/">project.org/get-help/</a>
- Go to your nearest local hospital, emergency department, or urgent care center
- If a life-threatening crisis is underway (such as a suicide attempt in progress), call 911.

# What medications have suicide warnings?

- Antidepressants: In 2004, the Food and Drug Administration (FDA) issued a black box warning for increased risk of suicidal thoughts or behavior in children and adolescents treated with antidepressant medications, such as selective serotonin reuptake inhibitors (SSRIs), serotonin norepinephrine reuptake inhibitors (SNRIs). These medications may be used to treat many mental health conditions, including anxiety, depression, obsessive compulsive disorder and bipolar disorder. The warning was later updated in 2006 to include adults under the age of 25.
- Antiepileptic Medications: In 2008, the FDA issued a warning for increased suicidal thoughts or behavior in people taking antiepileptic medications to treat seizures. Some of these medications are also used to treat mental diseases such as bipolar disorder.
- Montelukast (Singulair®): In 2020, the FDA issued a Boxed Warning for serious mental health side effects in people taking montelukast, which is approved to treat asthma and allergy. The FDA also recommended it be used to treat allergic rhinitis only in those whose symptoms were not relieved by other medication options.

### What are suicidal thoughts and behaviors?

- Wanting to die or end your life
- Coming up with a plan of how to end your life
- Physically hurting yourself with the intent to end your life
- Attempting suicide

# How did the FDA develop these warnings?

The FDA reviews clinical trials to see if people who received certain medications had more suicidal thoughts and behaviors than those who received placebo (sugar-pills). For antidepressants, the risk for suicidal thoughts or behavior in children, adolescents and adults under the age of 25 was slightly higher than placebo in the first few weeks of treatment. No patients died by suicide in the reviewed studies. For antiepiletic medications, the FDA assessed many studies as well and observed a similar increased risk of suicidal thoughts. The FDA warning was stregthened for montelukast to increase awareness among healthcare providers and patients/caregivers of the risks for mental health side effects.



#### Why are these medications still used?

There are limits to these findings of increased risk of suicidal thoughts and behaviors. The way information was collected on suicidal thoughts and behaviors was not the same in each study. The studies were designed to see how well the medications worked, not to see if there was any difference in suicidal thoughts and behaviors. For example, although the risk was two times higher with antidepressant medications, the total percent of suicidal thoughts and behavior was 4% with antidepressant medications and 2% with placebo. The increased risk was small and not the same in each study.

The risk of suicidal thoughts and behaviors, no matter how small, still matters. However, the risks of suicide associated with not treating depression are much higher. Antidepressants and antipsychotics work well in treating mental diseases and are recommended as standard treatment. Antiepileptic medications work well to treat seizures and are recommended as standard treatment.

#### What should you do if you have suicidal thoughts or behavior?

Mental health care providers are trained to recognize and treat mental health conditions. This includes psychiatric pharmacists, psychiatrists, psychiatric nurse practitioners, and social workers, to name a few. They can help patients better recognize and understand their symptoms, such as if they feel sad, worried, or have changes in their mood. Over time they can help patients feel better and show them how to cope with negative thoughts. If you ever feel unsafe or think you may harm yourself, there are resources you can use to seek help.



Go online to find more information about suicide warnings on medications and to view the references for this toolkit.

aapp.org/471018

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