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Suicide prevention for people diagnosed with schizophrenia: a new approach based on telematic strategies



A review of the scientific literature finds results suggesting that suicide prevention interventions using telephone contact appear to be feasible and effective in reducing suicidal ideation in patients with schizophrenia and psychotic symptoms.

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For decades, suicide has been one of the leading causes of premature death worldwide. People diagnosed with schizophrenia and psychotic symptoms are a particularly at-risk group, especially during periods of relapse and the first months after discharge from hospital. Considering this reality, it is essential to implement effective preventive actions.

While innovative strategies are needed to treat all people who have attempted suicide, less scientific evidence is available on the most effective and implementable approaches in patients with schizophrenia and psychotic symptoms. The treatment of schizophrenia involves a social, psychological, and pharmacological approach that is generally only moderately effective. It seems that this population is characterised by particular difficulties in adherence to treatment. And what could help to improve this lack of adherence to intervention? In the context of the COVID-19 pandemic, telemedicine proved crucial to increase opportunities for access to health services in at-risk populations. Telecommunication-based interventions - including videoconferencing, telephone contact and internet-based programmes - offer an opportunity for cost-effective suicide risk management. However, despite increasing research on the effectiveness of telehealth interventions, there

is a need for a global perspective on the scientific evidence published to date. For this reason, we have conducted a review of the literature on telephone-based suicide prevention programmes among patients with schizophrenia and psychotic disorders.

First, we have carried out the bibliographic search in the prestigious electronic databases PubMed, PsycInfo, Scopus and Web of Science. After, the articles have been selected by two reviewers independently, and then we have extracted the data, and analysed the methodological quality of the studies. A total of 198 publications of interest have been found, although in the end we have selected only 5 studies that meet the eligibility criteria in relation to the objectives.

The results of this literature review suggest that *telehealth* interventions are significantly associated with a decrease in the number and duration of hospitalisations, as well as a reduction in suicidal thoughts among patients with schizophrenia. Furthermore, in communities with low accessibility, such as rural populations, telehealth prevention programmes helped to solve problems related to treatment follow-up. What are the practical implications of these results? Although we currently have a limited number of studies with sufficient focus and methodological quality to derive robust conclusions, it shows that these interventions may hold great promise for the telemedicine prevention of suicidal behaviour in patients diagnosed with schizophrenia. In conclusion, enhancing the connection between patients and health professionals through telemedicine could favour adherence to treatment, help improve access to services for at-risk populations in remote areas, and offer opportunities to improve mental health care services.

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