Therapy Helps Teens with Suicidal Thoughts

Adolescents with suicidal thoughts and elevated depression had stronger and faster reduction of symptoms when treated with family therapy than with standard treatment in the community. Researchers from The Children’s Hospital of Philadelphia report these findings in the February 2010 issue of the Journal of the American Academy of Child and Adolescent Psychiatry.

Suicide is the third leading cause of death in American adolescents, accounting for more than 1,300 deaths in youths between the ages of 12 and 18 in 2005. An additional one million teens attempt suicide each year, leading to high emotional and financial costs to families and the health care system. Unfortunately, very few treatment studies have focused on this vulnerable age group or identified treatments with proven results.

In this study, leading investigator Guy S. Diamond, Ph.D., director of the Center for Family Intervention Science at the Children’s Hospital of Philadelphia, found that patients with severe suicidal thinking who participated in Attachment-based Family Therapy (ABFT), were at least four times more likely to have no suicide thinking at the end of the treatment or 3 months after treatment, than patients treated in the community. Patients in ABFT also showed a more rapid decrease in depression symptoms and stayed in treatment longer than in community care. This is one of the first treatment studies for teen suicidal ideation to show robust and statistically significant improvement over treatment as usual.

"Most treatment models mainly work with the adolescents alone, helping them to learn new coping and problem solving strategies," says Dr. Diamond. "But adolescents are highly influenced by their parents. Family conflict, chaos, and strife can contribute to youth suicide, while at the same time family love, trust, and communication can buffer against it. This therapy aims to resolve family conflicts and promote family strengths so that the appropriate bond of attachment can protect youth from self harm."

The journal article titled "Attachment-Based Family Therapy for Adolescents with Suicidal Ideation: A Randomized Controlled Trial" reports on 66 children between the ages of 12 and 17 who presented in primary care or emergency rooms with severe suicidal thinking and depressive symptoms. The average age was 15, about three quarters were African American and 83 percent were female. Parent participation was required.
“Parents are not viewed as the problem, but as the curative medicine” Dr. Diamond says. “They are the key to keeping lines of communication open in order to monitoring against suicidal behavioral. And while no treatment is perfect for all patients, helping any family through a youth’s suicide crisis is important.”

Dr. Diamond says his team’s future studies will focus on a broader population of patients, stronger comparison treatments, and long term outcomes to better assess treatment benefits.

An accompanying editorial by Dr. Neal Ryan of the University of Pittsburgh can be found in the same issue of the Journal of the American Academy of Child and Adolescent Psychiatry. About the study by Dr. Diamond and colleagues, Dr. Ryan states “This is a promising pilot study of a novel treatment. This paper also highlights how difficult psychotherapy studies are compared with pharmacological treatment studies. There are relatively few parameters to optimize in a pharmacological treatment study: which medication, best dose for the individual, best duration. There are many more parameters to optimize in a psychotherapy study: which different therapy components, in what order, how to individually optimize each of these decisions, etc.”

A grant from the Centers for Disease Control and Prevention supported this research. Diamond’s co-authors were Gregory Brown, Ph.D. from the University of Pennsylvania; Matthew B. Wintersteer, Ph.D., from Thomas Jefferson University; Robert Gallop, Ph.D., from West Chester University; and Gary M. Diamond, Ph.D., from Ben-Gurion University of Negev, Israel; Karni Shelef, Ph. D., of Achva Academic College of Israel; and Suzanne Levy, Ph.D., from Children’s Hospital.


REFERENCES


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The Journal’s purpose is to advance research, clinical practice, and theory in child and adolescent psychiatry. It is interested in manuscripts from diverse viewpoints, including genetic, epidemiological, neurobiological, cognitive, behavioral, psychodynamic, social, cultural, and economic. Studies of diagnostic reliability and validity, psychotherapeutic and psychopharmacological treatment efficacy, and mental health services effectiveness are encouraged. The Journal also seeks to promote the well-being of children and families by publishing scholarly papers on such subjects as health policy, legislation, advocacy, culture and society, and service provision as they pertain to the mental health of children and families.