

FROM THE DIRECTOR

In the last decade, the Center of Excellence for Suicide Prevention (CoE) has experienced significant growth in the number and variety of contributions it has made in support of its overarching mission: Prevent morbidity and mortality from suicidal behaviors among all Veterans by using a public health approach.

Some examples of these efforts can be found in our “Center of Excellence: A Decade in Review”. As we begin 2020, we enter a decade in which suicide prevention research will lead to ever-increasing publishable knowledge and actionable findings. All this and more will be needed to alter the trajectory of Veteran suicide. We expect the decade will also be marked by increasing collaborations with colleagues across the entire VA system of CoEs, Mental Illness Research, Education and Clinical Centers (MIRECCs) and other VA research and evaluation centers; not only with the Office of Mental Health and Suicide Prevention, but with several VA offices, national programs and with key academic, state and community partners outside the VA.

I look forward to disseminating the continuous impact and integral role of our Center’s contributions (and collaborations) in the service of improving Veterans’ mental health and reducing Veteran suicide in this new decade.

- Wilfred R. Pigeon, Ph.D.

CoE receives mention during meeting of Senate Armed Services Subcommittee on Personnel

The Senate Armed Services Subcommittee on Personnel held a hearing on preventing suicide among Military Servicemembers and Veterans on December 4, 2019. Among the panel of experts who provided testimony to this committee were Ronald C. Kessler, Ph.D., McNeil Professor of Health Care Policy, Harvard Medical School and Matthew Miller, Ph.D., MPH, Acting Director, Suicide Prevention Program and National Director of the Veterans Crisis Line, Veterans Health Administration.

During his opening testimony, Dr. Kessler applauded the Department of Defense and the Department of Veterans Affairs for their numerous efforts to prevent military and Veteran suicide. He also offered specific examples where more could be done. “VHA could also profit from an expansion of currently preliminary efforts to develop precision medicine guidelines for choosing among alternative interventions. ...[I am involved in] several initiatives of this sort with the VA Center of Excellence for Suicide Prevention in Canandaigua, New York. But it is clear that these kinds of initiatives have enormous potential value and should be the focus of more effort than they are currently.”

[Review the testimonies of all five panelists](#) as well as the recorded hearing on C-SPAN2 online.

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RESEARCH DIVISION

Medications and Suicide: High Dimensional Empirical Bayes Screening (iDEAS)

A review of 922 medications prescribed to almost 150 million people over an 11-year period indicates that just 10 of these drugs were associated with an increased risk of suicidal events. Forty-four drugs were linked to a decrease in suicidal events, including many that carry a “black box” label from the Food and Drug Administration warning of their association with suicidal behavior.

The study, co-authored by CoE’s Jill Lavigne, Ph.D., and published in the *Harvard Data Science Review*, used a novel statistical approach to examine the links between medications and suicide attempts.

Study uncovers critical link between pain intensity and suicide attempts

A CoE study conducted by researchers Lisham Ashrafioun, Ph.D., Todd Bishop, Ph.D., Peter Britton, Ph.D., Wilfred Pigeon, Ph.D. and statistician Cathleen Kane, was recently featured in *Vantage Point* - Official Blog of the U.S. Department of Veterans Affairs.

Using Veterans Health Administration data, the study looked at Veterans’ average pain intensity scores in the year after they began receiving pain specialty services to determine whether pain intensity was associated with suicide attempts.

The study found a close correlation between pain intensity and suicide risk and death rates that suggests reducing pain, or the perception of that pain, can help prevent Veteran suicide.

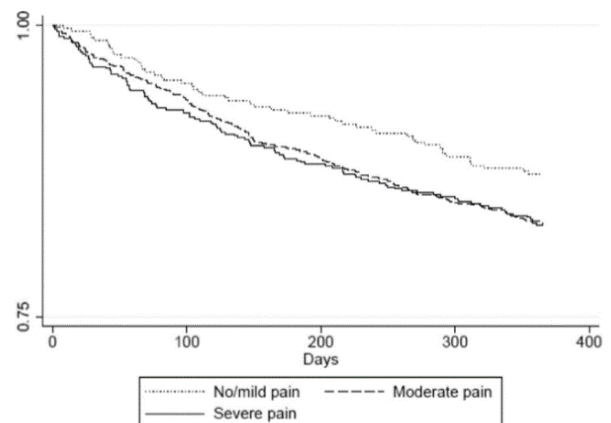


Figure 2. Survival estimates for suicide attempts after the index visit by level of pain intensity.

Domains of Functional Impairment and Their Associations with Thwarted Belonging and Perceived Burden in Older Adults

A special issue of *Clinical Gerontologist*, focused on Suicide Prevention, featured a paper by psychiatry faculty at the University of Rochester Medical Center, including CoE’s post-doctoral fellow Emily Bower, Ph.D. This paper examines associations between domains of functional impairment and two forms of social disconnection that are empirically and theoretically linked to suicide in later life (via The Interpersonal Theory of Suicide) -- low (or thwarted) belonging and perceived burden on others (Van Orden et al., 2010). Functional impairment and social disconnection are common characteristics of older adults who think about suicide or engage in suicidal behavior. Given the robust associations between suicide in later life and both functional impairment and social disconnection, understanding how these two risk factors may influence each other could increase understanding of the synergistic effects of risk factors for suicide.

SAVE-CLC: An Intervention to Reduce Suicide Risk in Older Veterans following Discharge from VA Nursing Facilities

Care transitions present a known period of medical risk for older adults and may pose an increased risk for suicide. SAVE-CLC, a telephonic intervention piloted at three VA sites, offers a feasible and acceptable solution to suicide risk in older Veterans returning to the community from VA nursing facilities (Community Living Centers or “CLCs”). Along with colleagues, CoE researcher [Kelsey Simons, Ph.D., LMSW](#), and post-doctoral fellow Emily Bower, Ph.D., used a [quality improvement approach to aid in the development of this intervention](#) to address the unmet need of integrating mental health care into discharge planning during care transitions.

EDUCATION & DISSEMINATION DIVISION



CoE welcomes guest speaker, Nicholas Allan, Ph.D.



On December 4, 2019, CoE employees welcomed guest speaker Dr. Nik Allan as he presented on “Refining Brief Interventions to Maximally Target Proximal and Distal Risk for Suicide.” Dr. Allan is an Assistant Professor of Clinical Psychology at Ohio University whose major research focus is on treatment of emotional distress disorders, substance use, and suicidal thoughts and behaviors.

During his presentation, Dr. Allan shared findings from diverse domains, including brief phone-based interventions to increase treatment engagement, brief interventions targeting anxiety sensitivity as a trans-diagnostic risk factor, and ecological momentary assessment as a tool to improve intervention effectiveness.



Upcoming VITAL webinar offerings

The Veterans Integration to Academic Leadership (VITAL) program continues to offer sessions as a part of its new webinar series for clinicians and mental health professionals on college and university campuses. The aim of this series is to provide healthcare teams, college and university health professionals with knowledge and resources to help them meet the needs of student Veterans.

Mark your calendar for the next free offerings:

Wednesday, February 5, 2pm EST. Presented by VBA Education Staff, this webinar will focus on “Understanding VA Education Benefits.” Registration via [TRAIN](#) (outside VA) or TMS (VA employees) available.

Wednesday, March 4, 2pm EST. “Not all of the answers are in a textbook: Understanding PTSD and treatment options” presented by Elissa McCarthy, Ph.D., National Center for PTSD.

Subscribe to [VITAL's mailing list](#) for registration information and receive notifications of upcoming offerings.

CENTER OF EXCELLENCE: A DECADE IN REVIEW



Data & Analytics Division

2012 The **Mortality Data Repository (MDR)**, formerly titled Suicide Data Repository (SDR), is created. This resource is used for ongoing VA mortality surveillance and program evaluation.

2017 The CoE begins compiling suicide-related leadership briefs on emerging data that impact care.

2019 The **2019 National Veteran Suicide Prevention Annual Report** is released, including the most recent analysis of Veteran suicide data from 2005 to 2017, which the CoE's Data & Analytics Division helped to compile.



Education & Dissemination Division

2012 The CoE is approved for a **VA Advanced Fellowship Program in Mental Illness Research and Treatment** to prepare the next generation of leaders and innovators in suicide prevention research, education and clinical care.

2017 **Upstate New York Veterans Research and Engagement Board (VREB)** is created to promote innovative, Veteran-centered research informed by stakeholder involvement that anticipates and addresses the needs of all Veterans.

2017 The **VA Suicide Prevention Training Council** is created after a landmark meeting hosted by the CoE to enhance and standardize suicide prevention training efforts across the VA enterprise.



Research Division



591
peer-reviewed articles
published by
CoE researchers



342
presentations given
by CoE faculty



4 times
as many grant
applications in
2019 vs. 2010



33
currently funded
studies