

自殺特異的診断カテゴリー： 自殺行動症・自殺危機症候群・ 急性自殺感情障害を中心に

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Suicide-specific diagnostic categories: Focusing on suicidal behavior disorder, suicide crisis syndrome, and acute suicidal affective disturbance

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Abstract

Background : Though suicide itself has not been classified as an independent mental disorder until today, introducing the suicide-specific diagnostic categories as new mental disorders might contribute to suicide prevention.

Purpose : To summarize suicide-specific diagnostic categories, particularly on suicidal behavior disorder (SBD), suicide crisis syndrome (SCS), and acute suicidal affective disturbance (ASAD).

Method : Narrative non-systematic review on suicide-specific diagnostic categories.

Results : SBD deals mainly on up to 2 years risk of suicide compared to relatively short-term risk (supposedly 30 to 60 days long from the point of clinical evaluation) of suicide with SCS and ASAD. From clinical demands of imminent suicide risk management, establishment of acute suicide risk syndrome (ASRS) including SCS and ASAD as a mental disorder might be recommended. But as noted by a systematic review, clinical instruments for suicidal behavior have only limited positive predictive values which indicates the suicide-specific diagnostic categories might also have rather poor predictive merits in suicide prevention. With the eligibility criteria on a proposed clinical state as a diagnostic entity known as Blashfield's criteria, three of all SBD, SCS, and ASAD are not justified as introducing new clinical-diagnostic entities.

Conclusion : Though a critical appraisal of suicide-specific diagnostic categories in this article suggests only limited clinical utility of them at best, the needs for research of ASRS for the development of suicide preventive interventions are increasing because of high number of suicides.

Key words

suicide risk, eligibility criteria, suicide-specific diagnosis, acute suicidal state

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