



Self-harm data, 2018

CHO Area 3

For the period from 1 January to 31 December 2018, the Registry recorded 12,588 self-harm presentations to hospital that were made by 9,785 individuals nationally. Table 1 presents an overview of the number of persons with self-harm presentations in CHO 3 and LHOs within CHO 3 during 2018, and the corresponding European age-standardised rate per 100,000 population.

Table 1: Number of persons with self-harm presentations in CHO 3 and person-based European age-standardised rates (EASR) per 100,000

		Persons	Age-standardised rate per 100,000
Clare	Male	83	158
	Female	106	192
Limerick	Male	153	204
	Female	211	288
Tipperary North/ East Limerick	Male	83	163
	Female	119	224
CHO Area 3	Male	319	185
	Female	436	241

In 2018, 319 male and 436 female persons presented to EDs in CHO Area 3 following an act of self-harm. This resulted in a total of 755 individuals presenting to the EDs in this area during 2018. These 755 individuals were treated for a total of 929 self-harm presentations.

Taking into account the population, the rate of persons presenting to hospital following an act of self-harm was 185 and 241 per 100,000 for males and females respectively. Nationally, the rate of self-harm for males and females was 193 and 229 per 100,000 respectively.



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Table 2 presents a breakdown of the total number of presentations in CHO 3 by age and gender.

Table 2: Number of presentations in CHO 3 by age and gender

	0-19yrs	20-24yrs	25-34yrs	35-44yrs	45-54yrs	55+yrs	Total
Male	46	64	110	74	52	34	380
Female	153	86	116	94	50	50	549

In 2018, there were a total of 929 self-harm presentations to EDs in CHO Area 3. There were 380 male and 549 female presentations. Presentations were highest for males aged 25-34 years (29%) and females aged under 20 years (28%). More than one in five (21%; 199) self-harm presentations involved individuals younger than 20 years of age.

Table 3 presents an overview of the methods of self-harm reported.

Table 3: Method of self-harm

Drug overdose	Alcohol*	Poisoning	Attempted Hanging	Attempted drowning	Self-cutting
598 (64%)	393 (42%)	22 (2%)	81 (9%)	73 (8%)	260 (28%)

*This includes presentations where alcohol was involved (not just where alcohol was the main method of self-harm)

Drug overdose was the most common method of self-harm, involved in 64% of presentations. Alcohol was involved in 42% of presentations. Self-cutting was the only other common method, involved in 28% of presentations. There were 81 presentations involving attempted hanging while 73 involved attempted drowning and 22 presentations involved poisoning.

Table 4 presents a breakdown of the number of persons in CHO 3 who had repeat presentations.

Table 4: Repeat presentations by persons in CHO 3

	Male	Female	Total
Total number of persons	319	436	755
Number who repeated	47	62	109
% repeating	15%	14%	14%

There were 755 individuals treated for 929 self-harm presentations in 2018. This implies that almost one in five (174, 19%) of the presentations in 2018 were due to repeat presentations.



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Based on persons, repetition was slightly higher for males than females (15% and 14% respectively).

Table 5 presents a breakdown of the methods of self-harm reported and the number of repeat presentations for each method.

Table 5: Repeat presentations by method

	Drug overdose	Alcohol*	Poisoning	Attempted Hanging	Attempted drowning	Self-cutting
Number of presentations	598	393	22	81	73	260
Number repeat presentations	102	65	<10	21	11	62
Percentage of presentations due to repetition	17%	17%	-	26%	15%	24%

*This includes presentations where alcohol was involved (not just where alcohol was the main method of self-harm)

Repetition varied according to the method involved in the self-harm act (Table 5). Of the most commonly reported methods of self-harm which are drug overdose, alcohol and self-cutting, the percentage of presentations due to repetition were 17%, 17% and 24% respectively. Although attempted hanging as a method is not reported on a frequent basis (9% of methods reported overall), the repetition percentage was high (26%).

Table 6 presents an overview of the number of presentations to the three hospitals in CHO 3 by residents and non-residents.

Table 6: Number of presentations by residents and non-residents to hospitals in CHO 3

	Residents	Non-residents	Total
University Hospital Limerick	788	113	901
South Tipperary General Hospital	42	281	323
Mid-Western Regional Hospital, Ennis	<10	12	<22

The three main hospitals which individuals presented to in this area were University Hospital Limerick, South Tipperary General Hospital and the Mid-Western Regional Hospital, Ennis. For all self-harm presentations to University Hospital Limerick, the majority of presentations were made by residents of CHO 3. Of the presentations at South Tipperary General Hospital and the Mid-Western Regional Hospital, Ennis, the majority of presentations were by non-residents of CHO 3.



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Table 7 presents a breakdown of the recommended next care for each presentation to CHO 3.

Table 7: Recommended next care for presentations of hospital-treated self-harm in CHO 3

	Number	Percentage
General admission	129	14%
Psychiatric admission	55	6%
Left without being seen/ against medical advice	113	12%
Not admitted	632	68%
Total	929	100%

Most commonly, 68% of presentations were discharged following treatment in the emergency department. Of all self-harm presentations, 14% resulted in admission to a ward of the treating hospital and 6% were admitted for psychiatric inpatient treatment from the emergency department. Finally, 12% of presentations left the emergency department before a next care recommendation could be made.

Figure 1 presents a breakdown of the number of presentations by males and females by time of attendance.

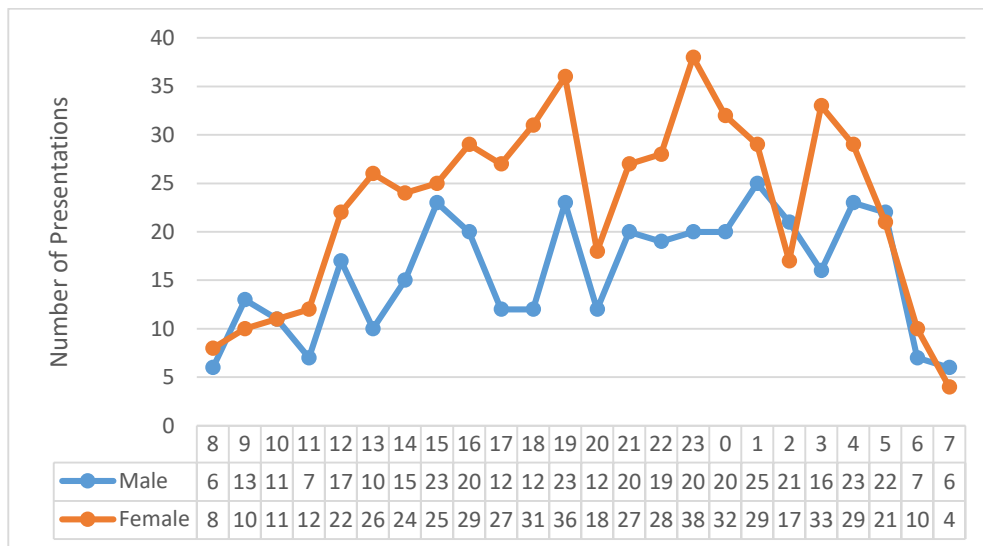


Figure 1: Self-harm presentations for males and females by time of attendance



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The number of presentations by both males and females fluctuated throughout the day. However, a pattern in the number of self-harm presentations was observed over the course of the day with an increase in presentations from 8 a.m. onwards for both males and females. The peak time for females was 11 p.m. while it was 1 a.m. for males.

Table 8 presents a breakdown of the number of presentations per calendar month in 2018.

Table 8: Self-harm presentations by month of attendance

Month	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
Number	81	85	80	73	89	75	65	85	75	79	74	68	929

The monthly average number of self-harm presentations to hospitals in 2018 was 77. In 2018, May saw more self-harm presentations than any other month (n=89) while July saw the fewest presentations for the year (n=65).

*To reference this data, please use the following citation: Griffin, E, McTernan, N, Wrigley, C, Nicholson, S, Arensman, E, Williamson, E, Corcoran, P, (2019). National Self-Harm Registry Ireland Annual Report 2018. Cork: National Suicide Research Foundation. For further information, please contact Mary Joyce: m.joyce@ucc.ie +353 21 420 5542 | www.nsrif.ie