



Interim Report January to June 2018

This report provides a summary of data collected by the National Self-Harm Registry Ireland (NSHRI) for the period January to June 2018¹. The Registry is a national system of population monitoring for the occurrence of hospital-treated self-harm. Since 2006, all hospital emergency departments are covered by the Registry. Data are collected by independently trained data registration officers. The Registry is operated by the National Suicide Research Foundation, and is funded by the HSE's National Office for Suicide Prevention.

Hospital-treated self-harm in Ireland

In the first six months of 2018, the Registry recorded 6,124 presentations to hospital due to self-harm. This is 4% higher than the number recorded for the same period of 2017 (n=5,879). More than half of the presentations were made by women (n=3,389; 55%). Just under half (49%) of presentations were by persons under 30 years of age.

In total, 5,052 individuals were treated following self-harm. Thus, 1,072 (18%) of the presentations recorded were due to repetition.

Drug overdose was the most common method of self-harm, involved in 62% of cases. Alcohol was involved in 29% of cases (26% for women and 33% for men). Self-cutting was the only other common method, involved in 30% of cases. These findings are in line with the equivalent figures for the same period of 2017.

There were 525 acts involving attempted hanging recorded, accounting for 9% of all self-harm presentations. This number is 22% higher than the first six months of 2017 (19% and 27% higher for men and women, respectively).

¹ This report is based on provisional data.

Incidence rates of self-harm

Taking into account the population, the national rate of persons presenting to hospital following self-harm was 221 per 100,000 in the first six months of 2018. The national rate for the first six months of 2018 was 2% higher than the rate for the same period of 2017 (8% higher for men, 2% lower for women). The rate for women was 22% higher than the rate for men.

	2017	2018	Change
Men	185	200	+8%
Women	247	243	-2%
All	216	221	+2%

Table 1: Person-based European age-standardised rate (EASR) of self-harm per 100,000 2017 and 2018 (January to June)

The highest rates of self-harm, for both genders, were among adolescents and young adults. The peak female rate was 819 per 100,000, among 15-19 year olds. The peak rate for men was 573 per 100,000 among 20-24 year olds. In many age groups there was little difference in incidence rates by gender. The exception was among 10-19 year-olds where hospital presenting self-harm was more than twice as common among girls. This has been a consistent pattern in recent years. Among 25-29 year-olds, the rate for men was 46% higher than the rate for women (516 vs 354 per 100,000). This difference is higher than that reported in previous years.

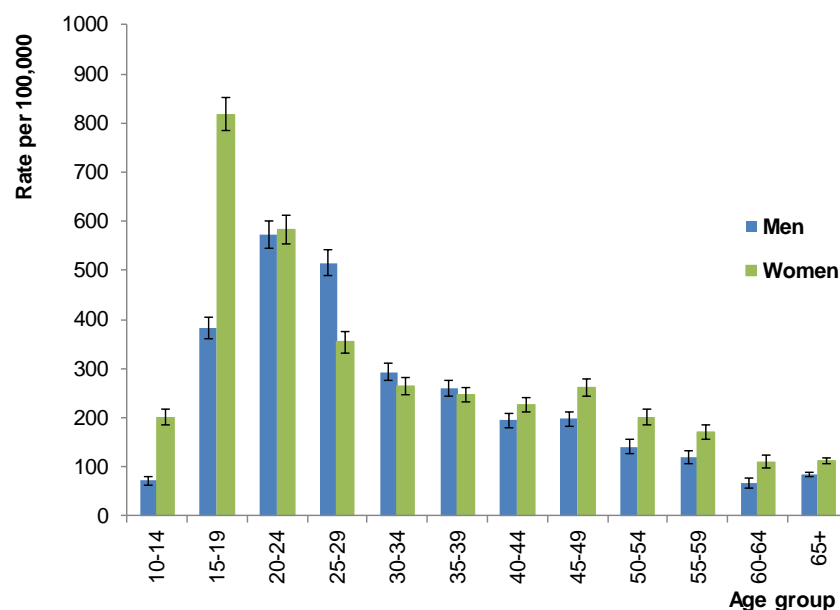


Figure 1: Person-based rate of self-harm in Ireland by age and gender, Jan-Jun 2018

Self-harm according to HSE Community Healthcare Organisation

The incidence of self-harm was highest in Community Healthcare Organisation (CHO) Area 5 (South Tipperary, Carlow/ Kilkenny, Waterford and Wexford), at 244 per 100,000 and lowest in CHO Area 6 (Wicklow, Dun Laoghaire and Dublin South East) at 172 per 100,000. In CHO Area 5, the rate of self-harm in men and women was 7% and 14% higher than the national average, respectively. In CHO Area 6, the rate of self-harm in men and women was 32% and 15% lower, respectively.

The rate of self-harm for men ranged from 136 per 100,000 in CHO Area 6 to 213 per 100,000 in CHO Area 5 (see figure 2a). The rate of self-harm for women ranged from 207 per 100,000 in CHO Area 6 to 277 per 100,000 in CHO Area 5 (see figure 2b). While overall rates of self-harm were higher for women, the magnitude of this difference varied according to CHO region. The rate of self-harm for women than for men was more than 50% higher in CHO Areas 2 and 6 (55% and 52%, respectively), with a smaller difference recorded in CHO Areas 4 (Kerry and Cork) and 7 (Dublin South City, Dublin South West) (8% and 11%, respectively).

	Men		Women		All	
	Persons	Rate	Persons	Rate	Persons	Rate
CHO Area 1	165	193	203	225	368	208
CHO Area 2	166	159	260	247	426	203
CHO Area 3	169	190	230	255	399	222
CHO Area 4	341	210	371	227	712	218
CHO Area 5	241	213	324	277	565	244
CHO Area 6	125	136	196	207	321	172
CHO Area 7	366	207	401	230	767	218
CHO Area 8	231	165	332	232	563	198
CHO Area 9	296	188	377	244	673	216

Table 2: Person-based European age-standardised rate (EASR) of self-harm in Ireland by HSE Community Healthcare Organisation (CHO) area of residence, January to June 2018

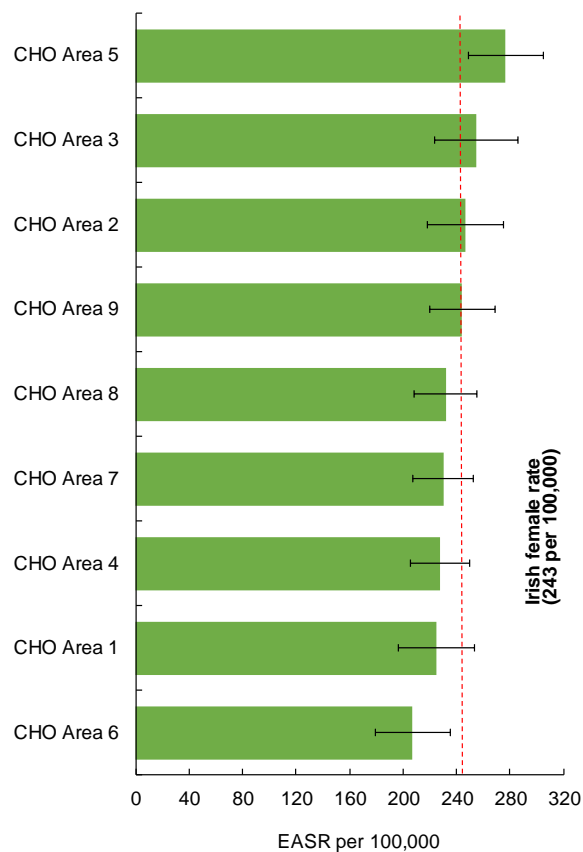
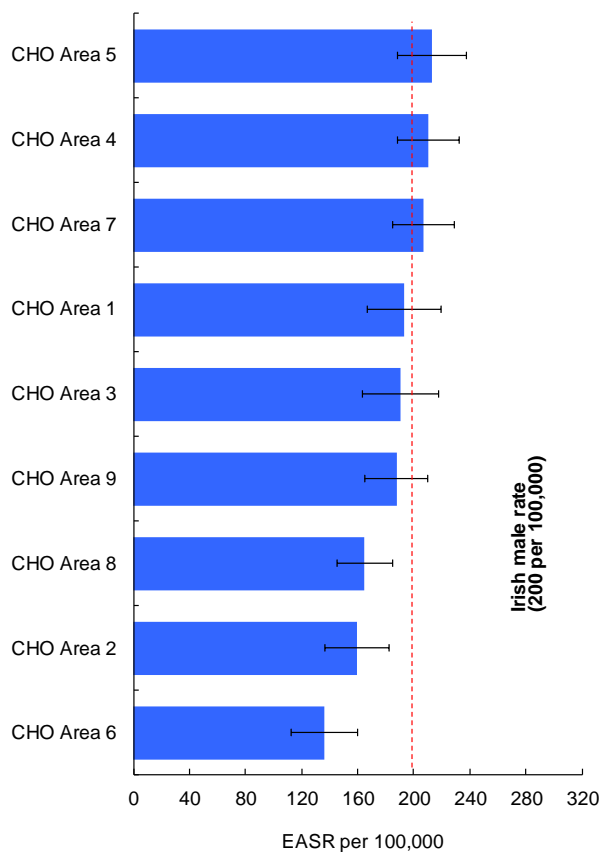


Figure 2a & 2b: Person-based European age-standardised rate (EASR) of self-harm in Ireland by CHO region for men and women, January to June 2018

Conclusion

The outcomes of the Registry continue to highlight the importance of improving services for people engaging in self-harm, in line with strategic goals of *Connecting for Life*, Ireland’s National Strategy to Reduce Suicide, 2015-2020. Addressing this objective involves access to real-time surveillance data on self-harm, improving the provision of psychosocial and psychiatric assessment for self-harm patients in the emergency department, delivering targeted interventions for self-harm and restricting access to means.



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