

## Self-harm data, 2018 CHO Area 4

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 4 and LHOs within CHO 4 during 2018, and the corresponding European age-standardised rate per 100,000 population.

Table 1: Number of persons with self-harm presentations in CHO 4 and person-based European agestandardised rates (EASR) per 100,000

		Persons	Age-standardised rate per 100,000
Kerry	Male	146	241
	Female	183	274
Cork North Lee	Male	244	265
	Female	237	262
Cork South Lee	Male	184	185
	Female	200	196
Cork North	Male	65	153
	Female	67	165
Cork West	Male	34	143
	Female	33	147
CHO Area 4	Male	673	216
	Female	720	221

This data is provided via the National Self-Harm Registry, Ireland. For further information, please contact: Mary Joyce, Registry Manager, <u>m.joyce@ucc.ie</u> or Caroline Daly, Postdoctoral Researcher, <u>carolinedaly@ucc.ie</u>



In 2018, 673 male and 720 female persons presented to EDs in CHO Area 4 following an act of selfharm. This resulted in a total of 1,393 individuals presenting to the EDs in this area during 2018. These 1,393 individuals were treated for a total of 1,692 self-harm presentations.

Taking into account the population, the rate of persons presenting to hospital following an act of selfharm was 216 and 221 per 100,000 for males and females respectively. Nationally, the rate of selfharm for males and females was 193 and 229 per 100,000 respectively.

Table 2 presents a breakdown of the total number of presentations in CHO 4 by age and gender.

Table 2: Number of presentations in CHO 4 by age and gender

	0-19yrs	20-24yrs	25-34yrs	35-44yrs	45-54yrs	55+yrs	Total	
Male	126	149	214	128	108	95	820	
Female	252	136	179	102	113	90	872	

In 2018, there were a total of 1,692 self-harm presentations to EDs in CHO Area 4. There were 820 male and 872 female presentations. Presentations were highest for males aged 25-34 years (26%) and females aged under 20 years (29%). More than one in five (22%; 378) 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
1,038 (61%)	325 (19%)	31 (2%)	135 (8%)	52 (3%)	385 (23%)

\*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 61% of presentations. Alcohol was involved in 19% of presentations. Self-cutting was the only other common method, involved in 23% of presentations. There were 135 presentations involving attempted hanging while 52 involved attempted drowning and 31 presentations involved poisoning.



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

	Male	Female	Total
Total number of persons	673	720	1,393
Number who repeated	89	84	173
% repeating	13%	12%	12%

Table 4: Repeat presentations by persons in CHO 4

There were 1,393 individuals treated for 1,692 self-harm presentations in 2018. This implies that almost one in five (299, 18%) of the presentations in 2018 were due to repeat presentations. Based on persons, repetition was slightly higher for males than females (13% and 12% 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	1038	325	31	135	52	385
Number repeat presentations	168	55	<10	20	10	81
Percentage of presentations due to repetition	16%	17%	-	15%	19%	21%

\*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 16%, 17% and 21% respectively. Although attempted hanging and attempted drowning are not reported as frequently as other methods, the repetition rates were similar to the more commonly used methods (15% and 19% respectively).



Table 6 presents an overview of the number of presentations to the four hospitals in CHO 4 by residents and non-residents.

	Residents	Non-residents	Total
Cork University Hospital	619	44	663
Mercy University Hospital	629	85	714
University Hospital Kerry	390	21	411
Bantry General Hospital	34	<10	<44

Table 6: Number of presentations by residents and non-residents to hospitals in CHO 4

The four main hospitals which individuals presented to in this area were Cork University Hospital, Mercy University Hospital, University Hospital Kerry and Bantry General Hospital. For all self-harm presentations to each of the four hospitals, the majority of presentations were made by residents of CHO 4.

Table 7 presents a breakdown of the recommended next care for each presentation to CHO 4.

Table 7: Recommended next care for presentations of hospital-treated self-harm in CHO 4

	Number	Percentage		
General admission	428	25%		
Psychiatric admission	128	8%		
Left without being seen/ against medical advice	167	10%		
Not admitted	969	57%		
Total	1692	100%		

Most commonly, 57% of presentations were discharged following treatment in the emergency department. Of all self-harm presentations, 25% resulted in admission to a ward of the treating hospital and 8% were admitted for psychiatric inpatient treatment from the emergency department. Finally, 10% 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.

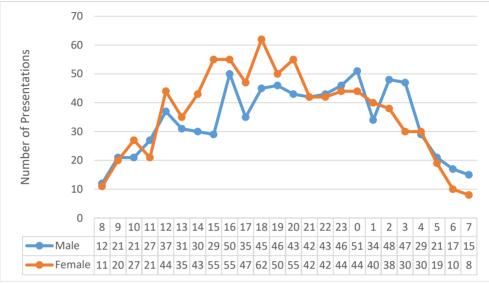


Figure 1: Self-harm presentations for males and females by time of attendance

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 males was at midnight while it was 6 p.m. for females.

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	143	129	114	178	151	146	130	138	118	147	152	146	1692

The monthly average number of self-harm presentations to hospitals in 2018 was 141. In 2018, April saw more self-harm presentations than any other month (n=178) while March and September saw the fewest presentations for the year (114 and 118 presentations respectively).

\*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: <u>m.joyce@ucc.ie</u> +353 21 420 5542 | www.nsrf.ie